

KANSER HASTALARINDA GENEL KARDİYAK DEĞERLENDİRME

1. BÖLÜM

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GİRİŞ

Günümüz gelişen sosyo-ekonomik durum ve bilimin teknolojiye yansımalarından dolayı hastalıkların tanı, takip ve tedavileri bir önceki dekada göre daha iyi bir şekilde düzenlenebilmektedir. Bu durum tıbbın genel sağlık problemlerine çözüm getirme olasılığını artırmıştır.

Diğer tüm tıp alanlarında olduğu gibi onkoloji ve kardiyoloji hastalarının yaşam süresi de uzamaktadır. Bu durum biz hekimleri giderek artan sıklıklarda ortak kesişim kümesi olan hastalar ile karşı karşıya getirmektedir.

Kemoterapiler sonrası meydana gelen kardiyotoksikite tedavinin sık kardiyak komplikasyonları sonucu zamanla ve elde edilen tecrübeler ışığında kardiyologların da tedavi ve takibe dahil olmasını gerektirmiştir. Sadece bununla da kalmıyor ilk değerlendirmeden yaşam sonuna dek döngüde kardiyoloji ve onkolojinin oluşturduğu bütüncü ekibe kardiyolo-onkoloji ekibi denilir.

KEMOTERAPİ VE RADYASYON TEDAVİSİNE BAĞLI KARDİYOTOKSİSİTEYE GENEL BAKIŞ

Son yıllarda birçok kanser türü tedavisine yönelik spesifik ilaçlar önemli ölçüde artmıştır.

Klasik hücre döngüsü kinetiğine dayalı ilaçların yanı sıra önemli sinyalizasyon yollarının özel hedeflenmesi ile de hücre çoğalması engellenebilir. Bunlardan ilk akla gelen mihenk taşı reseptör ise tirozin kinazlardır. Çok çeşitli inhibitörlerin geliştirilmesi elbette etki ile birlikte yan etkiyi de yanında getirmektedir. [1]

Kardiyovasküler etkilerin spektrumu göz önüne alındığında, bunlar arasında bir ayırım yapılabilir. Birincil olarak kalp fonksiyonunu etkileyen ajanlar (örneğin antrasiklinler ve trastuzumab), vasküler fonksiyon (örn. 5-florourasil

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müdahalelere çok ihtiyatlı bir yaklaşımla bütünleştirici ve bireyselleştirilmiş olması gerekir.

Bu adımlar, kardiyotoksik ajanlarla tedavi edilen kanser hastalarında kardiyovasküler morbidite ve mortalite yükünü en aza indirmeyi ve böylece klinik sonuçlarını ve hayatta kalmayı iyileştirmeyi amaçlamaktadır. Bireysel olarak uygulanmaları gerekecek ve kardiyolojik alanı geliştirmeye devam ettikçe sürekli yeniden değerlendirmeye ihtiyaç duyacaktır. [66]

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