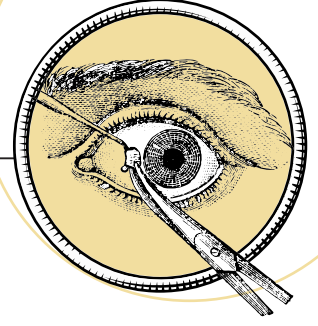


BÖLÜM 6

Ekzotropyalar



Ayşe Güzin TAŞLIPINAR UZEL¹

1. Giriş

Ekzodeviasyonlar, binoküler görme ve füzyon mekanizmalarının gelişiminde ve sürdürülmesinde bozulmalar veya medial rektus kasının kusurlu aksiyonu sonucu gerçekleşmektedir. Ekzoforyalar normal popülasyonda oldukça sık görülmektedir. Sağlıklı yenidoğanların %60-70 kadarında, hayatın 4-6. ayında sıklıkla düzelen ekzodeviasyonlar görülebilir. Ekzotropya (XT), bir veya iki gözün dışarı doğru manifest kaymasıdır. Her yaş grubunda görülebilir. Ekzotropyaların kabul gören bir sınıflaması olmamakla birlikte anlatım kolaylığı açısından aşağıdaki şekilde sınıflanmıştır:

1. Primer XT
 - 1a. Devamlı XT
 - *İnfantil XT
 - *Kazanılmış XT
 - *Mekanik XT
 - 1b. İntermitan XT
2. Duyusal XT
3. Konsekütif (Ardıl) XT
4. Rezidüel ve Rekürren XT

¹ Dr. Öğr. Üyesi, Ankara Ufuk Üniversitesi Tıp Fakültesi Göz Hastalıkları AD., agtaslipinar@gmail.com

- İntermitan XT'de uzak stereopsisteki bozulma yakın stereopsistekine göre progresyonun daha erken bir göstergesidir.
- İntermitan XT'de 10-20 PD'lik fazla düzeltme önerilir. Ancak; görme gelişimi immatur çocuklarda bunun ambliyopiye ve monofiksasyon sendromuna yol açabileceği unutulmamalıdır.
- Duyusal XT'de cerrahi sonrası uzun dönemde nüks sıktır.
- Konsekütif XT'li hastalarda belirgin göz hareket kısıtlılığı varsa cerrahi planlanmalıdır.

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