

Gestione dell'emorragia intra-operatoria :  
« Cosa fare in laparoscopia ? Cosa fare in open »

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# Le cause piu' frequenti la via « open »

- I traumi
- Le lesioni vascolari intra-operatorie
- La coagulopatia

# Le cause piu' frequenti la via « open »

- **I traumi**
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# I Traumi

Tipo emorragia: massiva

La tecnica « Damage control »

**Il packing**

**I clamp vascolari**

**I Foleys**

**Le suturatrici meccaniche**

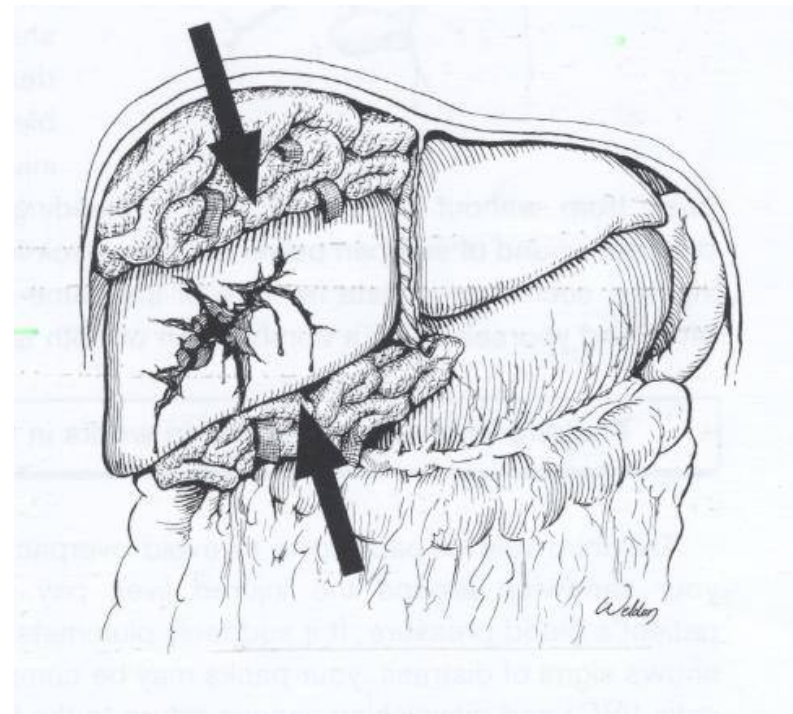
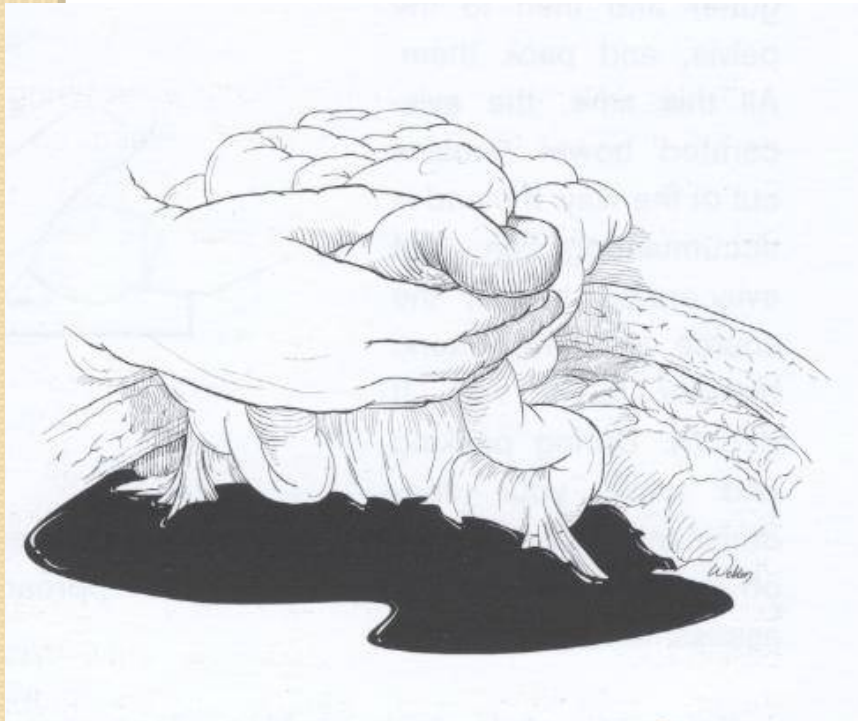
**Gli agenti emostatici**

