Závěr

Netraumatický KS má podobný managment diagnostiky jako traumatický, nicméně s vyšším důrazem na neinvazivní diagnostiku bez nutnosti punkce intrafasciálního prostoru pro riziko krvácení. Jediná definitivní léčba jasně rozvinutého KS je chirurgická fasciotomie, nicméně měli bychom k ní přistoupit až v době plné revaskularizace končetiny i za cenu možného trvalého neurologického postižení končetiny.

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