

BÖLÜM 1

DİYABETİK RETİNOPATİ



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GİRİŞ

Diyabetes mellitus (DM) tüm dünyada görülen morbidite ve mortalitesi yüksek global bir epidemidir. 2040 yılında dünya genelinde 600 milyon kişinin diyabet olacağı öngörülmektedir (1). Diyabetik retinopati (DR) ise tip 1 ve 2 diyabetin en iyi bilinen mikrovasküler komplikasyonlarından biri olup önemli bir körlük nedenidir. Epidemiyolojik çalışmalar her 3 diyabetik hastadan birinde DR olduğunu göstermektedir. DR gelişimi ve görme kaybı erken tanı ve tedavi ile önlenabilir.

PATOGENEZ

Diyabetik retinopati oluşumu ve progresyonunda birbiriyle bağlantılı bir dizi biyokimyasal, hemodinamik ve immünolojik mekanizmalar öne sürülmüştür.

Biyokimyasal mekanizmaların başında polioll yolu aktivasyonu, diaçilgliserol- protein kinaz C yolunun aktivasyonu, vasküler endotelial büyüme faktörü (VEGF), insülin benzeri büyüme faktörü-1 (IGF-1) ve hipoksi ile indüklenebilir faktör 1 (HIF-1) gibi büyüme faktörlerinin artmış ekspresyonu, ileri glikasyon son ürünlerinin oluşumu, oksidatif stres yer almaktadır (2).

Retinanın hiperglisemiye ilk cevabı kan akımı değişikliği ve perisit hücre kaybıdır. Perisitler kapillere yapısal destek sağlamaktan sorumlu olup kaybı mikroanevrizma oluşumuna neden olur. Perisit kaybına ek olarak endotel hücrelerinde

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- yoğun premaküler subhyaloid hemoraji
- hayalet hücreli glokom
- anterior hyaloidal fibrovasküler proliferasyon
- anti-VEGF, steroid ve lazer tedavisine cevap vermeyen DMÖ ve vitreomaküler traksiyonun mevcudiyeti

Diyabetik vitrektomide amaç vitreus opasitelerini ve fibrovasküler proliferasyonları temizlemek, PRF'nin tamamlanmasını sağlamak, retinal traksiyonları gevşetmek, retinal yırtıkları lazer ve internal tamponadlarla kapatarak retinal yatışıklığı sağlamak, sıkı arka hyaloidi ortadan kaldırmaktır. Adjuvan olarak pre-operatif dönemde anti-VEGF ajanların kullanılması intraoperatif kanama sıklığı ve yoğunluğunu azaltmakta, iyatrojenik retinal yırtık gelişimini azaltmaktadır (30). Endolazer ve geniş açılı görüntüleme sistemlerindeki gelişmeler giderek daha küçük kesili transkonjonktival vitrektomi sistemlerinin kullanılabilir hale gelmesi cerrahi başarıyı ve hasta konforunu artırmıştır (31).

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