



Poremećaji cirkulacije i dešavanja u oku

Circulation and Eye Disorders

Jelena Pešić

Opšta bolnica Aleksinac

General Hospital Aleksinac

Apstrakt

Cilj: Svaki cirkulatorni problem može da ima, a uglavnom i ima, reperkusije i na oku, odnosno na očnoj cirkulaciji. S obzirom na to da organ vida ne možemo, a i ne treba sagledavati mimo čitavog tela, cilj rada jeste da pokaže kako se cirkulatorne promene, bilo gde u telu, odražavaju i na oku.

Metoda rada: U ovom radu praćeni su pacijenti koji su se javljali na pregled sa smetnjama u vidu: bljeskova, svetlućanja pred očima, zablještanja, iskrica, munja, sa kratkotrajnim bezbolnim gubitkom vida, kao i sa naglim gubitkom vida. Takođe su analizom bili obuhvaćeni i pacijenti sa dijabetesom, kako na oralnoj, tako i na kombinovanoj terapiji. Nakon prvog koraka u kontaktu sa pacijentom, a to je detaljno uzimanje anamneze, pristupa se oftalmološkom pregledu. Najpre se uzima vidna oštrina, bez korekcije i sa njom, meri se IOP, pregleda se prednji segment na biomikroskopu, a zatim se obavlja pregled očnog dna u midrijazi, indirektnom oftalmoskopijom. Pregled očnog dna nam mnogo govori o stanju krvnih sudova, ne samo na očnom dnu, već i u celom telu. Ovakva vrsta pregleda predstavlja neinvazivno sagledavanje krvnih sudova, a slika koju vidimo odgovara stanju krvnih sudova organizma.

Rezultati: Ono što se može videti su jako uski krvni sudovi, naročito arterije, što nam govori o ishemijskim, hipertoničnim i aterosklerotičnim promenama, zatim o bledom očnom živcu, oslabljenom ili ugašenom refleksu u makuli, kod dijabetičara, krvarenju različitog intenziteta sa promenama u makuli, infarktu oka.

Zaključak: Nakon pregleda očnog dna dobijamo važne informacije o stanju cirkulacije, na osnovu čega možemo ordinirati terapiju, prevenirati određena stanja i bolesti i uključiti u daljem sagledavanju pacijenta i ostale specijalnosti, kao što su: kardiolozi, endokrinolozi, neurolozi, hematolozi, neurohirurzi, ukoliko je nalaz takav da ukazuje na porast intrakranijalnog pritiska.

Abstract

Aims: Every circulatory problem can have, and mostly has, consequences on the eye, i.e. on the ocular circulation. Since the organ of sight cannot, and should not, be seen outside the entire body, the aim of this paper is to show how circulatory changes anywhere in the body are reflected in the eye.

Method: In this study, patients who appeared for examination with visual disturbances: flashes in front of the eyes, glare, sparks with short-term painless vision loss, as well as sudden vision loss were monitored. The analysis also included patients with diabetes, both on oral and combination therapy. After the first step in contact with the patient, which is taking a detailed anamnesis, an ophthalmological examination is performed. First, visual acuity range is taken, without and with correction, the IOP is measured, the anterior segment is examined on a biomicroscope, and then the examination of the eye ground in mydriasis is performed, by indirect ophthalmoscopy. Examination of the eye ground tells us a lot about the condition of blood vessels, not only in the eye ground but also in the whole body. This type of examination is a non-invasive examination of blood vessels, and the image we see corresponds to the condition of the body's blood vessels.

Results: What can be seen are very narrow blood vessels, especially arteries, which tell us about ischemic, hypertonic, and atherosclerotic changes, then pale optic nerve, weakened or extinguished reflex in the macula, in diabetics, bleeding of varying intensity with changes in the macula, eye stroke.

Conclusion: After examining the fundus, we get important information about the state of circulation, based on which we can prescribe therapy, prevent certain conditions and diseases, and include in further examination of the patient and other specialties, such as cardiologists, endocrinologists, neurologists, hematologists, neurosurgeons, it is a finding such as to indicate an increase in intracranial pressure.