

Bölüm **14**

YATAĞA BAĞIMLI HASTALARDA BESLENME

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YATAĞA BAĞIMLILIK NEDİR?

Yatağa bağımlılık, kişinin doğuştan veya edinsel olarak; kendine bakım, hareket, iletişim ve sfinkter kontrolü gibi fonksiyonları yitirmesi halidir. Yaş gruplarına göre farklı nedenlerle meydana gelmektedir.

Çocuklarda sıkılıkla doğuştan olan nörolojik ve genetik hastalıklar nedeniyle, yatağa bağımlılık erken yaşlarda ve uzun süreli olmaktadır. Serebral palsi, zeka geriliği, otizm spektrum bozukluğu, genetik bozuklıklar, down sendromu, motor nöron hastalıkları, SSPE, ayrıca skolyoz ve muskuler distrofi gibi kas-iskelet sistemi hastalıkları bu sebepler arasındadır.

Orta ve ileri yaşlarda ise kas iskelet sisteminin hastalıklarından, travma sonrası oluşan; kırık, yaralanma gibi durumlar, nörolojik hastalıklar, Kardiyovasküler Hastalıklar, Diyabet, Böbrek Hastalıkları, Obezite, Kronik Obstrüktif Akciğer Hastalığı (KOAH), Astım, Kanser, Psikiyatrik hastalıklar gibi dahili problemler, hastanın geçici veya tam bağımlı kalmasına sebep olabilir (1).

İleri yaşlarda; demans, alzheimer, parkinson, inme, düşмелere, kırıklara, menopoz ve osteoporoz'a bağlı kas-iskelet hastalıkları ortaya çıkar.

Türkiye'de ve dünyada gerek teknolojinin gelişmesi gerekse hastalıkların tedavisindeki gelişmelerden dolayı beklenen yaşam süresi ve bundan dolayı yaşlı nüfus artmıştır. Ülkemizde de yaşlı nüfus 5 yılda yüzde 16 artmıştır. Artan bu yaşlılık kronik hastalıkların ve dolayısıyla yatağa bağımlı bireylerin artmasına sebep olmaktadır (2).

Yatağa bağımlılık, akut ve kronik nedenlerle ortaya çıkabilir. Kronik hastalık; tıbbi tedavi ve rehabilitasyona rağmen, hastalığın, sakatlığın veya herhangi bir

