



BÖLÜM 13

TİROİD HASTALIKLARI VE AKCİĞER

Berna Botan YILDIRIM¹

GİRİŞ

Tiroid bezi, trakeanın ön kısmında yer alan, 25-40 gram ağırlığında ve şekli kelebeğe benzeyen bezdir. Bu organın temel görevlerinden biri vücut metabolizmasını ayarlayan T3 ve T4 hormonlarını salgılamaktır. Tiroid ve akciğer embriyolojik olarak endoderm kaynaklıdır. Tiroid transkripsiyon faktörü-1 (TTF-1), tiroid ve akciğerde hem morfogenezi hem de gen ekspresyonunu kontrol eden transkripsiyon faktörünü içeren bir homeodomaindir (1). Dolayısıyla tiroid kaynaklı kronik enflamatuar süreçlerin akciğer inflamasyonu ve disfonksiyonuna neden olması akla yatkındır. Ayrıca tiroid hormonları akciğer gelişimi ve sürfaktan sentezi ile akciğer savunma sisteminde önemli rol oynarlar.

Otonom sinir sistemi tarafından kontrol edilen solunum sisteminde hormonlar da rol oynar. Solunum ve hormonlarla ilgili kapsamlı bir makalede Saareanta, tirotropin salgılatıcı hormon (TRH) dahil olmak üzere bir dizi hormonun solunumun kontrolünde rol oynadığını göstermiştir (2). TRH ile solunum sistemi arasında bir ilişki olduğuna dair artan sayıda kanıt bulunmaktadır. Anestezi uygulanmış sıçanların rostral ventrolateral medullasının, retrotrapezoid çekirdeğine TRH enjekte edilmesi ile doza bağımlı olarak ventilasyonda artış olduğu ve TRH'nin duruma bağımlı solunum kontrolü modülatörü olarak önemli bir rolü olabileceği sonucuna varılmıştır (3).

Toplumda tiroid fonksiyon bozukluklarına çok sık rastlanmaktadır. Birçok tiroid hastalığı, hipotiroidizm, hipertiroidizm, nodüler guatr ve tiroid kanseri

¹ Uzm. Dr., Başkent Üniversitesi Konya Hastanesi, Göğüs Hastalıkları Kliniği, mdberna2001@yahoo.com

- Hipertiroidizm, hasta tarafından özellikle eforla dispne olarak algılanan hipoksemi ve hiperkapniye yanıt olarak artan ventilasyon dürtüsü ile ilişkilidir. Hipertiroidizm ayrıca solunum kas zayıflığına ve pulmoner hipertansiyona neden olabilir.
- Daha büyük servikal veya retrosternal guatrlar öksürük, gece dispnesi, hırıltı ve stridor semptomlarıyla birlikte trakeal kompresyona neden olabilir.
- Papiller, foliküler ve Hürthle hücreli tiroid kanseri akciğere metastaz yapabilir.

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