



Trauma u ortopediji

Orthopedic Trauma

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Apstrakt

U savremenoj traumatologiji koja se svakodnevno suočava sa različitim oblicima trauma, prvo mesto po težini i značaju pripada politraumi. Politrauma je istovremeni nastanak dve ili više povreda različitih organa ili sistema ljudskog tela od kojih jedna ili njihove kombinacije ugrožavaju život povređenog. Razlog sve veće učestalosti politraume je, u prvom redu, eksplozivni razvoj saobraćaja i posledični saobraćajni traumatizam.

Trauma je glavni uzrok smrti i invalidnosti ljudske populacije ispod 50 godina starosti. Savremenu traumu karakterišu i sve veći oblici, naročito u vidu politraume, koja je praćena najvećim mortalitetom, morbiditetom i invalidnošću.

Prelomi dugih kosti (butna kost, kosti potkolenice, nadlaktna kost, kosti podlaktice) u sklopu politraume imaju, u odnosu na izolovane prelome, veći značaj i u mnogome utiču na tok i ishod politraume. Pravilno lečenje preloma dugih kosti kod politraumatizovanih može značajno smanjiti mortalitet i morbiditet.

Generalni ciljevi rane stabilizacije preloma dugih kosti kod politraumatizovanih su: kontrola krvarenja, supresija lokalnog inflamatornog odgovora i produženo lučenje medijatora zapaljenja, oslobođanje bola i olakšavanje nege i postizanje ranije mobilnosti povređenog u jedinici intenzivne terapije.

Kod lakše politraumatizovanih moguće je primarno zbrnuti prelome dugih kostiju ranom unutrašnjom fiksacijom, kao definitivnom metodom lečenja nakon uspešne reanimacije. Rana unutrašnja fiksacija preloma dugih kosti, kod teško politraumatizovanih, predstavlja veliku i opasnu dodatnu trauma za povređenog i nju je bezbedno uraditi po stabilizaciji opštег stanja. Spoljna skeletna fiksacija predstavlja bezbednu metodu za postizanje rane inicijalne stabilnosti preloma dugih kosti uz minimalnu dodatnu operativnu traumu. Spoljnju skeletnu fiksaciju preloma dugih kosti kod politraumatizovanih treba transformisati u unutrašnju kad se za to steknu uslovi.

Abstract

In modern traumatology, which deals with various forms of trauma every day, the first place in terms of severity and importance belongs to polytrauma. Polytrauma is the simultaneous occurrence of two or more injuries to different organs or systems of the human body, one of which or their combination endangers the injured person's life. The reason for the increasing frequency of polytrauma is, first of all, the explosive development of traffic and the resulting traffic traumatism.

Trauma is the leading cause of death and disability in the human population under the age of 50. Contemporary trauma is characterized by increasingly severe forms, especially in the form of polytrauma, which is accompanied by the highest mortality, morbidity, and disability.

Fractures of long bones (femur, lower leg, humerus, forearm bones) as part of polytrauma have, compared to isolated fractures, a greater importance and in many ways affect the course and outcome of polytrauma. Proper treatment of long bone fractures in polytraumatized patients can significantly reduce mortality and morbidity.

The general goals of early stabilization of long bone fractures in polytraumatized patients are control of bleeding, suppression of local inflammatory response and prolonged secretion of inflammatory mediators, relief of pain and facilitation of care, and earlier mobility of the injured in the intensive care unit.

In mildly polytraumatized patients, it is possible to primarily treat long bone fractures with early internal fixation, as a definitive method of treatment after successful resuscitation. Early internal fixation of long bone fractures, in severely polytraumatized patients, represents a large and dangerous additional trauma for the injured person, and it can be safely performed after stabilization of the general condition. External skeletal fixation is a safe method for achieving early initial stability of long bone fractures with minimal additional operative trauma. External skeletal fixation of long bone fractures in polytraumatized patients should be transformed into internal fixation when the conditions are met.