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KAYNAKÇA

1. Gümüş R. Yatağa bağımlı hastalarda en sık görülen kronik hastalıkların analizi üzerine bir derleme çalışması. Uluslararası Sağlık Yönetimi ve Stratejileri Araştırma Dergisi, 2 (1)
2. http://tuik.gov.tr/PreTablo.do?alt_id=1047
3. Bilir, N. (2006). Değişen sağlık örüntülerinde halk sağlığı çalışanlarının rolü: Kronik hastalıklar ve yaşlılık sorunları. Toplum Hekimliği Bülteni, 25(3), 1-6.)
4. Akdemir, N., Bostanoğlu, H., Yurtsever, S., Kutlutürkan, S., Kapucu, S., & Özer, Z. C. (2011). Yatağa bağımlı hastaların evde yaşadıkları sağlık sorunlarına yönelik evde bakım hizmet gereklilikleri. Dicle Tıp Dergisi, 38(1).
5. US national library of medicine national institute of health joint collection development policy: the national agricultural library, the national library of medicine, the library of congress. February 27, 1998. Updated October 14, 2014, http://www.nlm.nih.gov/pubs/cd_hum.nut.html#2.
6. <https://www.who.int/news-room/fact-sheets/detail/malnutrition>
7. Saka B, Kaya O, Ozturk GB et al: Malnutrition in the elderly and its relationship with other geriatric syndromes. Clin Nutr, 2010; 29(6): 745–48 21.
8. White JV, Guenter P, Jensen G, Malone A, Schofield M. Consensus statement: Academy of Nutrition and Dietetics and American Society for Parenteral and Enteral Nutrition: characteristics recommended for the identification and documentation of adult malnutrition (undernutrition). JPEN J Parenter Enter Nutr 2012;36:275-83.
9. Singer, P., Blaser, A. R., Berger, M. M., Alhazzani, W., Calder, P. C., Casaer, M. P., ... & Preiser, J. C. (2019). ESPEN guideline on clinical nutrition in the intensive care unit. Clinical nutrition, 38(1), 48-79.
10. Hébuterne, X., Schneider, S., Peroux, J. L., & Rampal, P. (1997). Effects of refeeding by cyclic enteral nutrition on body composition: comparative study of elderly and younger patients. Clinical Nutrition, 16(6), 283-289.
11. Muscaritoli M, Anker SD, Argiles J, Aversa Z, Bauer JM, Biolo G, et al. Consensus definition of sarcopenia, cachexia and pre-cachexia: joint document elaborated by Special Interest Groups (SIG) "cachexia-anorexia in chronic wasting diseases" and "nutrition in geriatrics". Clin Nutr 2010;29:154-9.
12. Gunduz, H. D., Yıldırım, T., & Ersoy, Y. (2017). Sarcopenia and clinical presentation. Journal of Turgut Ozal Medical Center, 24(1).
13. James, P. T. (2004). Obesity: the worldwide epidemic. Clinics in dermatology, 22(4), 276-280.
14. Milne, A. C., Potter, J., Vivanti, A., & Avenell, A. (2009). Protein and energy supplementation in elderly people at risk from malnutrition. Cochrane database of systematic reviews, (2).
15. Kinney, J. M. (1992). Energy metabolism: tissue determinants and cellular corollaries. raven Press.
16. Arends, J., Bachmann, P., Baracos, V., Barthelemy, N., Bertz, H., Bozzetti, F. & Krznaric, Z. (2017). ESPEN guidelines on nutrition in cancer patients. Clinical Nutrition, 36(1), 11-48).
17. Bauer, J., Biolo, G., Cederholm, T., Cesari, M., Cruz-Jentoft, A. J., Morley, J. E., ... & Visvanathan, R. (2013). Evidence-based recommendations for optimal dietary protein intake in older people: a position paper from the PROT-AGE Study Group. Journal of the american Medical Directors association, 14(8), 542-559.
18. Institute of Medicine: Crossing the Quality Chasm: A New Health System for the 21st Century. Washington, DC, National Academy Press, 2001. <http://www.nap.edu/books/ 0309072808/html/ Google Scholar>
19. Scrimgeour A, Condlil ML. Nutritional treatment for traumatic brain injury. J Neurotrauma 2014;31:989-99.
20. Wu A, Ying Z, Gomez-Pinilla F. The salutary effects of DHA dietary supplementation on cognition, neuroplasticity, and membrane homeostasis after brain trauma. J Neurotrauma 2011;28:2113-22)
21. Lawrence, D. W., & Sharma, B. (2016). A review of the neuroprotective role of vitamin D in traumatic brain injury with implications for supplementation post-concussion. Brain Injury, 30(8), 960–968.)

