BÖLÜM 113

KAS İSKELET SİSTEMİ TÜMÖRLERİNDE CERRAHİ ALAN ENFEKSİYONLARINI ÖNLEME STRATEJİLERİ

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GİRİŞ

Antimikrobiyal profilaksi, yüksek enfeksiyon oranıyla ilişkili cerrahi prosedürlerde ve enfeksiyonun ciddi sonuçlarının olduğu bazı temiz prosedürlerde enfeksiyon olası olmasa bile faydalı olabilir. Bazı temiz cerrahi prosedürler için profilaktik antimikrobiyaller endike olmasa da, mevcut veriler, cerrahi alan enfeksiyonlarının (CAE) antimikrobiyal profilaksi kullanımından kaynaklanan göreceli risk azalmasının temiz ve yüksek riskli prosedürlerde aynı olduğunu göstermektedir (1,2). Profilaksi kullanma kararı, profilaksi kullanımıyla ilişkili maliyet ve morbidite ile karşılaştırıldığında, tedavi maliyetine ve enfeksiyonla ilişkili morbiditeye bağlıdır. Antimikrobiyal profilaksi, çoğu temiz kontamine prosedür için kullanılmaktadır. Kirli prosedürler veya yerleşik enfeksiyonlar için antimikrobiyal ajanların kullanımı, profilaksi değil, varsayılan enfeksiyonun tedavisi olarak sınıflandırılır.

ORTAK İLKELER

İdeal olarak, cerrahi profilaksi için bir antimikrobiyal ajan, CAE' yi önlemeli, CAE ile ilişkili morbidite ve mortaliteyi önlemeli, sağlık hizmetinin süresini ve maliyetini azaltmalıdır. CAE yönetimi ile ilişkili maliyetler düşünüldüğünde, profilaksinin maliyet etkinliği aşikardır (3,4).

Herhangi bir yan etki oluşturmaz ve hastanın veya hastanenin mikrobiyal florası için hiçbir olumsuz sonuç doğurmaz (5).

Bu hedeflere ulaşmak için, bir antimikrobiyal ajan cerrahi alanı kontamine etme olasılığı en yüksek olan patojenlere karşı aktif olmalı, potansiyel kontaminasyon periyodu boyunca uygun bir dozda ve yeterli serum ve doku konsantrasyonlarını sağlayan bir zamanda verilmelidir. Güvenli ve olumsuz etkileri, direnç gelişimini ve maliyetleri en aza indirmek için en kısa etkili süre boyunca uygulanır (1,6,7).

Spesifik bir hasta için uygun bir antimikrobiyal ajanın seçimi, ideal ajanın özelliklerini, prosedür için antimikrobiyal ajanın karşılaştırmalı etkinliğini, güvenlik profilini ve hastanın ilaç alerjilerini dikkate almalıdır. Her bir antimikrobiyal ajan için advers olaylar, ilaç etkileşimleri, kontrendikasyonlar ve uyarılara da dikkat etmek gereklidir. Çoğu prosedürde, sefazolin profilaksi için tercih edilen ilaçtır. Çünkü etkinliği kanıtlanmış ve en çok çalışılan antimikrobiyal ajandır. İstenen bir etki süresine, cerrahide yaygın olarak karşılaşılan organizmalara karşı aktivite spektrumuna, makul güvenlik ve düşük maliyete sahiptir. Geniş spektrumlu antimikrobiyal ajanların (yani, geniş in vitro antibakteriyel aktiviteye sahip ajanların), daha dar

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SONUÇ

Cerrahi antimikrobiyal profilaksi ile ilgili çeşitli alanlarda ek araştırmalara ihtiyaç vardır. Doz miktarı ve süresi dahil olmak üzere operatif prosedürün tamamlanmasından sonra devam eden antimikrobiyal profilaksinin riskleri ve yararları daha fazla değerlendirilmelidir. İntraoperatif doz tekrarı, obez hastalarda kilo ile orantılı doz ayarlaması ve uzun bir süre boyunca uygulanması gereken cerrahi öncesi antimikrobiyallerin (örn. vankomisin, florokinolonlar) zamanlaması için özel önerilerde bulunmak için çalışmalar gereklidir. Etkinliği optimize etmek için hedeflenen antimikrobiyal konsantrasyonlar ve antimikrobiyal serum ve doku konsantrasyonlarının intraoperatif izlenmesi ile ilgili ek açıklamalara ihtiyaç vardır. Antimikrobiyal ajanların topikal uygulamasının ve i.v. antimikrobiyal profilaksinin daha fazla değerlendirilmesi gerekir.

Cerrahi hastalarda dirençli mikroorganizmalar, özellikle vankomisin ve metisilin nedeniyle CAE'lerin ortaya çıkmasıyla ilgili artan endişeler vardır. Birkaç çalışma MRSA kolonizasyonunu ve CEA'larını araştırmış ve ortopedik prosedürlerde topikal mupirosin kullanımı dahil dekolonizasyonun etkisini değerlendirmiştir (62,68,74-78). İntra venöz uygulamaya ek olarak mupirosin dekolonizasyon protokolleri ortopedik hastalarda sefalosporin profilaksisi, nazal MRSA taşıyıcılığında önemli düşüşlerle sonuçlanmıştır. MRSA veya MSSA ile enfekte olduğu bilinen elektif ortopedik prosedürler uygulanan hastalarda intranazal mupirosin ile preoperatif dekolonizasyon yararlı olabilir (62,63,68,69,74-76,78-81).

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