

ORTOPEDİST GÖZÜ İLE KOKSİGODİNİ

PROF. DR. HALUK HAYRİ ÖZTEKİN

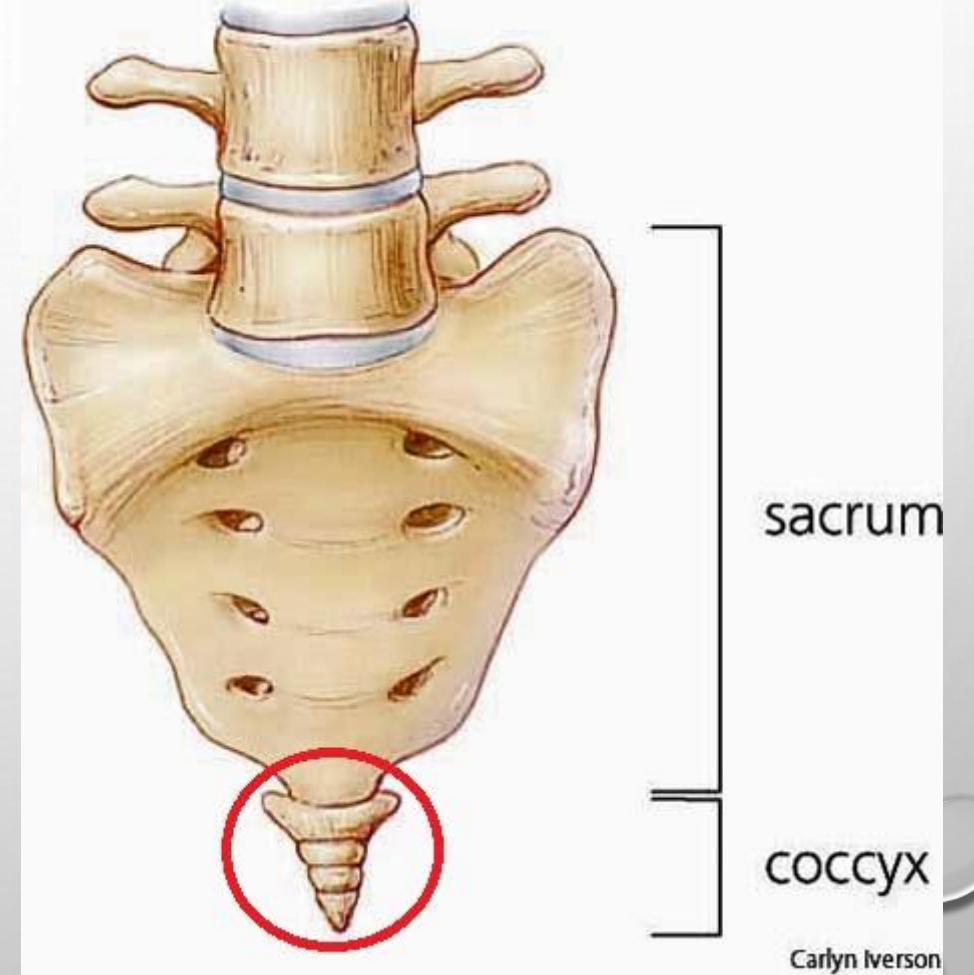
(BEYKENT ÜNİVERSİTESİ, SAĞLIK BİLİMLERİ Y.O.)

ORTOPEDİ VE TRAVMATOLOJİ UZMANI

İZMİR

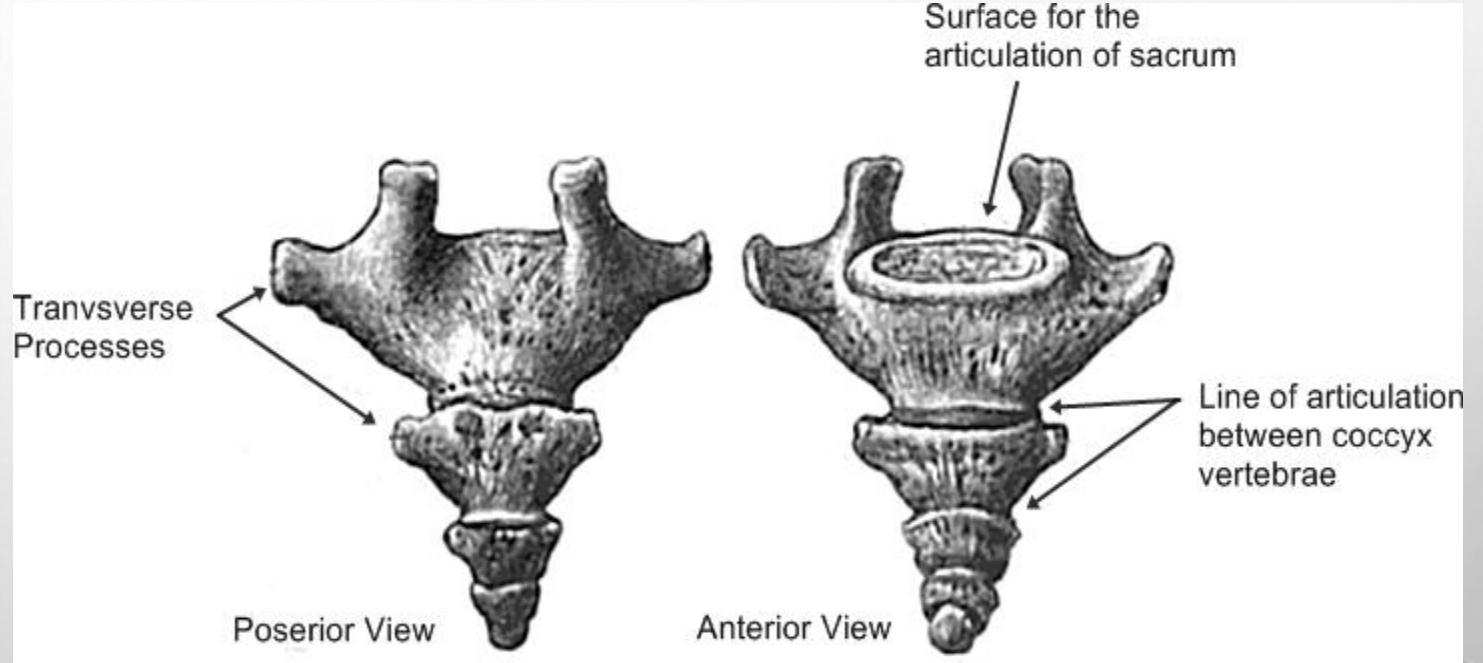
KOKSIGODİNİ(COCCYGODYNIA) NEDİR?