**L'aspiratore poco utile!!!**



# La tecnica « Damage control »

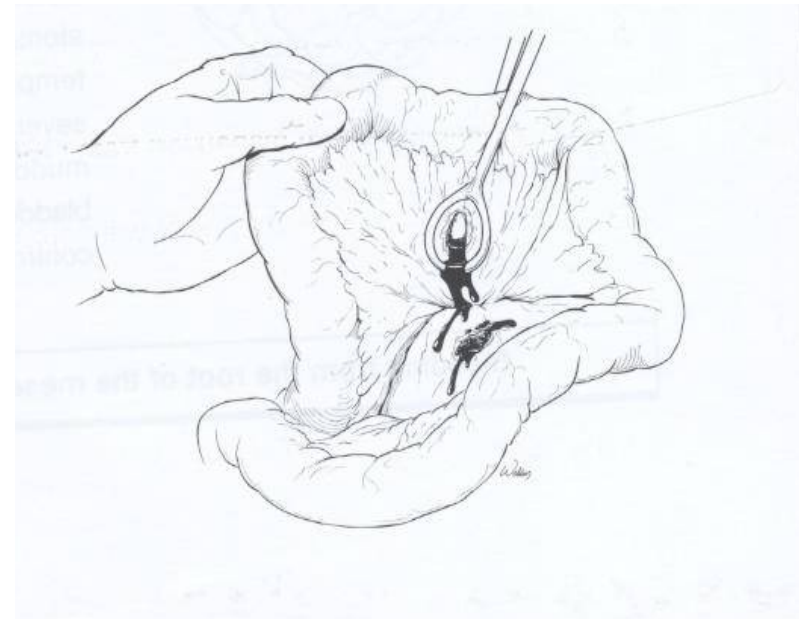
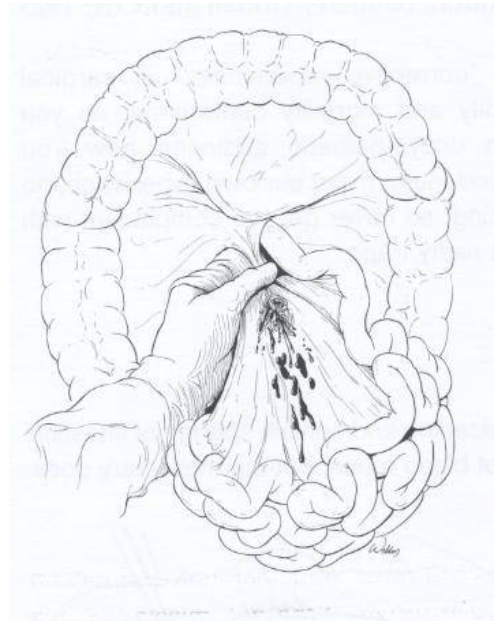
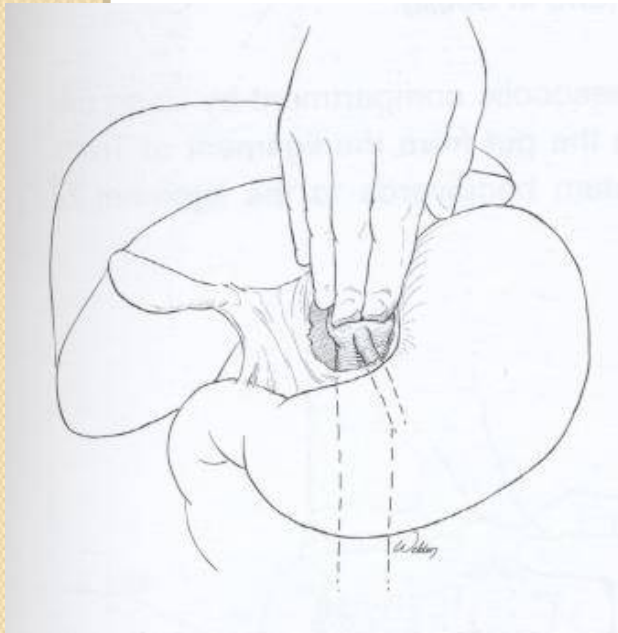
## Le emorragie venose



