

Bölüm 9

TRİGEMİNAL NEVRALJİ

Şehnaz BAŞARAN¹

GİRİŞ

Trigeminal nevrалji, diğer adı *iletic douloureux*, trigeminal sinirin bir veya birden fazla duysal dalından kaynaklanan, genellikle tek taraflı, kısa süreli, tekrarlayıcı ve elektrik çarpmasına benzer bir karakteri olan kraniofasiyal ağrı sendromudur (1). Ağrıların şiddetli olmasının yanısıra hastalığın tanısında yaşanan güçlükler, bireylerin yaşam kalitesinde belirgin düşüklüğe sebep olabilmektedir (1, 2).

Ağrı sıklıkla trigeminal sinirin maksillar ve mandibular dalında izlenirken, oftalmik dalın tutulumu vakaların % 5' inde görülür (3). Tutulum genellikle unilaterale olup, yüzün sağ tarafı sola kıyasla daha sık etkilenir (4). Bilateral trigeminal nevrалji varlığında mutlaka multipl skleroz veya kafa içi yer kaplayıcı oluşumlar dışlanmalıdır (5, 6).

Epidemiyolojik çalışmalarda, trigeminal nevrалji insidansının yılda 12-29/100.000 olduğu bildirilmiştir (7). Kadınlarda erkeklere göre 3 kat daha sık görülmektedir. Özellikle orta yaşlı bireylerin hastalığı olup, prevalansıyaşla birlikte artış gösterir (8).

KLİNİK TANI

Trigeminal nevrалji tanısı, hastanın yakınmalarına yönelik klinik değerlendirme ile konulur. Uluslararası Başağrısı Derneğinin 2018 yılı *ICHD-3* sınıflamasına göre (9); trigeminal sinirin bir veya birkaç dalında daha önce radyoterapi uygulanmamış olması koşulu ile meydana gelen rekürren, tek taraflı yüz ağrısının aşağıda sıralanan üç maddeyi de karşılaması gerekir;

A. Ağrı atakları aşağıdaki özelliklerin tümüne sahip olmalıdır;

Atakların birkaç saniye-2 dakika arası sürmesi

Şiddetli olması

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