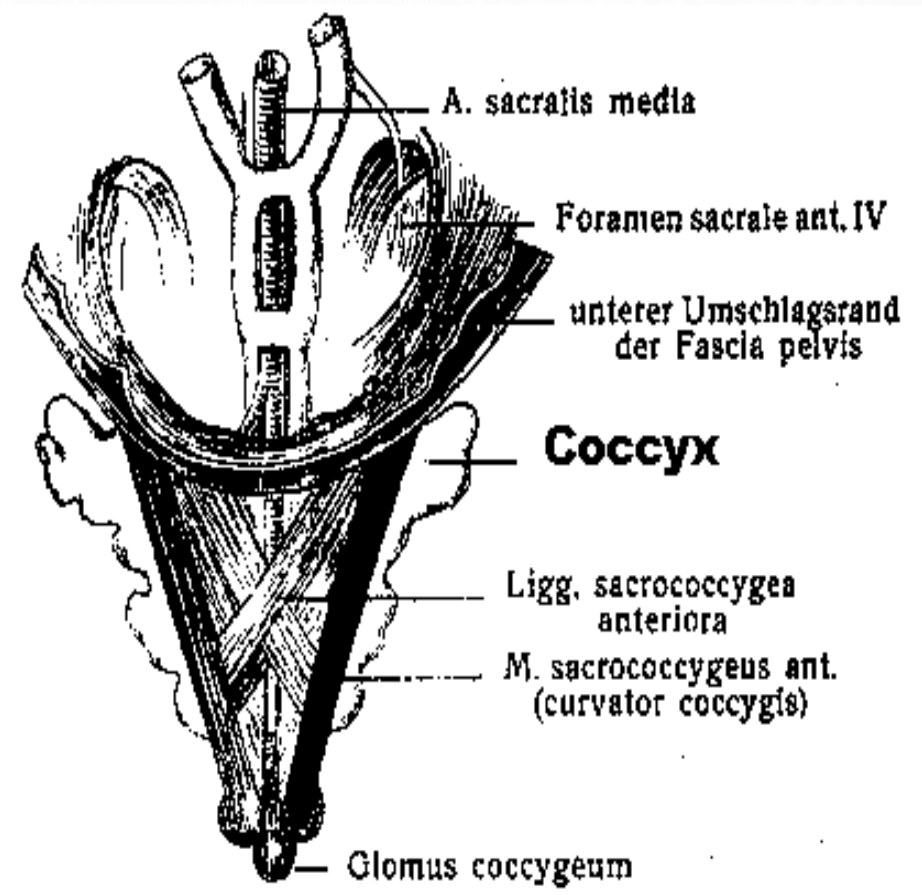
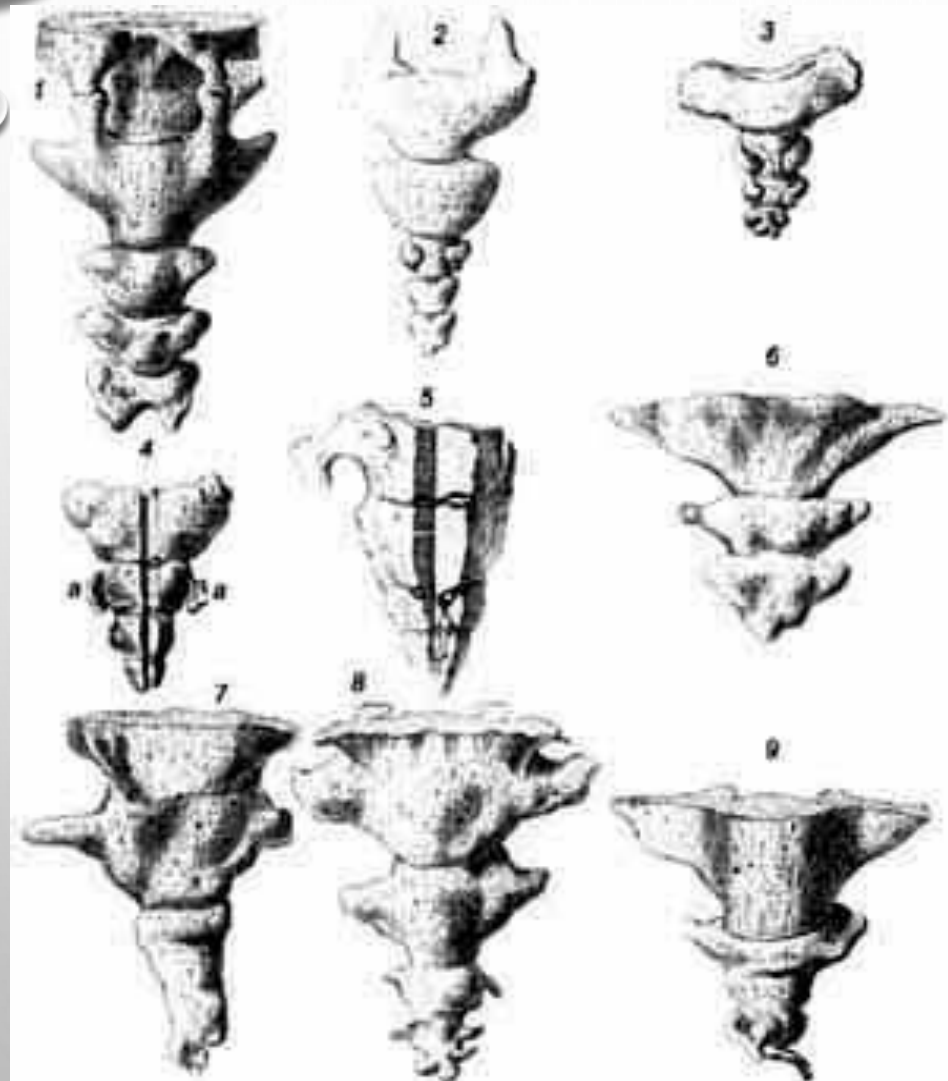
- KOKSIGODİNİ, «COCCYX» İN BÖLGESİNDE OLUŞAN AĞRIYA VERİLEN BİR TERİMDİR.
- HASTALARDA TİPİK OLARAK OTURURKEN AĞRI VARDIR.
- KADIN ERKEK ORANI 5:1 DİR
- ORTALAMA 40 YAŞLARINDA YAKINMALAR BAŞLAR
- GENELDE BİR TRAVMAYI TAKİP EDER.



