

## Bölüm 16

# ROMATOLOJİK HASTALIKLAR VE CİNSEL İŞLEV BOZUKLUKLARI

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### 1. GİRİŞ

Seksüel disfonksiyon (SD)' un hem fizyolojik hem de psikolojik nedenleri olup toplumda yaygın olarak görülebilmektedir. Romatolojik hastalıklar fiziksel ve psikolojik semptomlar aracılığıyla seksüel yaşam da dahil hayatın tüm yönlerini etkileyebilmektedir<sup>(1)</sup>. Romatolojik hastalıklarda hastalar arasında SD yüksek prevalansa sahiptir. Kronik hastalıkların seksüel fonksiyonlara etkisi sıklıkla multifaktöriyel dir. Ayrıca kullanılan tedaviyle de ilgilidir. Bu faktörler arasında ağrı, yorgunluk, fonksiyonel bozukluk, depresyon, anksiyete, negatif vücut görüntüsü algısı, azalmış libido, hormonal dengesizlik ve ilaç tedavisi yer almaktadır.

Kronik hastalıklarda seksüel bozukluklar sıktır ve hastalığın süresiyle de yakından ilişkilidir. Romatolojik hastalıklarda ilişki sıklığı, seksüel istek, uyarılma, orgazm ve cinsel tatmin etkilenebilmektedir. Kadınlarda vajinal lubrikasyon, erkeklerde de erektil fonksiyon ile ratrograde ejakülasyon ve anejakülasyon gibi seksüel fonksiyonlar etkilenebilmektedir <sup>(2-4)</sup>.

### 2. ROMATOİD ARTRİT

Romatoid artrit (RA) kronik sinovyal inflamasyon sonucunda ilerleyici eklem destrüksiyonuna neden olan kronik inflamatuvar otoimmün bir hastalıktır. İlerleyen süreçte sakatlığa yol açabilmesinin yanı sıra hastaların hayatını sosyal, ekonomik, psikolojik ve seksüel yönden etkilemektedir <sup>(5)</sup>. RA' de seksüel problemlerin oranı çeşitli çalışmalarda % 31-76 arasında değişmektedir <sup>(6)</sup>. RA' da seksüel problemler; seksüel yetersizlik nedeniyle cinsel ilişki gerçekleştirmede zorluk ile arzu ve tatmindeki azalmayla birlikte olan cinsel isteksizlik nedeniyle gerçekleştiği düşünülmektedir. Ayrıca kalça ve diz mobilitesindeki yetersizlik, sekonder sjögren sendromu gelişmesi sonrası vajinal kuruluk nedeniyle dispareni, seksüel ilişki sırasında eklem ağrıları ve yorgunluk seksüel yetersizliğin nedenleri arasında sayılabilmektedir<sup>(7-9)</sup>.

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## **KAYNAKLAR**

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