

BÖLÜM 18



Gebelik ve Romatolojik Hastalıklar

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Sistemik Lupus Eritamatozus

Giriş

Sistemik lupus eritamatozus (SLE) neredeyse tüm organları etkileyebilen nedeni bilinmeyen relaps ve remisyonla seyreden kronik otoimmün bir hastalıktır. İmmün toleransın kaybı ve persiste otoantikor üretimi (ANA) patogenezde yer almaktır ve çeşitli çevresel faktörler ve enfeksiyonlarla yatkın bireylerde tetiklenmektedir. SLE sıklıkla doğum yaşındaki kadınları etkileyen otoimmün bir hastalıktır. SLE gebelikte ,hem maternal hem de fetal açıdan sağlıklı gebelere göre yüksek risk taşır (1)

Gebelik Planlaması

İdeal olarak gebelikte kullanımı uygun medikasyonla hastalığın 6 ay sessiz olduğu bir dönem sonrası gebelik uygundur. Konsepsiyon anında aktif SLE olması, kötü maternal ve obstetrik sonuçların güçlü bir göstergesidir (1). Ancak tüm bu risklere rağmen gebeliklerin çoğu canlı doğumla sonuçlanmaktadır (2).

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Belimumab

Erken dönem in utero maruziyette artmış konjenital malformasyonla ilişkili olduğu gösterilememiştir. Laktasyon döneminde kullanımıyla ilgili yeterli veri yok. Uzmanlara göre ilacın kesilmesinden sonra 4 ay kadar konsepsiyon için beklenmesi önerilmektedir (37).

Abatasept

T hücre selektif aktivasyon engelleyicisidir. Hayvanlarda teratojen olamamakla birlikte yeterli insan çalışması yoktur. Laktasyon içinde yeterli veri bulunmamaktadır.

Tosilizumab

İL-6 reseptör inhibitörüdür. Gebelik ve lastasyon döneminde kullanımı ile ilgili yeterli veri bulunmamaktadır.

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