ANATOMİ

- SPİNAL KOLONUN EN KAUDALİNDE, BEŞ KAYNAMIŞ SAKRAL VERTEBRA ALTINDA YER ALAN 3-5 KAYNAMIŞ KOKSİGEAL VERTEBRADAN OLUŞUR.
- ÜÇGEN ŞEKLİNDE OLUP KİFOTİKDİR
- G. MAXİMUS, KOKSİGEAL ADALELER VE ANOKOKSİGEAL LİGAMENTLERE BAĞLANTI SAĞLAR
- SAKROKOKSİGEAL EKLEM İLE SAKRUMDAN AYRILIR.





Front view of coccyx and ligaments

ETİYOLOJİ

- OBEZİTE
- ZOR DOĞUM
- TRAVMA: KIRIK-DİSLOKASYON
- POSTTRAVMATİK ARTRİT
- LUMBER DİSK
- ARAKNOİDİT
- PİLONOİDAL KİST
- T.M.

KLİNİK SEMPTOMLAR

- ARKAYA YASLANARAK OTURMA ESNASINDA AĞRI
- KALKIP-OTURURKEN AĞRI
- DEFEKASYON SIRASINDA AĞRI
- KOİTUS SIRASINDA AĞRI

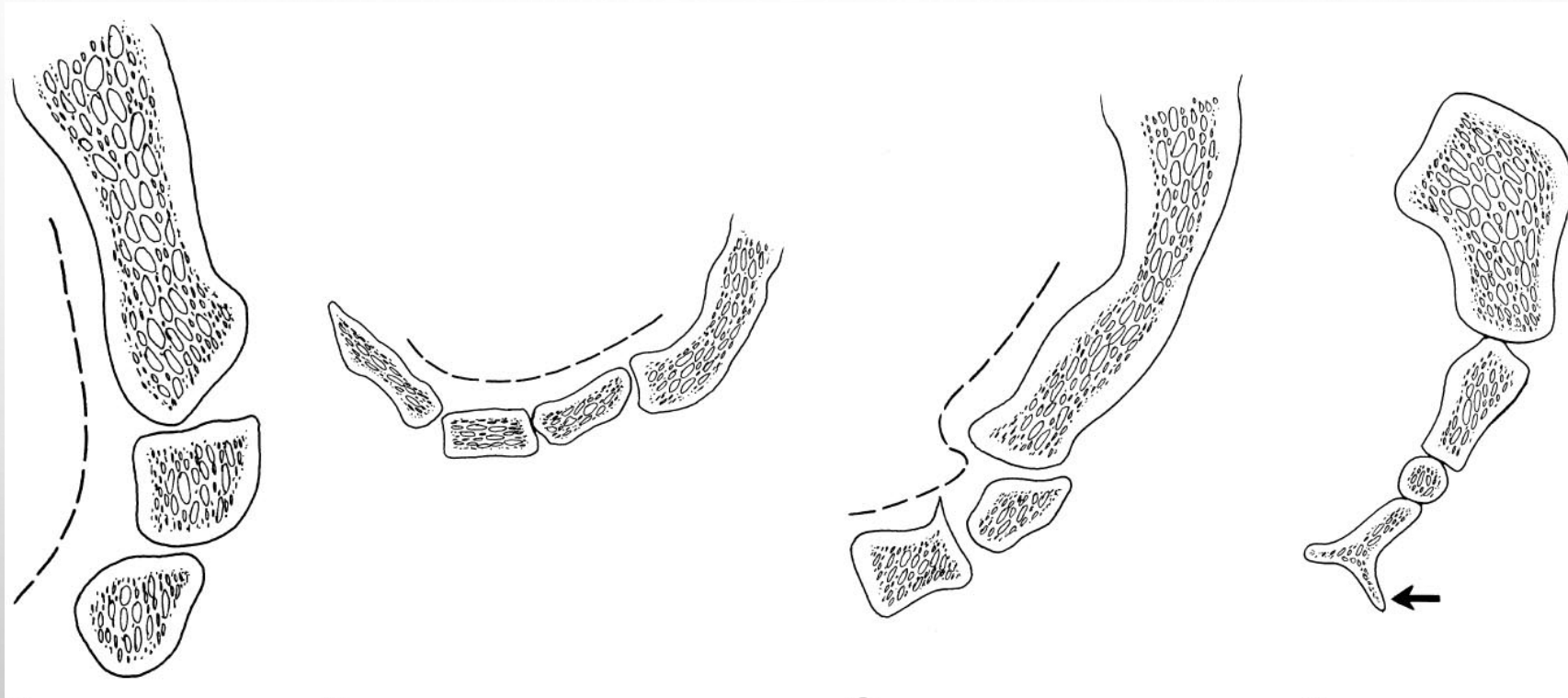
FİZİK BAKI

- SAKRUM VE KOKSİKS DİKKATLİCE MUAYENE EDİLMELİ
- LUMBER DİSK EKARTASYONU YAPILMALI
- PİLONOİDAL SİNÜS VE PERİREKTAL ABSE DIŞLANMALI
- KOKSİKS ÖNCE DIŞARIDAN PALPE EDİLMELİ
- REKTAL TUŞE İLE S/K EKLEM VE KOKSİKS UCU PALPE EDİLİP, AĞRILI NOKTA TESPİT EDİLMELİDİR.



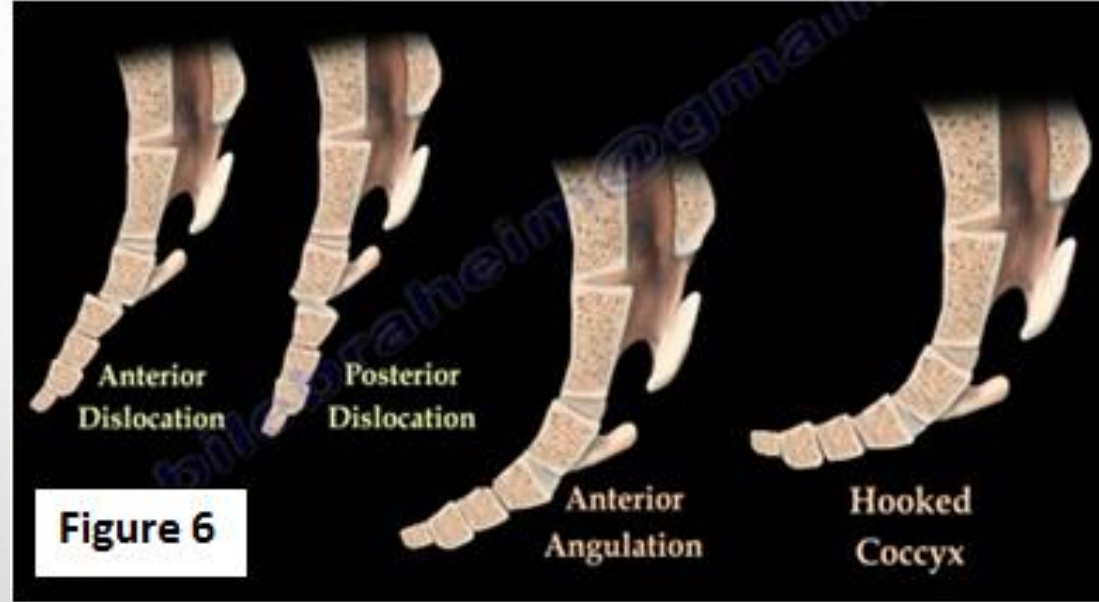
GÖRÜNTÜLEME

- STANDART KOKSİKS AP VE LATERAL GRAFİLERİ
- DİNAMİK GRAFİLER (HASTA OTURARAK YAN, AYAKTA YAN)
- 3D BT
- SİNTİGRAFI
- MRG



