

# 18. BÖLÜM

## ÜST EKSTREMİTE VENÖZ SİSTEMDE GİRİŞİMSEL RADYOLOJİK İŞLEMLER

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### GİRİŞ

Üst ekstremitte venöz sistem işlemleri girişimsel radyoloji pratiğinde sıklıkla karşılaştığımız bir bölümdür. Santral venöz kateter işlemleri, arteriyovenöz fistülografi ve venöz darlıklara müdahale temel işlemleri oluşturmaktadır. Venöz vasküler yapıların görüntülenmesi, üst ekstremitte vasküler hastalıklarının değerlendirilmesinde anahtar rol oynamaktadır. Klinik muayene bulguları, laboratuvar değerleri ve görüntülemenin kombine kullanımı kompleks durumlara yaklaşımda önemlidir. Vasküler yapıların görüntülenmesinde B mod ultrasonografi, renkli doppler ultrasonografi, BT/MR anjiyografi ve DSA kullanılmaktadır. Kontrast madde kullanılmaması, radyasyon olmaması ve kolay ulaşılabilir olması nedeniyle ultrasonografik ve doppler ultrasonografik değerlendirme ilk görüntüleme seçeneği olmalıdır.

### ÜST EKSTREMİTE VENÖZ SİSTEM ANATOMİSİ

Üst ekstremitte venöz vasküler yapıların anatomisi derin venöz sistem ve yüzeysel venöz sistem olarak ayrılmaktadır. Bu iki sistem arasında perforan ven olarak adlandırılan bağlantılar bulunmaktadır. Perforan venler sefalik ve/veya bazilik ven tıkanıklıklarında kanı santrale ulaştırmada önemli rol oynarlar. Derin venöz sistemde venöz yapılar arteriyel sisteme eşlik etmektedir. Brakiyal venler, radial ve ulnar venler kol /ön kol bölgesinde aynı isme sahip arterlere eşlik ederek derin venöz sistemi oluşturmaktadır.

Yüzeysel venleri ise el sırtında metakarpal kemikler üzerinde bulunan dorsal venöz ağın (arcus venosus dorsale manus) iç tarafından başlayan bazilik ven ve dış tarafından başlayan sefalik ven oluşturmaktadır. Bazilik ven kolun dis-

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