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GİRİŞ

Serebrovasküler hastalık TUİK 2018 verilerine göre ülkemizde en sık ölüm nedenleri olan dolaşım sistemi hastalıkları arasında en sık 2. nedenidir. Özellikle yaşlı popülasyonda ölüm ve sakatlanması sık bir nedenidir. Bu bölümde serebrovasküler hastalıktan korunmada diyetin önemi ve dikkat edilmesi gereken noktalar vurgulanacaktır.

Diyet; prospektif bir çalışmada modifiye edilebilir 10 strok risk faktöründen biridir (1). 55 yaş üzerinde diyet ve stroke ilişkisinin daha da güçlü olduğu bulunmuştur (1).

Diyet Paternleri

Akdeniz ve 'Hipertansiyon Durdurmak için Diyet Yaklaşımları' olarak çevrilebilen DASH (Dietary Approaches to Stop Hypertension) diyetleri en iyi çalışılmış diyet paternleridir. Geleneksel Akdeniz diyetinde yüksek miktarda zeytinyağı, fındık-fıstık, sebze ve tahıl; orta miktarda balık ve beyaz et ve düşük miktarda süt ve süt ürünleri, kırmızı ve işlenmiş etler ve tatlilar ve ılımlı şarap tüketilir (2). Böyle bir diyet lif, vitaminler, mineraler ve doymamış yağ asitlerinden zengindir ve sodyum ile doymuş/trans yağ asitleri içerir (2). 13 gözlemsel çalışmanın meta analizinin ve bir randomize kontrollü çalışmanın sonu-

cu Akdeniz diyetine yüksek oranda uyulduğunda strok riskinde yaklaşık %30 oranında düşüş olduğunu göstermiştir (3). Bu meta analiz PRE-DIMED (Prevención con Dieta Mediterránea) çalışmasının da sonuçlarını içermektedir. Bu çalışmaya yüksek kardiyovasküler risk taşıyan 7447 İspanyol erişkin katılmıştır (2). Çalışmada katılımcılar 3 tip diyet için rastgele dağıtılmıştır: 1. grupta sızma zeytinyağı ile desteklenen Akdeniz diyeti, 2. grupta ceviz, badem ve fındık gibi kuru-yemişlerce desteklenen Akdeniz diyeti, 3. grupta kontrol diyeti (düşük yağlı diyet önerilmiş) bulunmaktadır. Ortalama 4.8 yıl gözlem sonrasında yapılan analizlerde Akdeniz diyeti gruplarındaki katılımcılarda strok riski kontrol grubundakilere kıyasla anlamlı olarak düşük saptanmıştır (2).

DASH diyeti meyve, sebze ve az yağlı süt ürünlerinden zengin ve yağıdan fakirdir (4). Prospektif çalışmalar DASH diyetiyle strok riski arasında istatistiksel ters bir ilişki göstermiştir (3,5).

Alkol

Alkol almamak ya da çok az miktarda alkol almakla kıyaslandığında orta düzeyde alkol alımı (günde 10-30g alkol) iskemik stroktan koruyucu olabilir; buna karşın ağır alkol alımı zararlıdır (6). Semptomsuz Koreli 994 erişkin hasta üzerinde yapılan bir çalışmada, hafif düzeyde alkol alım öyküsü sessiz serebral enfarkt açısından düşük

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