SINIFLAMA

- LUKSASYON
- HİPERMOBİLİTE
- İMMOBİL KOKSİKS
- NORMAL MOBİLİTE

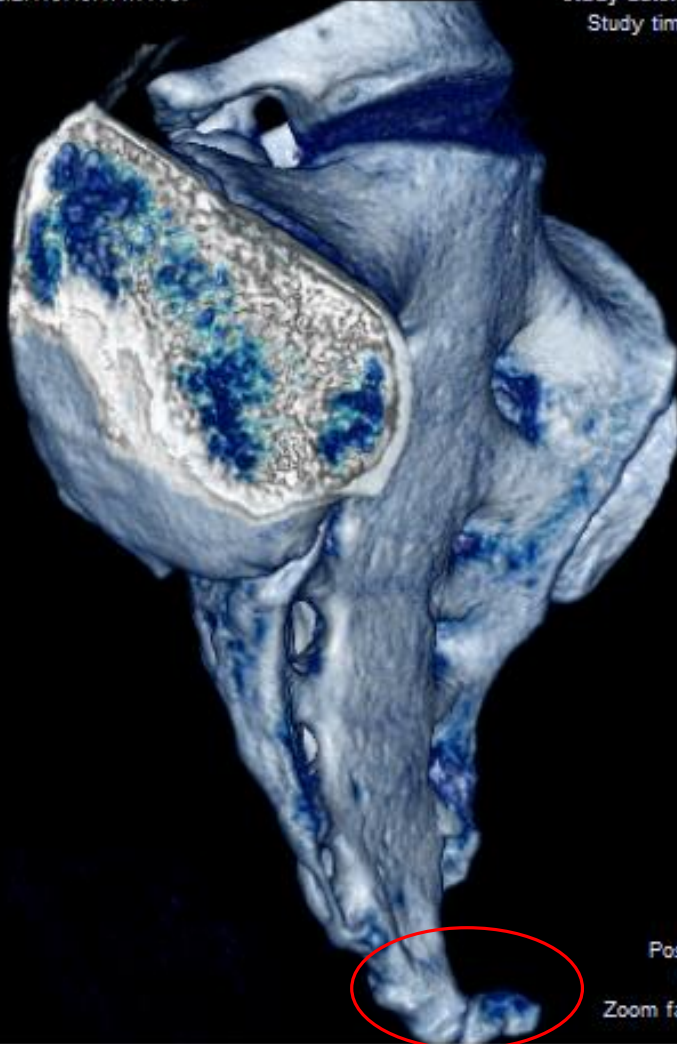


MENN DELIKTAS 55 M
M 12.08.1991
ID: 16.08.12-16.45.55-STD-1.3.12.2.1407.5.1.4.77767

<WRT Fang>
HAR

BU HOSPITAL / 77767
Fot: / Perf:
Study date: 12.08.2016
Study time: 15:46:00

FFA



WZ55 / C127

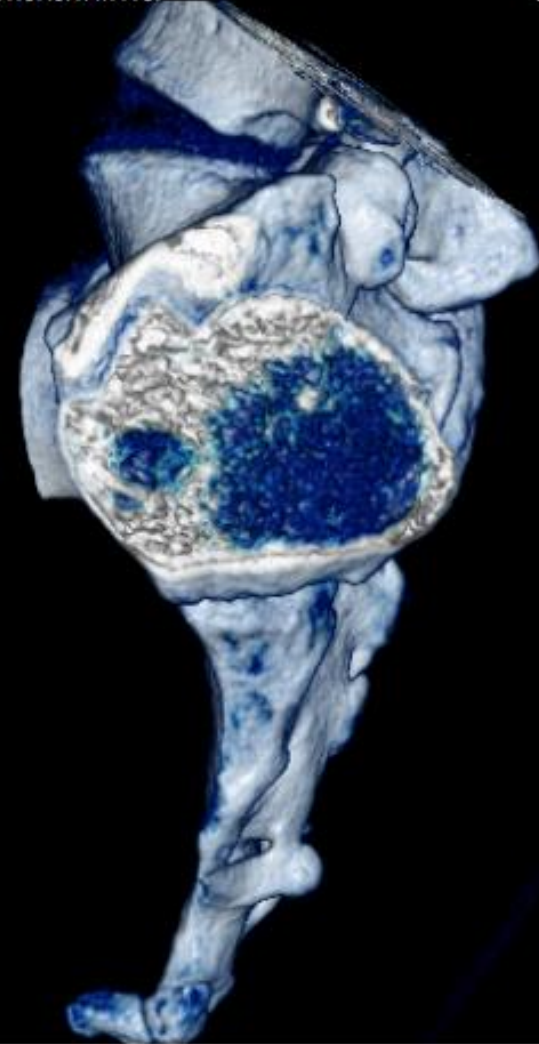
SPINE
Position: HFS
602 IMA 14
Zoom factor: x0.97

MENN DELIKTAS 55 M
M 12.08.1991
ID: 16.08.12-16.45.55-STD-1.3.12.2.1407.5.1.4.77767

<WRT Fang>
HAR

BU HOSPITAL / 77767
Fot: / Perf:
Study date: 12.08.2016
Study time: 15:46:00

APL



WZ55 / C127

SPINE
Position: HFS
602 IMA 1
Zoom factor: x0.97

TEDAVİ

- KONSERVATİF
- CERRAHİ

KONSERVATİF TEDAVİ

- NSAİİ
- SICAK
- ÖZEL MİNDERLER
- MASAJ
- EXTERNAL MANİPÜLASYON
- İTERNAL MANİPÜLASYON
- PROLOTERAPİ
- TENS
- LOKAL ENJEKSİYONLAR
(İYİLEŞME %59)



