

Bölüm 17

Polikistik Over Sendromu

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GİRİŞ

Polikistik over sendromu (PKOS) kadınlarda anovuluar semptomların ve hiperandrogenizmin büyük çoğunluğunu oluşturur (Rosenfield,2016). Ayrıca kronik anovulasyona bağlı infertilitenin en sık nedenidir (Azziz,2004). PKOS' un etyolojisi net olarak bilinmemektedir. Kadınlarda kronik anovulasyon,menstrüel düzensizlik,klinik olarak belirgin hiperandrojenizm ve metabolik disfonksiyonun önemli bir nedenidir. Kadınlarda en sık görülen endokrin ve metabolik bozukluklardan biri olarak kabul edilir.Bu sendrom ilk olarak 1935'te Stein ve Leventhal tarafından tanımlanmıştır(Stein,1935). PKOS tanısı infertilite, metabolik sendrom ve tip 2 diabetes mellitus için risk artışı ile beraber kardiyovasküler hastalık ve endometrial karsinom için yaşam boyu etkilere sahiptir (Fauser,2011; Hart,2015; Twig,2016).Genetik,çevresel faktörler ve beslenme suçlansa da gerçek etyolojisi hala bilinmemektedir.

ETİYOLOJİ

PKOS oluşumuna yol açan mekanizmalar yıllardır yapılan çalışmalara rağmen hala netlik kazanmamıştır. PKOS, genetik ve çevresel faktörlerin etkileşmesinden kaynaklanan ve genellikle ergenlikte olgun gonadotropin seviyelerine ulaştığında ortaya çıkan karmaşık bir durum olarak kabul edilir(Rosenfield,2016). PKOS'un patogenezi, "iki vuruşlu" bir hipoteze göre düşünülebilir; buradaki bozukluk, provokatif bir faktörün ("ikinci vuruş")

ortaya çıkmasıyla belirginleşen , doğuştan programlanmış bir yatkınlık ("ilk vuruş") devamında ortaya çıkar(Rosenfield,2016). Konjenital faktörler kalitsal (genetik) veya edinilmiş olabilir (örneğin; maternal ilaçlar veya fetusu etkileyen beslenme bozuklukları). Postnatal provokatif faktör genellikle, doğuştan programlanmış ve / veya doğum sonrası basit (eksojen) obezite nedeniyle edinilmiş olabilen insüline dirençli hiperinsülinizmdir (Leibel,2006). Bu karmaşık etkileşimler genellikle değişken penetrasyon ile otozomal dominant kalıtım modelini taklit eder. PKOS'un kalıtım derecesi, aynı ikiz kız kardeşler üzerinde yapılan çalışmalara dayanarak yüzde 70'in üzerinde bulunmuştur (Vink,2006).

Kalitsal özellikler

PKOS için risk faktörlerikalitsal özelliklerin yanında, maternal PKOS, polikistik over morfolojisi (PKOM), hiperandrojenemi ve metabolik sendromu içerir.

Maternal PCOS

Maternal PKOS, kızlarda PKOS için bir risk faktöridür; PKOS'lu kadınların yaklaşık yüzde 25'inde PKOS'lu bir anne vardır, ancak tahminler oldukça değişkendir (Leibel,2006; Kahsar-Miller,2001; Sam,2006). Uzun vadeli ileriye dönük yapılan çalışmalarda yüksek DHEAS düzeyleri peripubertal olarak saptanmış ve ergenliğin geç dönemlerinde daha yüksek bazal testosteron ve 17-OH progesteron seviyeleri tespit edilmiştir.Menopoz sonrası PKOS'lu kadınların kızlarının arasında kontrol grubuna göre

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