9. Bölüm

DERİN VEN TROMBOZUNDA GİRİŞİMSEL VE CERRAHİ TEDAVİ YÖNTEMLERİ

Mehmet Aydın KAHRAMAN[1]

Derin ven trombozu (DVT) sonrası en korkulan komplikasyonlar pulmoner emboli ve post-trombotik sendromdur (PTS). Bu komplikasyonlar ciddi proksimal (iliyofemoral veya iliyokaval) DVT sonrası daha sık görülür. Her ne kadar DVT tedavisinin merkezinde antikoagülan tedavi olsa da girişimsel tedaviler işlevsel sonuçlar alınması açısından çok değerlidir.

Derin Ven Trombozunda Açık Venöz Trombektomi

Derin ven trombozunda pulmoner emboli en kritik erken komplikasyon iken, kronik trombo-embolik pulmoner hipertansiyon (KTEPH) ve PTS gelişimi de ciddi komplikasyonlara yol açtığından son yıllarda açık venöz trombektomi ameliyatı popülerliğini yeniden kazanmıştır [(1)]. Özellikle, iliyofemoral DVT de PTS ciddi formları ile ilişkilidir [(2–5)]. Bu nedenle, belirli durumlarda erken trombüs çıkarılması önerilmiştir. Günümüzde, endovenöz yöntemler ve cerrahi venöz trombektomi mevcut tedavi seçenekleri arasındadır [(6)]. Özellikle, akut, semptomatik iliyofemo-

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- Venöz stentleme arteriyel sistemdeki gibi değil, normal segmentten normale olacak şekilde yapılmalıdır.

Venöz stentlerin primer açıklıktan çok yardımlı ve sekonder açıklık oranlarının yüksek olduğu akılda tutulmalıdır. Ven stentlemesini yalnızca çok yakın takip edeceğiniz hastalara uygulamamız yerinde olur. Takip edilemeyecek hastalarda balon anjiyoplasti veya medikal takip daha iyi bir seçenek olabilir [28].

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