

Bölüm 10

TİROİD KANSER CERRAHİSİNİN KOMPLİKASYONLARI

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GİRİŞ

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Tiroid cerrahisi eski çağlardan beri yapılan bir cerrahi işlemdir. Cerrahi pratiğin zamanla gelişmesi ve tecrübenin artması, komplikasyon oranlarının kayda değer şekilde düşmesini sağlamıştır. Buna rağmen ileri yaşı olan, eşlik eden komorbid hastalıkları ve ileri evre hastalığa sahip hastalarda komplikasyonların görülme oranı yüksektir (1). Erken dönemde yapılan revizyon tiroid cerrahileri, cerrahi sahadaki inflamasyon, skar, ödem ve kanama gibi nedenlerden dolayı zordur. Komplikasyonları azaltmak için tamamlayıcı tiroidektomi gibi revizyon cerrahilerin ilk operasyondan en erken 3-4 ay sonra yapılması önerilmektedir (2,3). Yine de revizyon cerrahilerde komplikasyon gelişme riski ilk cerrahi girişime oranla belirgin şekilde artmaktadır (4). Bipolar vessel sealing system (LİgaSure) ve ultrasonik dissektör (Harmonic Scalpel) kullanımının konvansiyonel tiroidektomiye kıyasla operasyon esnasındaki kanamayı ve ilk 24 saatteki dren miktarını azalttığı bulunmuştur. Ancak postoperatif komplikasyonlar açısından bir fark görülmemiştir (5,6). 20. yüzyıla kadar tiroidektomi komplikasyonu olarak en çok kanama, enfeksiyon ve %50 oranında ölüm görülmektedir (7). Günümüzde ise tiroidektomi sonrası en sık karşılaşılan

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