

BÖLÜM 17

Obstrüktif Uyku Apnesi Sendromu ve Kardiyovasküler Sonuçları



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GİRİŞ

Obstrüktif uyku apnesi sendromu (OUAS), solunum çabasındaki artışa rağmen uyku sırasında üst hava yolu tıkanıklığına bağlı tekrarlayan apne atakları veya azalmış inspiratuar hava akışı ile karakterize yaygın bir solunum bozukluğudur. Bu anormal solunum ve arousal paterni, ortaya çıkan hemodinamik, otonomik, enflamatuar ve metabolik etkileri, bir dizi kardiyovasküler hastalığın patogenezi-ne katkıda bulunmaktadır.

OUAS, önemli morbidite ve mortaliteye neden olan bir hastalıktır. Orta yaşlı yetişkin popülasyonun % 9-15'ini etkiler ve erkeklerde daha yaygındır (1).

OUAS'da meydana gelen hemodinamik ve nörohormonal değişiklikler, tekrarlanan aralıklı hipoksemi ve hiperkapni atakları, arousallar, artmış toraks içi negatif basınç, sempatik aktivasyonda artış, vazokonstrüksiyon ve periferik direnç artışı ile oluşan oksidatif stres, artmış inflamasyon ve protrombotik faktörler ile endotel disfonksiyonu, kronik dönemde bu sendromda en sık karşılaşılan kardiyovasküler komplikasyonlara yol açabilmektedir. OUAS, kardiyovasküler hastalığa neden olma potansiyeli nedeniyle uyku ile ilişkili en ciddi solunum bozukluğudur (2-4).

OUAS'lı hastalarda kardiyovasküler problemlerin artmış sıklıkta olduğu bilinmektedir. OUAS'ın en ciddi komplikasyonları arasında kalp yetmezliği, koroner arter hastalığı, aritmiler, inme, sistemik hipertansiyon, pulmoner hipertansiyon, ani ölüm ve serebrovasküler hastalık gibi kardiyovasküler hastalıklar yer alıp morbidite ve mortalite ile ilişkilidir (5-10).

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