

# BÖLÜM 9

## KOAH VE ASTIM YÖNETİMİNDE EGZERSİZ

Ateş ŞENDİL <sup>1</sup>  
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Kronik hava yolu hastalıkları artan mortalite ve morbidite oranıyla, yarattığı sosyo-ekonomik kayıplarla ve yaşam kalitesindeki bozulmalar ile ciddi bir halk sağlığı sorunu oluşturmaktadır. Dünya Sağlık Örgütü (DSÖ) raporlarına göre kronik hava yolu hastalıkları tüm dünyada mortalite nedenleri arasında dördüncü sırada yer almaktadır. Türkiye'deki mortalite nedenleri incelendiğinde ise solunum sistemi hastalıkları tüm ölümlerin yaklaşık %10'unu oluşturmakta; kardiyovasküler sistem hastalıkları ve malignitelerin ardından üçüncü sırada yer almaktadır. Kronik solunum sistemi hastalıklarından en sık karşılaştığımız iki hastalık astım ve kronik obstrüktif akciğer hastalığı (KOAH)'dır.

### KOAH

Kronik Obstrüktif Akciğer Hastalığı(KOAH); zararlı gaz ve partiküllerin hava yollarında ve akciğer parankiminde kronik iltihabi reaksiyonuyla oluşan genellikle ilerleyici hava yolu

kısıtlılığı ile karakterize dünya çapında yaygın bir akciğer hastalığıdır. Alevlenmeler ve komorbiditeler hastalığın şiddetine katkıda bulunur. Ekonomik ve sosyal yükü giderek artan KOAH 2030'da engel temelli yaşam yıllarının en önde gelen yedinci sebebiyken, ölümlerin en önde gelen dördüncü sebebi olacaktır.

KOAH'ın mortalite ve morbidite prevalansı, ülkelere, coğrafi bölgelere, yaşam tarzına, sosyokültürel yapıya, yaş ve cinsiyete göre farklılıklar gösterebilmektedir. Hastalığın tanımlanması ve tanısıyla farklı yöntemler kullanılması nedeniyle, prevalans, morbidite ve mortalitesiyle ilgili geçmişe ait sağlıklı veri pek yoktur. KOAH prevalansı %7,8-19,7'dir.

KOAH'ın ortaya çıkmasında yaş, cinsiyet, genetik faktörler, çevresel ve mesleki maruziyet gibi birçok faktör rol alırken en önemli risk faktörü sigara kullanımıdır.

Kronik ve progresif dispne, öksürük ve balgam üretimi gibi semptomlar, aktivite sınırlamasına ve nihayetinde KOAH hastalarının

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kez ortalama 30 dk zirve oksijen tüketiminin %50'sinde veya semptomların tolere edilebildiği düzeyde egzersiz yapmalıdır. ATS ise haftada 3-5 kez, %60-75 iş yükü düzeyinde, devamlı 20-30 dk ya da 2- 3 dk yüksek şiddetli egzersiz intervalleri önermektedir.

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