

# BÖLÜM 24

## İLAÇLARIN VİTAMİNLERLE ETKİLEŞMESİ

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### GİRİŞ

Sağlık hizmetlerindeki ve teknolojideki gelişmeler sayesinde özellikle gelişmiş ülkelerde ortalama yaşam süresinin artması nedeniyle toplumdaki yaşlı nüfus oranı yükselmiştir. Avrupa'da 2010 yılında %25 olan 65 yaş üstü nüfus, 2016'da %29,6'ya yükselmiştir (1). Ortalama yaşın artması, multimorbid ve çoklu ilaç kullanan hasta sayısının artışına yol açmaktadır (2). Almanya'da 50 yaş üzerindekilerin değerlendirildiği bir kesitsel çalışma, osteoporozlu hastaların %95'inden fazlasında eşlik eden en az bir hastalık olduğunu göstermiştir (3). Çoklu hastalık, çoklu ilaç kullanımını gerektirir ve tedaviye eklenen her ilaç advers olay riskini daha da artırır (4).

İlaçların özellikle uzun süreli kullanımı vitamin ve mineral düzeylerini etkileyebildiği gibi, vitamin ve mineraller de ilaçların farmakokinetik ve farmakodinamik özelliklerini etkileyebilir. Reçeteli ve reçetesiz ilaçların uzun süreli kulanılmasına bağlı

olarak ortaya çıkan vitamin ve mineral eksiklikleri mevcut hastlığın tedavisini olumsuz yönde etkileyebilir ya da komplikasyonların çıkışmasına yol açabilir. Bu olumsuz etkilerin mevcut hastalığa veya yaşlanma sürecinin kendisine atfedilmesi eksikliğin tanısının gecikmesine ve klinik tablonun daha da kötüleşmesine neden olabilir (5,6).

İlaçların vitamin ve minerallerle etkileşmeleri kalp-damar hastalıkları, hipertansyon, diyabet, depresyon, astım ve KOAH gibi uzun süreli tedavi gerektiren durumlarda ciddi sorunlara yol açabilir. Vitamin eksikliği prevalansı yaşlanma ile birlikte artmaktadır. Bu hastalıkların çoğunlukla ileri yaşlarda görülmesi, yaşlı popülasyonda ilaç-vitamin etkileşmelerinin klinik açıdan daha önemli hale gelmesine neden olabilir.

Vitaminlerle etkileşen çok sayıda ilaç vardır. Ancak, kitabın bu bölümünde yaygın olarak kullanılan ilaçların vitaminler üzerindeki etkileri tartışılacaktır.

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mide-barsak kanalında dehidroaskorbik asidin C vitaminine oranını artırdığı gösterilmiştir.

Bu bulgulara karşın, omeprazol ile C vitamini etkileşmesinin klinik yansımaları net değildir.

## SONUÇ

Piyasada sürekli artan ilaç sayısı ve kullanım sıklığı göz önüne alındığında, hastaların sağlığına yönelik potansiyel vitamin/mineral eksikliği ya da fazlalığı riskini en aza indirmek için, hekimler ve eczacıların ilaçların vitamin/mineral etkileşmeleri konusunda dikkatli olmaları gereklidir. Özellikle yaşlı hastalar, çoklu ilaç kullananlar, kronik hastalığı olanlar ve ömür boyu ilaç kullanmak durumundaki hastalar ilaç etkileşmeleri yanında ilaç-vitamin ya da mineral ve bitkisel ürün takviyeleri konusunda yakından izlenmeli ve bilgilendirmelidirler.

Vitamin ve mineral durumlarını olumsuz etkileyebilecek yaygın olarak reçete edilen ilaçların kullanımı her geçen gün artmaktadır (172). Uzun süreli ilaç kullanımı gerektiren durumların artan prevalansı ve yetersiz beslenme göz önüne alındığında, potansiyel halk sağlığı etkileri daha büyütür. Yine dünyada olduğu gibi ülkemizde de multivitamin/mineral takviyesi kullanımının gittikçe artması etkileşmelerin klinik önemini artırabilir.

Yerimizin kısıtlı olması nedeniyle kitabımızın bu bölümünde yaygın olarak kullanılan ilaçların vitaminler üzerindeki etkilerini tartıştık. Bunların dışında minerallerle de etkileşmeler önemlidir. Ayrıca, vitamin/mineral takviyeleri yanında bitkisel ürünlerin de ilaçların farmakolojisi üzerinde etkileri olabilir.

Özetle, klinisyenlerin hastalarına ilaç reçete ederken, ilaç-ilaç etkileşmeleri yanında, olası ilaç-mikro besin etkileşmeleri konusunda dikkatli olmalarında yarar vardır.

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