

Bölüm 17

PARKİNSON HASTALIĞINDA İLAÇ-İLAÇ ETKİLEŞİMLERİ

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GİRİŞ

İlaç-ilaç etkileşimleri (İİE), bir ilaçın birlikte uygulandığı diğer ilaçın etkilerini artırması, azaltması ve/veya değiştirmesi olarak tanımlanabilir⁽¹⁾. İİE, ilaçların etkililiklerini ve güvenilirliklerini değiştirebildiklerinden advers etkilerin sık ve önlenebilir nedenleri arasında yer alır^(2, 3). Farmakodinamik İİE, ilaçların farmakolojik aktivitelerini oluşturdukları reseptörler, biyolojik ya da fizyolojik olaylar düzeyinde gerçekleşir ve ilaçların etkilerinin artmasına ya da azalmasına neden olur⁽⁴⁾. Farmakokinetik İİE ise absorbsiyon, dağılım, metabolizma, ekskresyon adı verilen farmakokinetik olaylar sırasında görülür ve ilaçların serum konsantrasyonlarının değişmesi ile ilaç etkisinin azalması ya da toksik etkilerin artması ile sonuçlanabilir. Farmakokinetik İİE, farmakodinamik İİE'ne göre daha sık görülmektedir⁽⁴⁾.

Birçok kaynağına göre farklı sınıflandırılan İİE, Lexicomp® ilaç etkileşimleri veri tabanında 5 grupta incelenmektedir: X (kombinasyondan kaçın), D (tedaviyi modifiye et), C (tedaviyi izle), B (tedavinin değişmesine gerek yok), A (bilinen etkileşim yok)⁽⁵⁾. İİE ile ilgili bilgiler, klinisyenlerin receptelenmiş ilaçlar ile ilgili potansiyel riskleri tahmin etmelerini sağladığı için önemlidir⁽⁶⁾. İİE, bir ilaçın başka bir ilaçla birlikte verilmesi ile ilacın farmakolojik aktivitesinde bir değişikliğin meydana gelmesi sonucu etkinin artması, azalması veya istenmeyen klinik sonuçların ortaya çıkması gibi sonuçlar doğurıldığı gibi, diğer komorbid durumların kötüleşmesine veya tedavinin etkisizleşmesine de neden olabilir⁽⁷⁾. Örneğin; ayrı ayrı verilen iki ilaçın oluşturdukları yanıtların toplamı, aynı dozlarda birlikte verildiklerinde oluşan etkiye eşit ise aditif etkileşimden bahsedilir⁽⁸⁾. Birlikte verilen iki ilaçın etkisi, ayrı ayrı verilen aynı dozların oluşturduğu yanıtların toplamından daha büyük ise pozitif sinerjistik etkiden ve birlikte verilen iki ilaçın etkisi, ayrı ayrı verilen aynı dozların oluşturduğu yanıtların toplamından daha az ise negatif

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Bu kitap bölümünü oluştururken taradığımız ilaç veri tabanları ve detaylı literatür araştırmaları, PH'de çoklu ilaç kullanımına bağlı olarak görülen İİE konusunda yalnızca teorik değerlendirmelerin mevcut olduğunu, İİE'ne yönelik aydınlatıcı klinik verilerin eksik olduğunu göstermiştir. Bu bağlamda PH'de İİE ile ilgili daha fazla çalışma yapılmalı ve PH'de akılçılı ilaç kullanımına yönelik stratejiler daha açık ve yol gösterici bir şekilde literatürde yer almalıdır. PH hastalarında elektronik reçete oluşturularken İİE'ni sunabilecek yazılımlar geliştirilmesi, ilaç tedavilerinin optimizasyonu sağlayarak özellikle geriatrik PH hastalarında polifarmasiye bağlı İİE'ni azaltabilir⁽⁶²⁾.

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