

BÖLÜM 11

AORTİK ACILLER: LİTERATÜR GÜNCELLEMESİ

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GİRİŞ

Aortik aciller, literatürde akut aort sendromu (AAS) olarak ifade edilmektedir. Bu terim benzer prezentasyona sahip, fakat farklı demografik, klinik, patolojik özellikleri olan, hayatı tehdit eden aort hastalıklarını tanımlamak için kullanılmaktadır (1, 2). Aortik aciller başlıca akut aort diseksiyonu (AD), intramural hematom (İMİH) ve penetran aort ülseri (PAÜ) olmak üzere üç grup hastalığı içerir (3). Bunların arasında en yaygın AD (AAS'li tüm hastaların %62-88'i) daha sonra İMİH (%10-30) ve PAÜ (%2-8) gelmektedir (2, 3). Aortik aciller için en tutarlı ve önemli bulgu, hastalığın patofizyolojisi aortun medial tabakasının yaralanmasını veya bozulmasını içerdiğinden ani başlayan göğüs ağrı ve/veya sırt ağrısıdır (3, 4). Aortik acillerin doğru teşhisi genellikle operasyon sırasında yapılır (3).

AORT DİSEKSİYONU

AD sıklıkla şiddetli göğüs veya sırt ağrısı ve akut hemodinamik bozulma ile karakterize nispeten nadir görülen katastrofik bir hastalıktır. Erken ve doğru tanı, tedavi sağ kalım için oldukça önemlidir (5). AD'de mortalite, kardiyak tamponadı hızlandıran proksimal diseksiyonunun yırtılması sonucunda ortaya çıkan perikard veya plevral boşluğa kanama, ciddi aort yetersizliğine yol açan aort kapağına uzanan diseksiyon, miyokard enfarktüsüne yol açan koroner arter ostiumunun tıkanması veya abdominal aortik dalların diseksiyonuna bağlı end-organ yetmezliği gibi durumlara bağlıdır (6). AD'ye bağlı mortalite yüksek olmasına rağmen cerrahi ve endovasküler tekniklerdeki ilerlemeler ile zamanında tanı ve tedavi sonucu mortalite oranları giderek azaltmıştır (4, 7).

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KAYNAKLAR

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