

## Giriş

Dudak ve damak yarığı (DDY) deformiteleri, yüz bölgesinin en sık görülen konjenital malformasyonlarından. Bu konjenital deformite üst dudak, burun ve alveoler malformasyona neden olup, estetik ve dişsel problemlere sebep olmakla birlikte; çiğneme, beslenme, konuşma gibi fonksiyonel bozukluklar ile de sonuçlanmaktadır.(1) DDY deformiteleri dünya çapında her canlı doğumda 1:500 ya da 1:1000 oranında görülmektedir.(2) DDY olgularının çoğunluğu nonsendromik olup, tek taraflıdır ve genellikle sol tarafta görülmektedir.(1)

## Embriyoloji

Yüz yapıları, gebeliğin 4. ve 12. haftaları arasında oldukça karmaşık bir şekilde gelişerek, yüz öğelerinin sol ve sağ tarafları orta bölgede birleşmektedir. Bu füzyon yetersiz kaldığı zaman kraniyofasiyal yarıklar meydana gelmektedir. İzole ya da bir sendromun parçası olarak çeşitli yarık tipleri oluşabilir. Füzyondaki bu başarısızlık genetik ve/veya çevresel hazırlayıcı faktörler sebebiyle olabilir.(3)

## Etyoloji

DDY oluşumunda hem çevresel hem de genetik faktörler etkili olmaktadır. (4) Antibiyotik kullanımı, aktif veya pasif sigara kullanımı, folik asit ve kalsiyum eksikliği, annenin beslenmesi çevresel faktörleri oluşturmaktadır.(5) Genetik nedenler arasında kromozomların yeniden düzenlenmesi, teratojen maruziyetine karşı genetik duyarlılık ve çoklu genlerin karmaşık katkıları sayılabilir.(6)

## Dudak Damak Yarık Tedavileri

DDY tedavisi, doğumdan hemen sonra başlayan ve yetişkinliğe kadar devam eden, disiplinlerarası bir ekibin katılımını gerektiren, uzun bir süreçtir. Bu olgu-

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