



TORAKS TRAVMALARINDA VİDEOTORAKOSKOPIK YAKLAŞIMLAR

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Giriş

Toraks travmaları, tüm travmaların %20-25'ini oluşturmaktadır ve travmaya bağlı ölümler içerisinde abdominal ve kranial travmalardan sonra 3. sırada yer almaktadır (1-2). Künt travmalar, penetrant travmalardan daha sık görülmektedir. Olguların %85 kadardında, ağrı kontrolü, havayolu temizliği, solunum fizoterapisi gibi konservatif yöntemler veya basit tüp torakostomi gibi minimal invaziv yöntemler yeterli olurken, olguların %15'inde cerrahi tedavi gerekmektedir (3). Cerrahi yaklaşım gerektiren toraks travma olguları, minimal invaziv girişim gerektiren durumlardan, acil resüsitatif torakotomi gerektiren durumlara kadar değişen bir yelpazede prezente olabilirler. Akciğer kanseri cerrahi tedavisinde, video-yardımlı torakoskopik cerrahi (VATS) konusunda yıllar içerisinde gelişen teknikler ve artan tecrübe sayesinde göğüs cerrahları VATS'ı, göğüs cerrahisinin diğer alanlarında da daha cesur ve daha geniş endikasyonlar ile kullanmaya başlamıştır (4,5). Bu alanların biri de travma cerrahisinde tanı ve tedavidir. Standart torakotomiye göre çok daha küçük insizyonlardan toraks boşluğunun geniş ve görsel açıdan oldukça net bir şekilde görüntülenmesi sağlanmaktadır. Minimal invaziv özellikleri sayesinde, postoperatif dönemde daha az ağrı, daha kısa tüp torakostomi ve hospitalizasyon süresi, daha az postoperatif morbidite gibi birçok avantaj sağlamaktadır (6).

Bu bölümde VATS uygulamalarının toraks travmalarının tanısı ve tedavisindeki yeri tartışılmaktadır.

Tarihçe

VATS cerrahisinin ilk kullanımı 1900'lü yılların başına kadar uzanmaktadır.

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