

20. BÖLÜM

ALT EKSTREMİTE VENLERİ GİRİŞİMSSEL RADYOLOJİK İŞLEMLER

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| GİRİŞ

Alt ekstremitte venöz sistem, birçok yüzeysel ve derin yerleşimli yapılardan oluşmakta olup büyük hacimlerdeki dokuların kanını drene ederler. Bu venöz yapılar diğer vücut alanlarındaki venöz yapılara göre daha uzun seyir göstermeleri ve birbirleri ile olan bağlantıları nedeniyle daha farklı bir yaklaşıma ihtiyaç duymaktadırlar. Stazın yoğun olduğu alt ekstremitelerde yer çekiminin de etkisi ile birçok patolojik durumlar ortaya çıkabilmekte ve bu durumlar ağrı, şişkinlik, kozmetik bozukluklar gibi fokal sonuçlara neden olabileceği gibi pulmoner emboli ve sepsis gibi daha ciddi sistemik durumlara da yol açabilmektedir. Özellikle tedavi edilmeyen veya geç/yetersiz tedavi edilen bu tür durumlar kronikleşmekte ve ciddi morbiditeye neden olmaktadır. Alt ekstremitte venöz sistem hastalıklarında patolojilerin genellikle daha geniş alanlarda multifokal odaklar halinde olması ve çoğu zaman sadece medikal işlemlerin yeteri kadar başarılı olmaması nedeniyle, radyoloji kılavuzluğunda girişimsel işlemler oldukça yoğun biçimde kullanılmaktadır. Günümüzde alt ekstremitte venlerinde akut ven trombozu, kronik venöz tromboz, post-flebitik sendrom, venöz yetmezlik, septik tromboflebit, venöz malformasyonlar ve anevrizmalar girişimsel radyolojik işlemler ile daha başarılı ve güvenilir şekilde tedavi edilmektedir (1).

| ANATOMİ

Derin venler

Posteriyör tibial ven

Posteriyör tibial venler, lateral ve medial plantar venlerin oluşturduğu, ayak tabanı, ayak bileği eklemi ve bacağın posteriyör kesim kaslarının drenajını sağ-

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na gelebilmektedir. Rezidüel venlerin tedavisinde de ultrason kılavuzluğunda köpük skleroterapi uygulanabilmektedir. Nadiren, uygulanan sklerozan ajan nedeniyle cilt ülserleri bildirilmiştir (96).

| PARKES WEBER SENDROMU

Parkes Weber sendromu, Klippeil-Trenaunay sendromundaki özelliklere benzer bulgular göstermekte olup farklı olarak bulguları arasında arteriovenöz malformasyonu da içerir (97). Klippeil-Trenaunay sendromlu hastaların venöz patolojilerinin yönetiminde uygulanan endovasküler tedavi seçenekleri bu bozuklukta da kullanılmaktadır. Ek olarak arteriovenöz malformasyonların tedavisinde endovasküler koil embolizasyonu da başarı ile kullanılmaktadır (98).

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