

## Bölüm 4

# KATARAKT EPİDEMİYOLOJİSİ

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### GİRİŞ

Dünya Sağlık Örgütüne (DSÖ) göre tüm dünyada körlük ve görme kaybının en sık nedeni kataraktır. Nufusun yaşlanmasıyla, lentiküler opasite sonucu oluşan görme kayıplarının sıklığı her yıl artmaktadır. (1) ve A.B.D.'de azalmış vizyonun en önde gelen sebebidir. (2) Siyah Amerikalılar'da tek başına en sık körlük nedenidir ve %36.8'inde görülmektedir. (3) Amerika Birleşik Devletleri gibi gelişmiş ülkelerde katarakt ameliyatı hem yaygın olarak yapılan hem de başarılı olarak uygulanan bir cerrahi olmasına rağmen ciddi bir maaliyeti olmaktadır. Katarakt oluşumundaki 10 yıl gecikmenin katarakt ameliyatına duyulan ihtiyacı %45 azaltacağı tahmin edilmektedir. (5)

### YAŞA BAĞLI KATARAKT: YÖNTEMSSEL DEĞERLENDİRMELER

Hastalığın tanımını ve ciddiyetini açıklamada yardımcı olan fotograflama ve evreleme şemalarının gelişmesi, katarakt için yapılan epidemiyolojik araştırmalarda önemli ilerlemelere yol açmıştır. (6) Klinik muayene ile toplanan bir çok bilginin geçerliliği ve güvenilirliğini değerlendirmek oldukça zordur. Yayınladığımız bilgiler hem standart lens fotoğraflarına hem de kliniğe göre yapılmış evrelemeyi içeren, değişik ulusal ve uluslararası çalışmaları içermektedir. Katarakt tipleri kataraktın küresel prevalansı için gruplandırılmıştır. Birçok çalışmada katarakt prevalansı katarakt opasitesine göre değil, görme keskinliği değerlendirilmesi ön planda tutularak yapılmıştır. Bununla beraber etyolojik ilişkileri araştırırken özel katarakt tiplerini araştırmak gerekmektedir.

### YAŞA BAĞLI KATARAKT TİPLERİ

Yaşa bağlı gelişen kataraktın en sık görülen 3 tipi vardır: nükleer, kortikal ve arka subkapsüler. Bu tiplerin nedenlerinin genetik ve çevresel olduğuna inanılmaktadır ve hem niceliksel hem niteliksel olarak ayrılmaktadır. (7-13) Cerrahi gerektirebilecek ciddiyetteki kataraktın riskini etkileyen faktörlerin tamamını tanımlamak zor olsa da çok önemlidir.

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