

10. BÖLÜM

ENDOKRİNOLOG GÖZÜ İLE TİP 2 DİYABET VE RETİNOPATİYE YAKLAŞIM

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1. GİRİŞ

Tip 2 diyabet (DM) genetik, çevresel, immünolojik mekanizmalar temelinde insülin sekresyonunda ve/veya insülin etkisinde defekt gelişmesi sonucu oluşan multipl organ ve sistemleri etkileyen kronik bir hastalıktır. Oluşan hipergliseminin multisistemik toksik etkisi sonucu retinopati, nefropati, nöropati ve vasküler komplikasyonlar gibi mikrovasküler komplikasyonlara neden olmaktadır. Komplikasyonlar özellikle glukozun insülininden bağımsız bir şekilde hücre içine girdiği kalp, sinir sistemi, göz ve mikrovasküler dokularda daha sık gözlenmektedir. Obezite ile birlikte tüm dünyada pandemi haline gelmiş kardiyometabolik hastalıktır. Diyabetik bireylerde glisemik değişkenliğe bağlı refraksiyon kusurları, nöropatiye bağlı diplopi, yaşa bağlı katarak erken prezentasyonu ve hızlı progresyonu gibi diğer göz problemleri daha sık olmakla beraber diyabetik retinopati (DR); diyabetik bireylerdeki görme kaybının en önemli nedenidir. Retinopati gibi mikrovasküler komplikasyonlu diyabetik bireyler kardiyovasküler hastalık açısından çok yüksek riskli (10 yıllık KV ölüm riski >%10) kabul edilmektedir.

2. EPİDEMİYOLOJİ

Uluslararası Diyabet Federasyonu (IDF) verilerine göre diyabetin dünyada 462 milyon kişiyi etkilediğini ve bu pandeminin devam etmesi durumunda rakamın 2035 yılında 592 milyona ulaşabileceği tahmin edilmektedir. Tüm diyabetlilerin %80-90'ını Tip 2 diyabet oluşturmaktadır. DR'nin yıllık insidansı % 2,2 ile % 12,7

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