



Akutno plućno srce

Acute pulmonary heart

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Apstrakt

Pod plućnim srcem (Cor pulmonale) podrazumevamo sekundarno povećanje i oštećenje desnog srca nastalo zbog razvoja plućne hipertenzije usled bolesti plućnog parenhima i disajnih puteva, promene plućne vaskularne mreže, smetnje ventilacije, bolesti neuromuskularnog aparata i deformiteti grudnog koša.

Plućna hipertenzija koja dovodi do nastanka Cor pulmonale uzrokovana je ireverzibilnom redukcijom vaskularne mreže (embolija, granulozomatoze) ili velikog gubitka plućnog parenhima (hiruško lečenje), artetijskom hipoksemijom zbog nedovoljne ventilacije plućnih alveola na manjem delu pluća ili difuzno, kao i neadekvatnom difuzijom kiseonika kroz plućnu kapilarnu membranu (plućna fibroza).

Plućno srce može biti akutno i hronično.

Akutno plućno srce (APS) se definiše kao akutna insuficijencija desne komore nastala zbog naglog skoka pritiska u plućnoj arteriji usled značajne redukcije plućne vaskularne mreže. APS je gotovo uvek rezultat masivne plućne embolije. APS često nastaje iz, na oko dobrog zdravlja, sa vrlo teškom kliničkom slikom koja često završava smrću. Prvi simptomi su pleuralna bol, dispneja, kašalj i hemoptizija.

Plućna embolija (PE) najčešće nastaje kao posledica začepljenja ugruškom jednog ili više ogranaka plućnih arterija uz propratni vazospazam. Najčešće je posledica tromboze dubokih vena nogu ili male karlice.

Abstract

Pulmonary heart (Cor pulmonale) represents secondary enlargement and damage to the right heart caused by the development of pulmonary hypertension due to diseases of the pulmonary parenchyma and respiratory tract, changes in the pulmonary vascular network, ventilation disorders, neuromuscular diseases, and chest deformities.

Pulmonary hypertension that leads to Cor pulmonale is caused by irreversible reduction of the vascular network (embolism, granulomatosis) or large loss of pulmonary parenchyma (surgical treatment), arterial hypoxemia due to insufficient ventilation of the pulmonary alveoli in a small part of the lung or diffusely, as well as by inadequate diffusion of oxygen through the pulmonary capillary membrane (pulmonary fibrosis).

Pulmonary heart can be acute and chronic.

The acute pulmonary heart is defined as an acute right ventricular failure caused by sudden pressure jump in the pulmonary artery due to a significant reduction in the pulmonary vascular network. It is almost always the result of a massive pulmonary embolism, and it often arises from a very severe clinical picture that often ends in death. The first symptoms are pleural pain, dyspnea, cough, and hemoptysis.

Pulmonary embolism (PE) most often occurs as a consequence of a blockage of one or more branches of the pulmonary arteries with concomitant vasospasm. It is most often the result of thrombosis of the deep veins of the legs or small pelvis.