*Hirshberg et Mattox. Top Knife*

# La tecnica « Damage control »

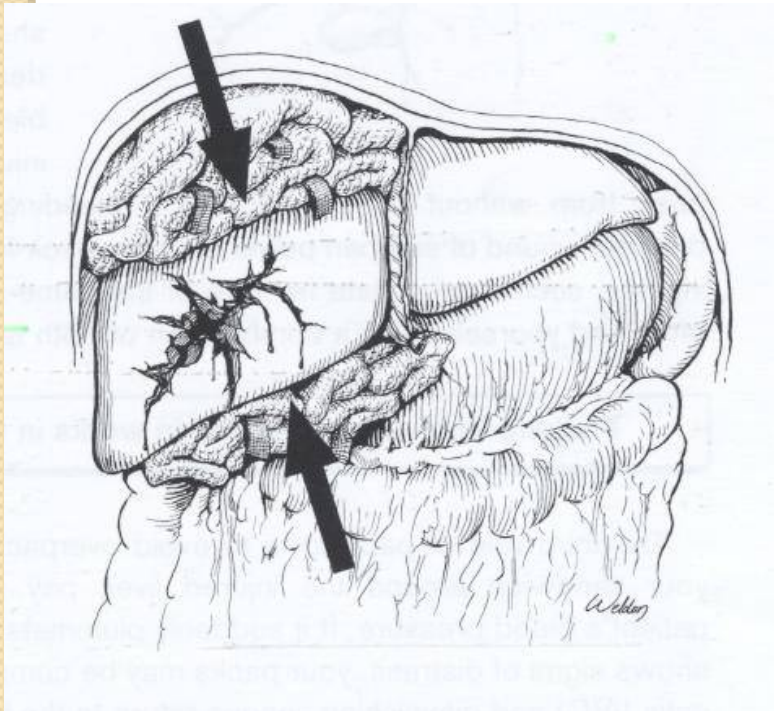
## Le emorragie arteriose



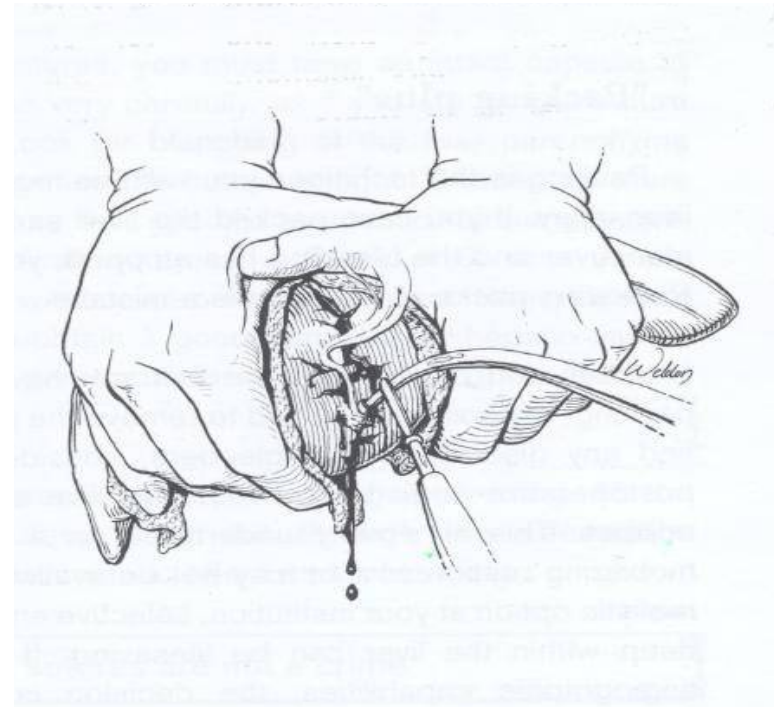
# Il trauma epatico

## Le tecniche

### Il packing



### La compressione manuale

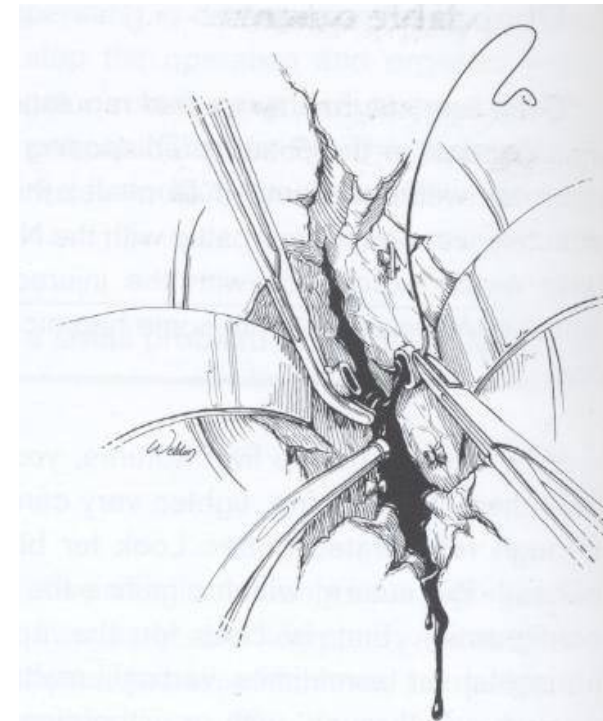
