Bölüm 14

SIVI YÖNETİMİNİN DEĞERLENDİRİLMESİNDE ULTRASONOGRAFİNİN YERİ

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GİRİŞ

Sıvı tedavisi, yoğun bakım sürecinde tedavilerin ayrılmaz ve en önemli parçasıdır. Organ hasarını önleyebilmek için yeterli volüm ve uygun sıvı verilmesi hayati öneme haizdir. Düzeltilmemiş sıvı açığı veya hipovolemi uygunsuz vazopressör kullanımına, artmış organ hipoperfüzyonuna ve iskemiye yol açabilir [(1)]. Yoğun bakım ünitelerine (YBÜ) alınan hastaların % 30'da dolaşım bozukluğu saptanmıştır [(2)]. Dolaşım bozukluğu; hipovolemiye, kardiyak ve vazomotor nedenlere veya hepsine birden bağlı olarak ortaya çıkabilir ve artmış YBÜ mortalitesi ile ilişkilendirilmiştir [(3)].

YBÜ hastalarında ciddi yanıklar, kafa travmaları, sistemik enfeksiyonlar ve böbrek yetmezliği gibi pek çok durum hipovolemi veya sıvı açığı ve elektrolit imbalansı ile ilişkilendirilmiştir. Hipervolemi veya aşırı volüm yükü ise akut respiratuar distres sendromuna bağlı (ARDS) sepsisi tetikleyebilir, hipoksemiyi kötüleştirebilir ve artmış hava yolu basıncına neden olabilir. Bunun yanında önceki çalışmalarda kalp dolum basınçlarının yakın takibinin ARDS nedeni ile ventilatörde olan hastaların prognozunu iyileştirdiği gösterilmiştir [(1)].

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