# Bölüm 4

# İNTRAVENÖZ İMMÜNOGLOBULİN VE ETKİ MEKANİZMALARI

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## GİRİŞ

İmmünoglobulinler (İg), antikor aktivitesi olan glikoprotein yapısında moleküllerdir. Plazmadaki proteinlerin yaklaşık %20'si İg'lerden oluşur (7-16 gr/L). İnsanda 5 farklı İg var ve bunların %80'i İgG tabiatındadır[1]. İg antijenik uyarı ile B hücrelerinin plazma hücrelerine dönüşümü ile sentezlenir ve uyarı ile salgılanır. Antijene spesifiktir. Kanda, dokularda ve lenf içinde serbest veya membrana bağlı bulunabilir. Protein elektroforezi gamma globülin kısmında yer alır. İg'lerin sınıflandırılması monomer, dimer veya pentamer şeklinde olabilir. İgD, E ve G monomerik yapıda iken İgA dimer ve İgM pentamer dir. Bu adlandırma H zincirinin sabitine göre yapılır (Şekil-1). İgG disülfid bağının sayısına göre dört farklı alt tipi var. Bunların dağılımları; %65 İgG1, %23 İgG2, %8 İgG3, %4 İgG4 dır. İntravenöz İmmunoglobulinler (İVİG), birkaç bin sağlıklı gönüllü verici plazmasından elde edilen normal İgG'nin havuzlanmış bir preparatları dır. Çok sayıda otoimmün ve inflamatuar hastalıkların tedavisinde yaygın olarak kullanılmaktadır. Enfeksiyonlara karşı korumada; hipogamaglobunemi idame tedavi ve pasif immünizasyonda hiperimmün globülin olarak yer alır. İVİG'nin etki mekanizmaları karmaşıktır. İVİG etkileri konusunda bilinenden daha çok bilinmeyen veya tam açıklanamamış mekanizmalar vardır. Klinisyenler için burada İVİG etki mekanizmaları özetlenirken, genel özellikleri, üretim ve kullanım alanları ve yan etki konusunda bilgi verilecektir.

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