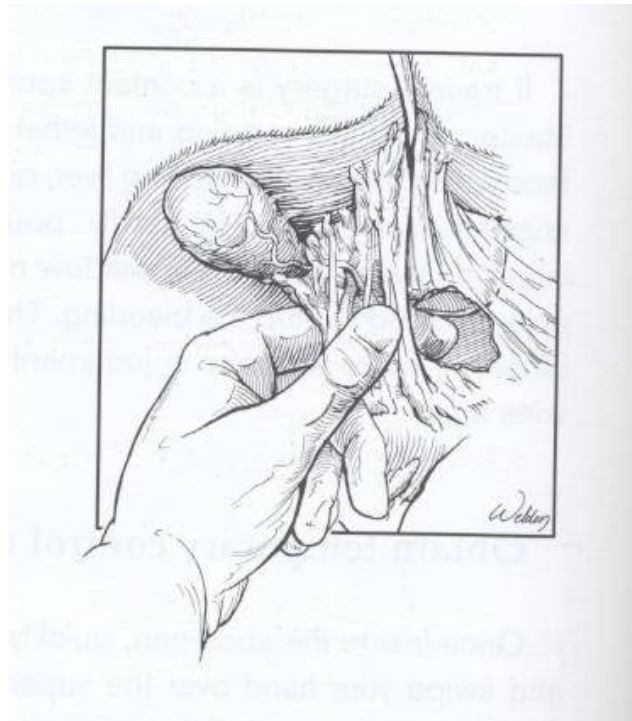




# Il trauma epatico

## Le tecniche

Il clampaggio del peduncolo, l'epatotomia





# Il trauma epatico

## Le tecniche

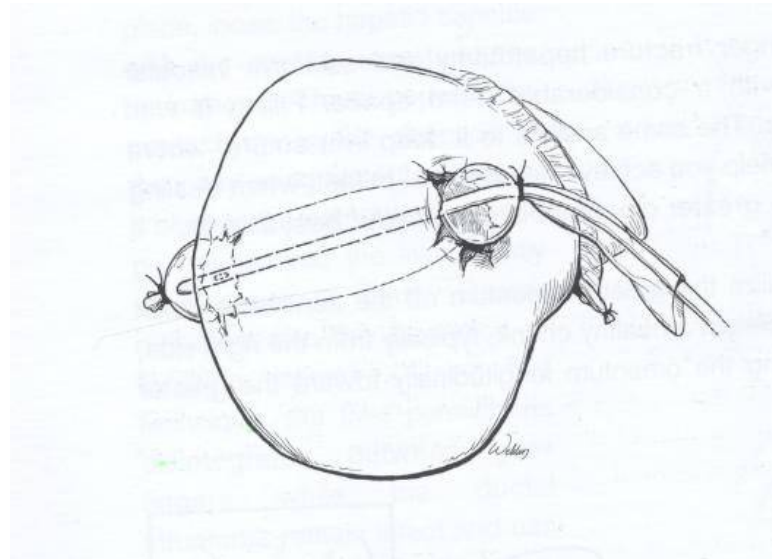
L'epatectomia « abbreviata »



