

BÖLÜM 2

Böbrek Yaralanmaları

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EPİDEMİYOLOJİ, ETYOLOJİ VE PATOFİZYOLOJİ

Tüm travmaların yüzde %5'ini renal travmalar oluşturur(1). En sık olarak genç erkeklerde görülür ve genel toplum insidansı 100.000 de 4.9'dur (2). Yaralanmaların çoğu böbreği başarılı bir şekilde koruyarak opere etmeden yönetilebilir (3-6).

Künt travmalar genellikle motorsiklet yaralanmaları, düşmeler, spor yaralanmaları ve saldırular sonrası oluşur. Daha az olarak ise ani desereleasyon yaralanmalarına bağlı olarak vasküler yapıların veya üreteropelvik bileşkenin avülsiyonuna neden olabilir(7).

Peneteran yaralanmalar kesici delici alet ve ateşli silah yaralanmaları ile ilgilidir. Penetran yaralanmalar künt travmalara göre daha ağır olabilir. Ayrıca künt travmaya göre seyri anlaması daha zordur. Penetran yaralanmalar şehirlerde kırsal yaşama göre daha sık görülür (8). Penetran yaralanmalar direkt olarak parankim, vasküler yapılar veya toplayıcı sistemde bozulma veya parçalanma meydana getirir. Patlayıcı şiddeti yüksek olan mermiler ve şarapnel yaralanmalarında geniş bir parankim hasarı meydana gelmektedir. Bu şekilde meydana gelen yaralanmalarda genellikle multi-organ yaralanmalarıda eşlik eder (9).

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