

Sedasyon Altında İmplant Cerrahisi Yapılan Hastada Gelişen Sistemik Lokal Anestezi Toksisitesi ve Yönetimi

60. BÖLÜM

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ÖZET

40 yaşında, 31 kilogram (kg) ağırlığında, bilinen anoreksia nervoza tanılı kadın hastaya minimal sedasyon altında “full mouth” implant cerrahisi planlandı. Hastaya toplamda 320 miligram (mg) artikain lokal anestetik olarak yapıldı. Operasyonun sonlarına doğru hastada ajitasyon görülmeye başlandı ve hastanın ağrı duyduğunu belirtmesi üzerine hastaya lokal anestetik enjeksiyonu yapıldı. Sonrasında konuşma ve oryantasyon bozukluğu gelişen hastada sistemik lokal anestezi toksisitesi (LAST) düşünüldü. Hastaya nazal kanül ile oksijen desteği verildi. Solunum derinliği azalan ve bilinci kapanan hasta acil entübe edildi. Kardiyak olarak hipotansif ve bradikardik olan hastaya intavenöz (iv) lipid tedavisi başlandı. Takibinde vital bulguları düzelen hasta ekstübe edildi. Yataklı serviste bir gün daha takip edilen hasta genel durumu iyi olduğu için taburcu edildi.

OLGU

Preoperatif Dönem

40 yaşında, 31 kg ağırlığında kadın hastaya sedasyon altında “full mouth” implant cerrahisi planlandı. Bilinen anoreksia nervoza hastalığı mevcuttu. Onun dışında başka sistemik bir rahatsızlığı yoktu. Düzenli bir ilaç kullanımı yoktu. Preoperatif yapılan fizik muayenesi normaldi. Laboratuvar testleri normal sınırlarda saptandı. Hasta Amerikan Anesteziyoloji Derneği (ASA) sınıflamasına göre ASA 2 olarak değerlendirildi ve operasyona onay verildi.

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SONUÇ

Hekimler LAST, tanısı ve tedavisi konusunda eğitilmelidir (60). LAST'ın nadir görülen bir durum olduğu göz önüne alındığında, tıbbi simülasyon bu sorunun tanınmasını ve yönetimini geliştirmek için etkili bir eğitim aracı olabilir (61).

LAST, lokal anestezi uygulamasının yıkıcı sonuçları olan, yaşamı tehdit eden bir komplikasyondur. LAST'ın değişken klinik prezentasyonları ve başlangıcı, genel deneyim, uygulama ve bilgi eksikliği ile birleştiğinde, özellikle durum bir krize dönüştüğünde, hekimleri LAST ile başa çıkmak için hazırlıksız bırakabilir. LAST, çok çeşitli uygulayıcılar tarafından lokal anestezi uygulamasını takiben çok çeşitli uygulama yerlerinde ortaya çıkar. Lokal anestezi uygulayan tüm hekimlerin LAST'ın öngörülemeyen ve sinsi doğası ve İLE tedavisini içeren çağdaş yönetim algoritmaları konusunda eğitilmesi çok önemlidir. Eğitim, zorunlu güvenlik gereklilikleri ve sistem iyileştirmeleri, LAST'ın ortaya çıkmasını ve hastalar ve hekimler üzerindeki etkisini en aza indirmeye yardımcı olabilir.

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