# Il trauma epatico

## Le tecniche

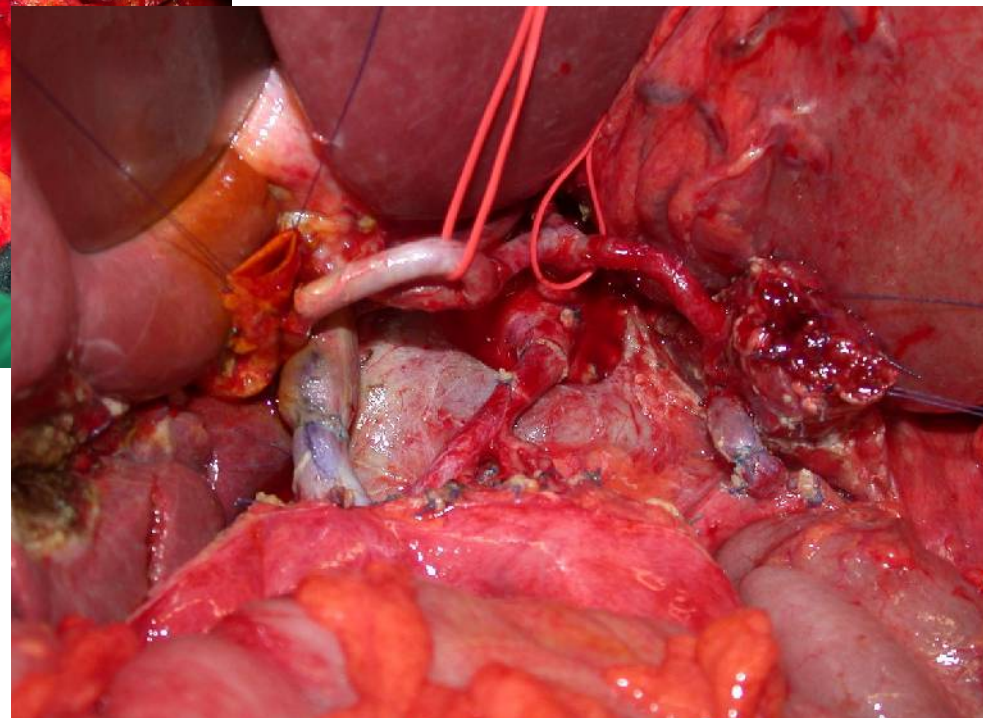
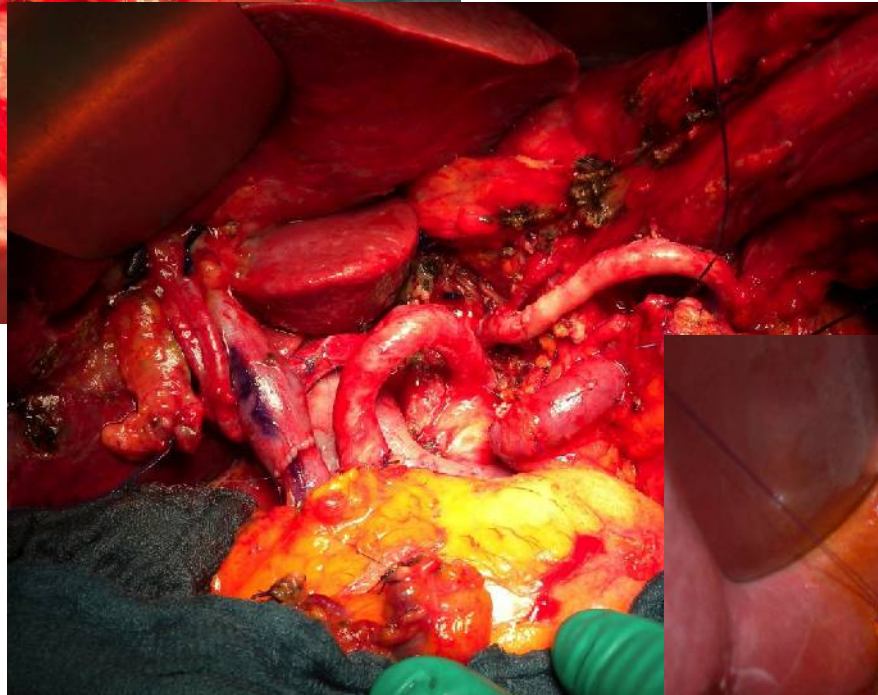
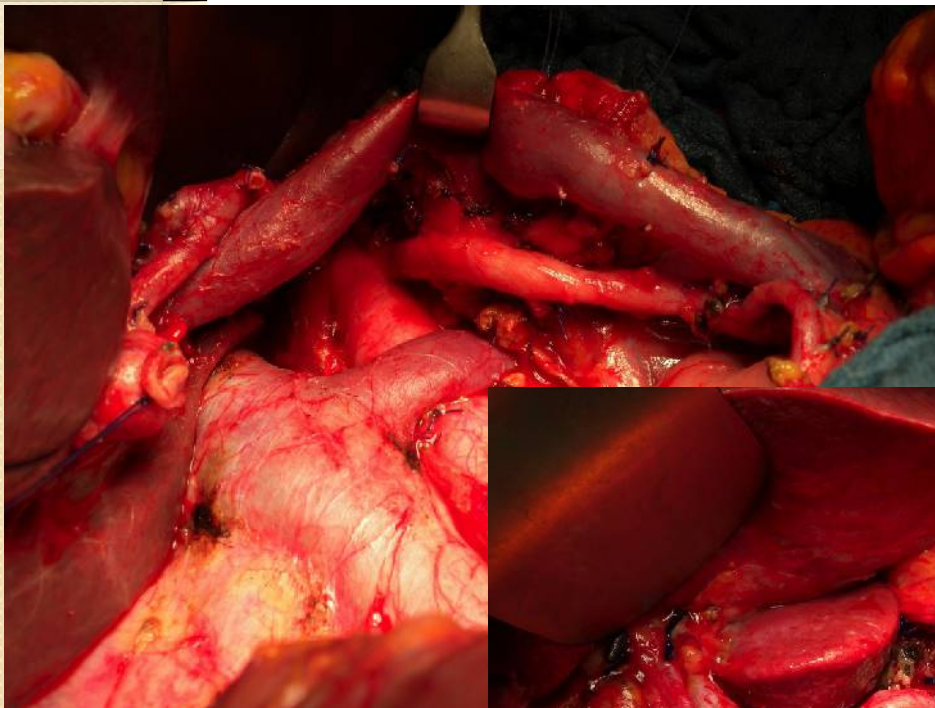
### Trauma penetrante



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# Le lesioni vascolari intra-operatorie

Tipo emorragia: inattesa, spesso massiva

Controllo e riparazione precisa

**Gli occhiali chirurgici**



**I clamp vascolari**

**Monofilamenti 5/0-6/0-7/0-8/0**

**Le clip**

**Le protesi vascolari**

**Non avere fretta, sapere chiedere aiuto!!**

## Le cause piu' frequenti la via « laparoscopica »

- Gli organi parenchimatosi
- Le lesioni vascolari intra-operatorie

# Le cause piu' frequenti la via « laparoscopica »

- **Gli organi parenchimatosi**
- Le lesioni vascolari intra-operatorie







## Le cause piu' frequenti la via « laparoscopica »

- Gli organi parenchimatosi
- **Le lesioni vascolari intra-operatorie**





# Le emorragie in laparoscopia

## Le regole d'oro

Ottenere il controllo del sanguinamento

**Tamponare con compresse**

**Clampare con pinze**

**suturare**

**Le clip**

**suturatrici**

**Non convertire senza avere prima controllato l'emorragia !!**