22. Cope EC, Morris DR, Levenson CW. Improving treatments and outcomes: an emerging role for zinc intratraumatic brain injury. *Nutr Rezv* 2012;70:410-3
23. (Foley NC, Martin RE, Salter KL, Teasell RW. A review of the relationship between dysphagia and malnutrition following stroke. *J Rehabil Med.*)2009;41(9):707-13.
24. Lieber, A., Hong, E., Putrino, D., Nistal, D., Pan, J., & Kellner, C. (2018). Nutrition, Energy Expenditure, Dysphagia, and Self-Efficacy in Stroke Rehabilitation: A Review of the Literature. *Brain Sciences*, 8(12), 218.
25. Cushing ML, Traviss KA, Calne SM. Parkinson's disease: Implications for Nutritional Care. *Can J Diet Prac Res* 2002; 63: 81-87
26. Mischley, L. K. (2017). Nutrition and Nonmotor Symptoms of Parkinson's Disease. Nonmotor Parkinson's: The Hidden Face - Management and the Hidden Face of Related Disorders, 1143–1161.doi:10.1016/bs.irn.2017.04.013
27. Riccio, P., & Rossano, R. (2015). Nutrition facts in multiple sclerosis. *ASN neuro*, 7(1), 1759091414568185.
28. Choi IY, Piccio L, Childress P, Bollman B, Ghosh A, Brandhorst S, et al. A diet mimicking fasting promotes regeneration and reduces autoimmunity and multiple sclerosis symptoms. *Cell Rep.* 2016;15(10):2136–46
29. Wank RL, Dugan BB. Effect of low saturated fat diet in early and late cases of multiple sclerosis. *Lancet* 1990;336:37–9.
30. Gallai V, Sarchielli P, Trequattrini A, Franceschini M, Floridi A, Firenze C, et al. Cytokine secretion and eicosanoid production in the peripheral blood mononuclear cells of MS patients undergoing dietary supplementation with n-3 polyunsaturated fatty acids. *J Neuroimmunol* 1995;56(2):143–53.
31. Rossini M, et al. Guidelines on prevention and treatment of vitamin D deficiency. Italian Society for Osteoporosis, Mineral Metabolism and Bone Diseases (SIOMMMS). *Reumatismo* 2011;63(3):129–47.
32. Esposito, S., Bonavita, S., Sparaco, M., Gallo, A., & Tedeschi, G. (2018). The role of diet in multiple sclerosis: a review. *Nutritional neuroscience*, 21(6), 377-390.
33. Farinotti M, Vacchi L, Simi S, Di Pietrantonj C, Brait L, Filippini G. Dietary interventions for multiple sclerosis. *Cochrane Database Syst Rev* 2012;12:CD00419248.
34. Sedel F, Papeix C, Bellanger A, Touitou V, Lebrun-Frenay C, Galanaud D, et al. High doses of biotin in chronic progressive multiple sclerosis: a pilot study. *Mult Scler Relat Disord* 2015;4 (2):159–69.
35. Bitarafan S, Saboor-Yaraghi A, Sahraian MA, Soltani D, Nafissi S, Togha M, et al. Effect of vitamin A supplementation on fatigue and depression in multiple sclerosis patients: a double-blind placebo-controlled clinical trial. *Iran J Allergy Asthma Immunol.* 2016;15(1):13–9.
36. de Baaij JH, Hoenderop JG, Bindels RJ. Magnesium in man: implications for health and disease. *Physiol Rev* 2015;95(1):1–46.
37. Plemel JR, Juzwik CA, Benson CA, Monks M, Harris C, Ploughman M. Over-the-counter anti-oxidant therapies for use in multiple sclerosis: a systematic review. *Mult Scler* 2015;21(12):1485–95.
38. Kellogg, J., Bottman, L., Arra, E. J., Selkirk, S. M., & Kozlowski, F. (2017). Nutrition management methods effective in increasing weight, survival time and functional status in ALS patients: a systematic review. *Amyotrophic Lateral Sclerosis and Frontotemporal Degeneration*, 19(1-2), 7–11. doi:10.1080/21678421.2017.1360355
39. National Clinical Guideline Centre. NICE guideline NG42: Motor neurone disease: assessment and management. Methods, evidence and recommendations. February 2016.
40. Grasset L, Brayne C, Joly P, Jacqmin-Gadda H, Peres K, Foubert-Samier A, et al. Trends in dementia incidence: evolution over a 10-year period in France. *Alzheimers Dement.* 2016;12:272–80.
41. Staehelin H. Micronutrients and Alzheimer's disease. *Proc Nutr Soc* 2005; 64: 565-70.
42. Lefèvre-Arbogast, S., Wagner, M., Proust-Lima, C., & Samieri, C. (2019). Nutrition and Metabolic Profiles in the Natural History of Dementia: Recent Insights from Systems Biology and