MANİPÜLASYONLAR

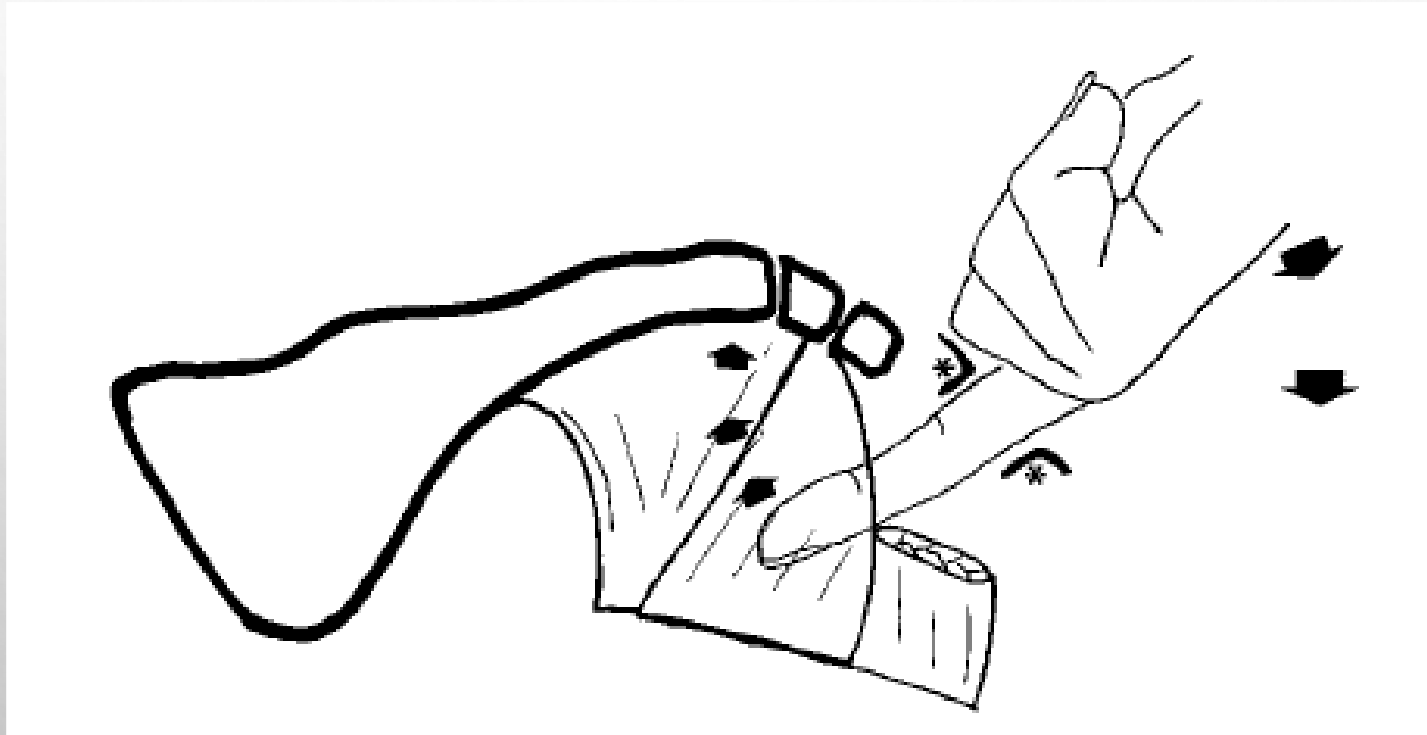
- KAYROPRAKTİK
- OSTEOPATİK
- ORTOPEDİK

ORTOPEDİK MANİPÜLASYON

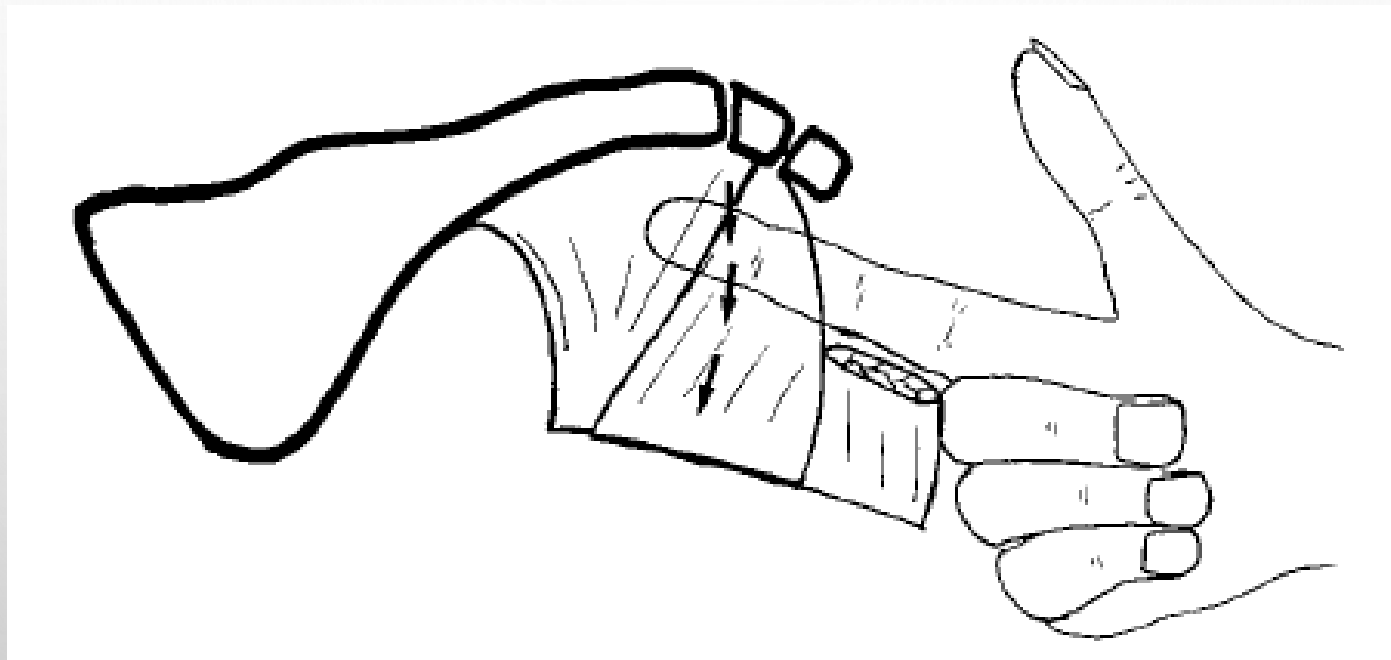
- REKTAL TUŞE
- LEVATOR ANİ ADALE MASAJI
- MANİPÜLASYON TEKNİĞİ: FLEXİON-EXTANSİYON, SAĞ-SOL LATERAL DEVIASYON
- M. LEVATOR ANİ «STRECHING»

