

23. BÖLÜM

LAPAROSKOPİK DİYAFRAM CERRAHİSİ

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Giriş

Diyafram abdomen boşluğu ile torasik boşluğu birbirinden ayıran büyük oranda kas dokusundan oluşan ve özellikle solunum başta olmak üzere çeşitli fonksiyonları bulunan bir organdır. Kalpten sonra en önemli kas dokusu olan diyafram yapısal olarak santral tendon, kostal, sternal ve lomber komponentlerden oluşur (Lee, Kashyap, & Atherton, 2020, Anraku, & Shargall, 2009). Diyafram embriyolojik olarak 4-12. haftalarda dört temel yapıdan köken alarak oluşur. Bu yapılar; transvers septum, plöroperitoneal katlantılar, özefageal mezenter ve m. diyafram m. transversus komponentlerdir (Şekil 1) (Evman & Doğruyol, 2013, Nason, & ark., 2012). Bu yapıların embriyolojik hayatta birleşmesinde oluşan bozukluklar konjenital diyafram hernilerinin oluşmasına yol açmaktadır. Diyafram santral bir tendon ve m. diyafram m. transversus tabakadan oluşmaktadır. M. diyafram m. transversus tabaka lifleri arkuat ligaman ve krusları oluşturan vertebral lifler, sternumdan köken alarak alt kostaların iç yüzeyleri boyunca uzanan kostal lifler ve ksifoid çıkıntıdan başlayan sternal lifler olarak 3 bölüme ayrılırlar. Bu periferik kas lifleri orta kısımda birleşerek santral tendonu oluştururlar (Şekil 2) (Evman & Doğruyol, 2013, Nason, & ark., 2012). Diyaframda 3 adet açıklık bulunmaktadır; içinden aorta, duktus torasikus ve azigos veninin geçtiği *hiatus aorticus*, içinden özefagus, vagal duktus ve sol gastrik arterin özefagusa giden dallarının geçtiği *hiatus oesophagus* ve için-

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