

GERİATRİK COVID-19 HASTASINDA ANESTEZİ YÖNETİMİ

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17. BÖLÜM

GİRİŞ

Kronolojik olarak 65 yaş ve üstünde olan kişi yaşlı olarak tanımlanmaktadır ⁽¹⁾. Geriatri tanımı 20. yüzyılın başlarında yaşlı kişileri ifade etmek amacıyla ilk kez kullanılmıştır ⁽²⁾. Avrupa’da 40 yıl içinde yaşlı kişilerin toplumun %30 unu oluşturacağı tahmin edilmektedir. ABD de 2010 yılında 65 yaş üstü kişi sayısı 40,4 milyon olarak bildirilmiştir ^(3,4). Ülkemizde 2019 TÜİK verilerine göre 65 yaş üstü kişi sayısı 7,5 milyon olarak; toplam nüfusun %9,1 ini oluşturmaktadır ⁽⁵⁾. Bu değişikliklerin önemi geriatrik hasta grubunun hastalık sıklığının artması ve daha fazla sağlık bakımına ihtiyaç duymasındır.

Koronavirüs hastalığı 2019 (COVID-19) pandemisi sonucu hızla artan vaka yükü küresel bir halk sağlığı krizi haline geldi ⁽⁶⁾. COVID-19’un ölüm oranı ülkeler arasında büyük farklılıklar göstermektedir, Avrupa ülkelerinde bu oran %10’a ulaşmaktadır ⁽⁷⁾. Yine de vaka ölüm oranı 80 yaşının üstünde olan veya yandaş hastalığı olan kişiler arasında % 20’ye ulaşabilir ^(8,9,10,11). Şimdiye kadar etkili tedavi mevcut değildir. Birden çok komorbid hastalığı olan yaşlı kişiler COVID-19 salgını sırasında en savunmasız popülasyondur ^(9,10,11).

YAŞLA İLGİLİ FİZYOLOJİK VE ANATOMİK DEĞİŞİKLİKLER

I. Kardiyovasküler Sistem

Yaşla beraber kalpte miyosit sayısı azalır, kollajen içeriği artar, sol ventrikül duvar kalınlığı artar. Yaş ile beraber görülen bu değişiklikler miyokardiyal komplanansta azalma ve β adrenerjik sensitivitede azalmaya neden olur ⁽¹²⁾. Bu da

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SONUÇ

Covid 19'lu geriatrik hastada anestezi yönetimi zorludur. Tüm sistemler en iyi şekilde değerlendirilmeli komplikasyonlar konusunda dikkatli olunmalıdır. Eğer kontrendikasyon yoksa rejyonel anestezi tercih etmek daha akıllıca gözükmemektedir. Genel anestezi tercih edilecekse pulmoner, kardiyak ve nörolojik komplikasyonlar açısından hasta dikkatle değerlendirilmelidir.

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