MAIGNE VE CHATELLIER

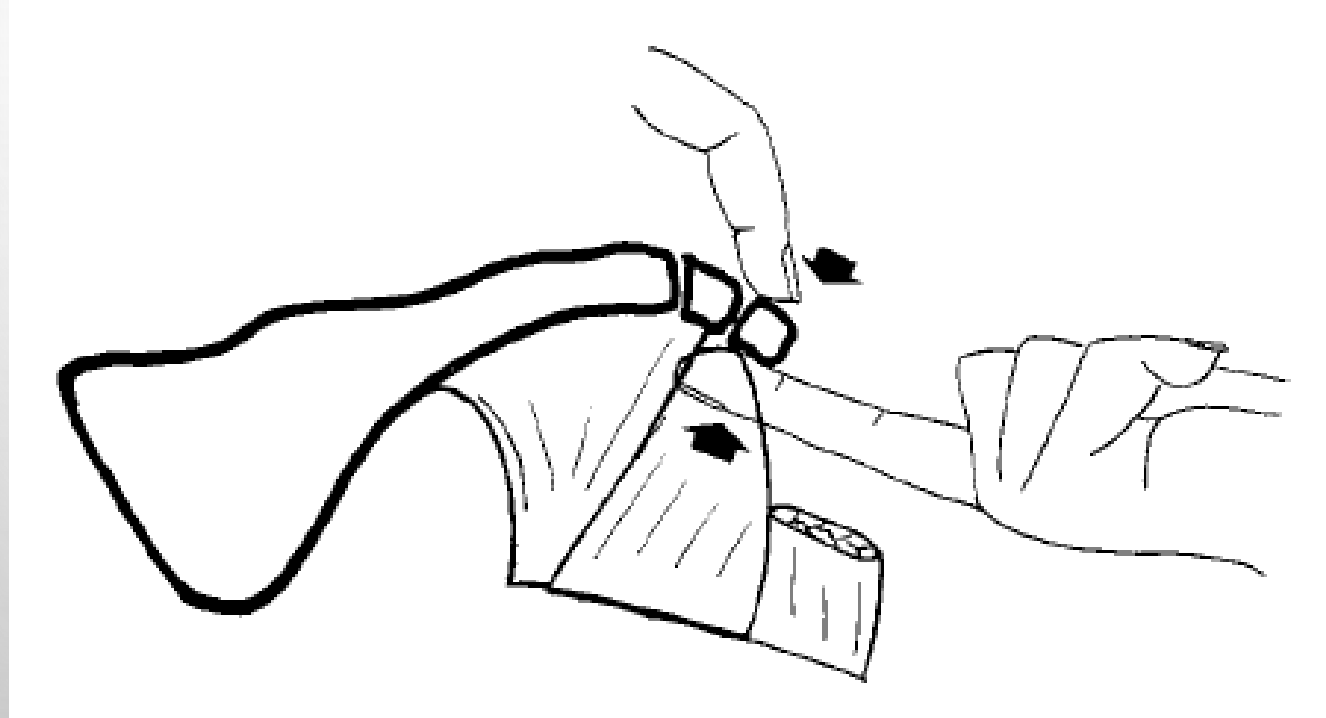
PELVİK ADALE TONUSU MUAYENESİ



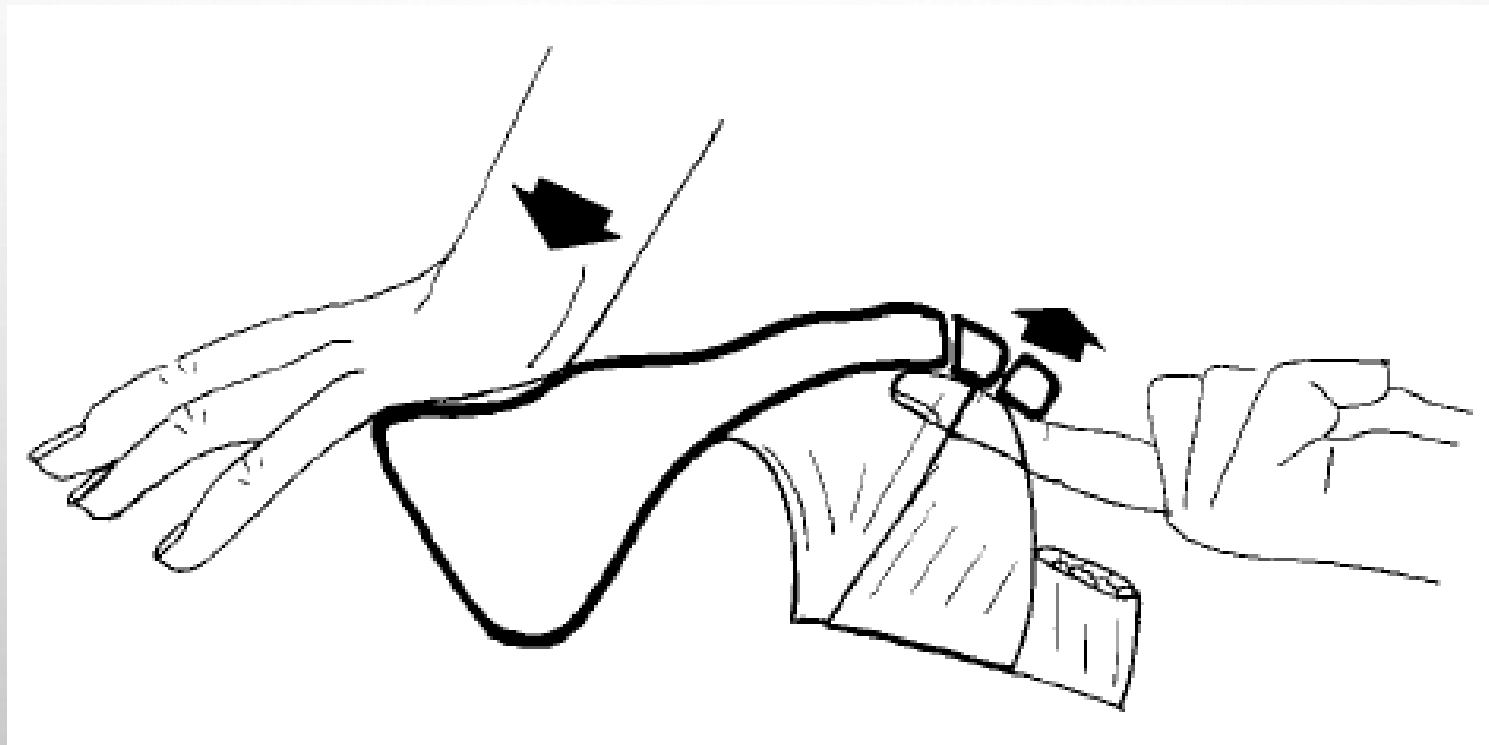
MASAJ (THIELE)



