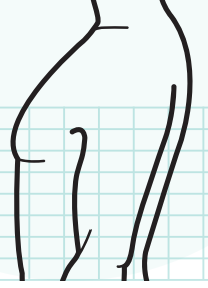


# BÖLÜM 21

## Pnömotoraks



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### Giriş

Eski Yunan dilinde πνεῦμα (*pneuma*; nefes, ruh, hava) and θώρακας (*thorakas*; göğüs) kelimelerinden köken alan pnömotoraks, kısaca akciğer ve göğüs duvarı arasında, plevral boşlukta hava birikimi olarak tanımlanır. Akciğerin dışında ve göğüs boşluğun içinde biriken bu hava, akciğerin kısmi ya da tam çökmesine neden olarak solunum işleyişini ve dramatik şekilde ventilasyon ve gaz değişimini bozma potansiyeline sahiptir.

Etiyolojisine ve patofizyolojisine göre farklı sınıflamaları mevcuttur. Etiyolojik sınıflama spontan (primer ve sekonder) ve travmatik olarak ikiye ayrılırken, patofizyolojik olarak açık, kapalı veya tansiyon pnömotoraks olarak üç gruba ayrılır.

Türk İslam tıp literatürüne bakıldığında Sabuncuoğlu tarafından 1465 yılında yazılan

*Cerrahiyetül Haniyye* isimli el yazması kitapta pnömotoraks ve tedavisinin 15. Yüzyılda Anadolu'da bilindiğini görmek mümkündür(1). On beşinci yüzyıl Türk hekimlerinden olan ve tam adı ile Şerafeddin bin Ali bin el-Hac İlyas Sabuncuoğlu'nun, Amasya Darüşşifasında 14 yıl hekimlik yaptığı ve üç eserin yazarı olduğu bilinmektedir: Terceme-i Akrabadin, Mücerrebname ve Cerrahiyetü'l-Haniyye. İlk resimli Türkçe tıp ders kitabı sayılan Cerrahiyetü'l-Haniyye, çeşitli hastalıkların tedavilerini anlatır. Cerrahiyetü'l-Haniyye'nin sadece üç adet el yazması nüshası günümüze kadar ulaşmıştır. İki nüsha Türkiye'de (İ.Ü. İstanbul Tıp Fakültesi Tıp Tarihi AD ile Fatih Millet Kütüphanesi), üçüncü nüsha ise Fransa'dadır (Paris'teki Ulusal Kütüphane-Bibliothèque Nationale). Prof. Dr. İlter Uzel her üç nüshayı da inceleyerek, Cerrahiyetü'l-Haniyye'nin transkripsiyonu yapılmış metnini Türkçeye kazandırmış ve böylece Sabuncuoğlu ve Cer-

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- VATS doğum sonrası için düşünülmelidir. (D)

### Katameniyal Pnömotoraks

- Pnömotorakslı kadınlarda gözden kaçır. (C)
- Kombine cerrahi girişim ve hormonal tedavi için kadın doğum ve göğüs cerrahisinin birlikte hareket etmesi gerekir. (D)

### Pnömotoraks ve AIDS

- HIV enfeksiyonu için uygun tedaviye ek olarak erken dönem tüp torakostomisi ve cerrahiye yönlendirmek gerekir. (D)

### Pnömotoraks ve Kistik Fibröz

- Erken ve agresif tedavi için erken dönemde cerrahiye yönlendirilmesi gerekir. (C)
- Plöredezi de içiren plevral işlemler olası akciğer nakli sonuçlarına belirgin olumsuz etki etmez. (D)

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