

8. Bölüm

FEMUR KIRIKLARI

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Giriş

Çocukluk çağı kalça, femur diyafiz ve distal femur kırıkları genellikle travma, patolojik kemik hastalıkları veya çocuk istismarı sonucunda gerçekleşebilir. Tedavide öncelikle çocuğun yaşı belirleyici olmaktadır. Bunun yanında hastanın ağırlığı, boy uzunluğu, kırık şekli, patolojik kırık olup olmamasına bağlı olarak tedavi şekli değişiklik gösterebilir. Kalça kırıklarında yüksek komplikasyon oranlarından ötürü genellikle cerrahi tedavi kullanılmalıdır.

PROKSİMAL FEMUR (KALÇA) KIRIKLARI

Çocukluk çağında kalça kırıkları nadir görülmektedir. Buna karşın kırık oluştuktan sonra komplikasyon görülme oranları yüksektir. En sık yüksekteden düşme ve trafik kazası gibi yüksek enerjili travmalar ile oluşmaktadır. Düşük enerjili travma ile meydana gelen patolojik kırıklar bu yaş gurubunda sık görülmektedir. Çocukluk çağı kalça kırıklarının yüksek komplikasyon oranlarından ötürü cerrahi tedavi ön planda tutulmalıdır. Cerrahi tedavi düşündüğü zaman baş-boyun kısmının kanlanması ve avasküler ya-

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yöntemidir. Büyüme kıkırdağı ve metafizlerdeki kırıklarda yüksek komplikasyon gelişme ihtimali nedeniyle yakın takip gereklidir.

Anahtar Kelimeler: Çocukluk çağı, femur, proksimal, diyafiz, metafiz, kırık

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