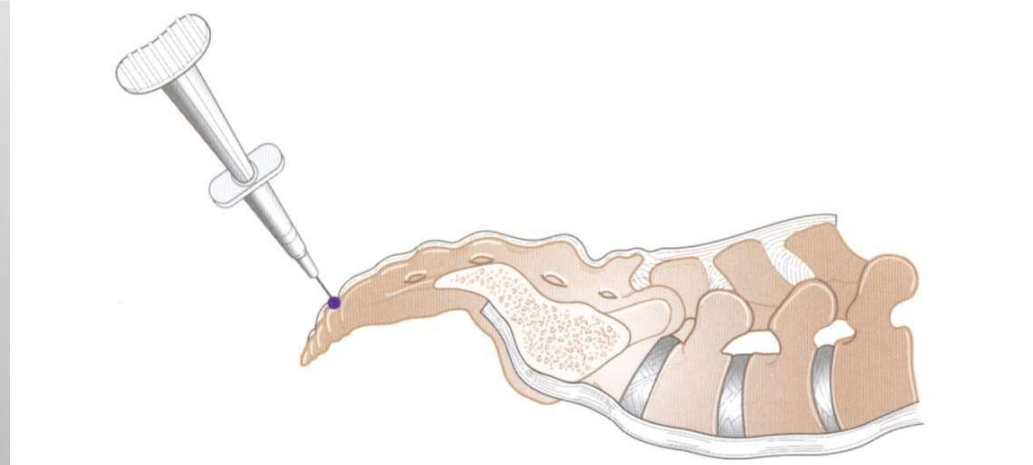
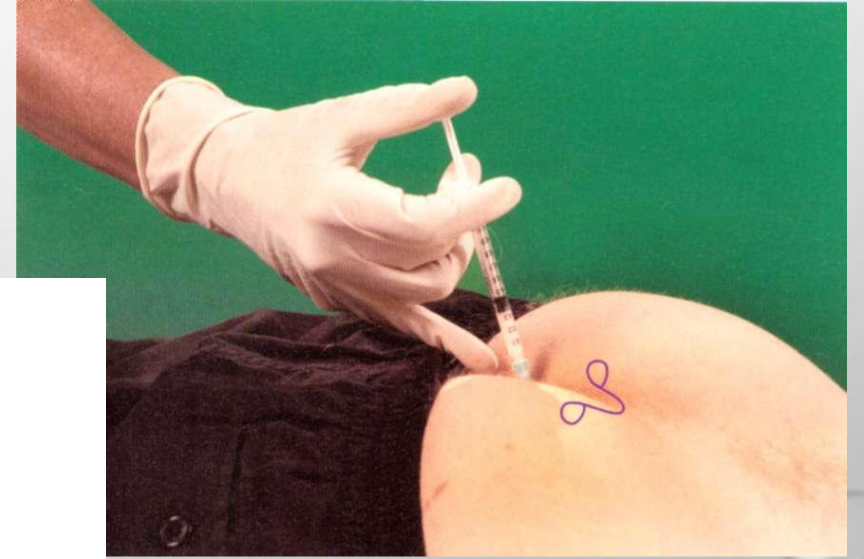
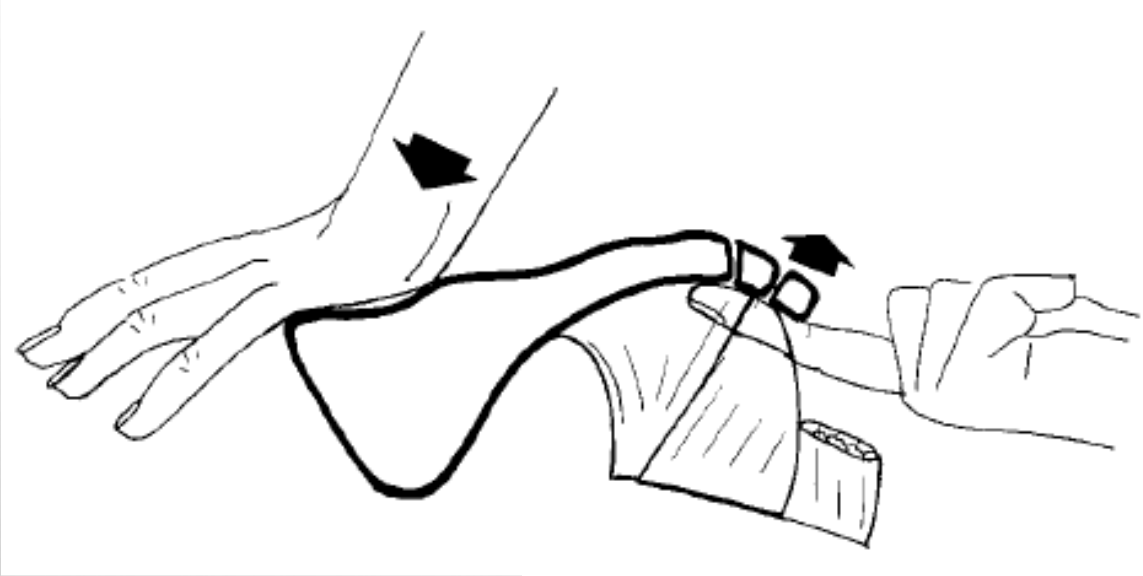
MOBİLİZASYON (J.Y.MAIGNE)



MOBİLİZASYON (R. MAIGNE)



NASIL YAPIYORUM?



YENİ TEKNİKLER

- GANGLION İMPAR BLOKAJI
- GANGLION İMPARIN RADYOFREKANS İLE BÜZÜŞTÜRÜLMESİ

CERRAHİ TEDAVİ

- KRONİK OLGULARDA
- GAA
- PRONE
- DİKKATLİ SUBPERİOSTAL DİSSEKSİYON (REKTUM YIRTIĞI!!!!)
- SAKROKOKSİKEKTOMİ



TEŞEKKÜRLER