- Life Course Epidemiology. Current Nutrition Reports. doi:10.1007/s13668-019-00285-1
- 43. Volkert D, Chourdakis M , Faxen-Irving G , Frühwald T, Landi F, Suominen MH et al.vESPEN guidelines on nutrition in dementia, Clinical Nutrition (2015), <http://dx.doi.org/10.1016/j.clnu.2015.09.004>
 - 44. Sampson EL, Candy B, Jones L. Enteral tube feeding for older people with advanced dementia. Cochrane Database of Systematic reviews 2009; Issue 2: CD007209
 - 45. Scarimeas, N., Anastasiou, C. A., & Yannakoulia, M. (2018). Nutrition and prevention of cognitive impairment. *The Lancet Neurology*. doi:10.1016/s1474-4422(18)30338-7
 - 46. Islam MT, Tabrez S, Jabir NR, et al. An insight on the therapeutic potential of major coffee components. *Curr Drug Metab* 2018; 19: 544–56
 - 47. Winter S, Autry A, Boyle C, Yeargin-Allsopp M. 2002. Trends in the prevalence of cerebral palsy in a population- based study. *Pediatrics*. 110:1220–1225.
 - 48. Marchand V, Motil K; NASPGHAN Committee on Nutrition. 2006. Nutrition support for neurologically impaired children: a clinical report of the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition. *J Pediatr Gastroenterol Nutr*. 43:123–135
 - 49. www.lifeexpectancy.org/ articles/newgrowthcharts.shtml.
 - 50. Gurka MJ, Kuperminc MN, Bennis JA, Bennis JA,Grossberg RI, Houlihan CM, Stevenson RD, Henderson RC. 2010. Assessment and correction of skinfold thickness equations in estimating body fat in children with cerebral palsy. *Dev Med Child Neurol*. 52:e35–e41
 - 51. Rempel G. 2015. The importance of good nutrition in children with cerebral palsy. *Phys Med Rehabil Clin N Am*. 26:39–56.
 - 52. Veugelers R, Benninga MA, Calis EA, Willemsen SP, Evenhuis H, Tibboel D, Penning C. 2010. Prevalence and clinical presentation of constipation in children with severe generalized cerebral palsy. *Dev Med Child Neurol*. 52:e216–e221.
 - 53. Scarpato, E., Staiano, A., Molteni, M., Terrone, G., Mazzocchi, A., & Agostoni, C. (2017). Nutritional assessment and intervention in children with cerebral palsy: a practical approach. *International Journal of Food Sciences and Nutrition*, 68(6), 763–770. doi:10.1080/09637486.2017.1289502
 - 54. Fehlings D, Switzer L, Agarwal P, Wong C, Sochett E, Stevenson R, Sonnenberg L, Smile S, Young E, Huber J, et al. 2012. Informing evidence-based clinical practice guidelines for children with cerebral palsy at risk of osteoporosis: a systematic review. *Dev Med Child Neurol*. 54:106–116.
 - 55. Stallings VA, Zemel BS, Davies JC, Cronk CE, Charney EB. 1996. Energy expenditure of children and adolescents with severe disabilities: a cerebral palsy model. *Am J Clin Nutr*. 64:627–634.
 - 56. Taylor BE, McClave SM, Martindale RG, et al. Guidelines for the provision and assessment of nutrition therapy in the adult critically ill patient: society of critical care medicine (SCCM) and american society for parenteral and enteral nutrition (ASPEN). *Crit Care Med* 2016;44:390–438
 - 57. Burnham WR. The role of Nutrition Support Team. In:Payne-James J, Grimble G, Silk D(Eds): *Artificial Nutrition Support In Clinical Practice*. London, Edward Arnold, 1995; 175-86
 - 58. Özlu C(2009)Klinisyenler için Beslenme (1.Baskı) Hematolojik kanserlerde Beslenme. İstanbul. İstanbul Tip Kitapеви