

Bölüm 38

OSTEOARTRİTTE BESLENME

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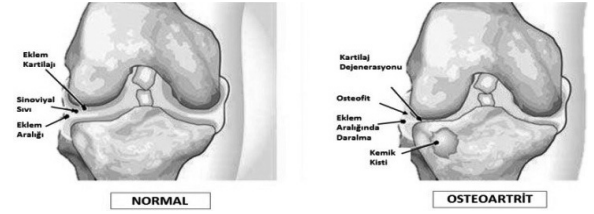
GİRİŞ

Osteoartrit eklem kıkırdağı ve kemiğin bütünlüğünde bozulmaya neden olan kronik dejeneratif ve inflamatuvar komponentli eklem hastalığıdır. Eklem kıkırdağında erozyon, eklem kenarlarında kemik hipertrofi (osteofit), subkondral skleroz, sinoviyal membran ve eklem kapsülünde biyokimyasal ve morfolojik değişiklikler ile karakterizedir (1,2). Eklem kıkırdağının matriksinde başlar, kondrosit yapısının bozulması ile sürer, progresif doku harabiyeti ile sonuçlanır.

Dizabilitenin en sık nedenlerinden biridir, başta yük taşıyan kalça ve diz gibi eklemlerde daha sık görülür. İleri yaşla beraber sıklığı artmaktadır. Tüm dünyada 60 yaş üzeri bireylerde kadınlarda %18, erkeklerde %9,6 oranında semptomatik osteoartrit bulguları mevcuttur. Bu hastaların %25'nin günlük yaşam aktivitelerini gerçekleştiremediği saptanmıştır (3). 50 yaş üzeri en önemli özürüllük nedenlerinden biridir. 55 yaş üzeri bireylerin %80'inde şikayet olmasa bile radyolojik bulgular görülmektedir (4).

Osteoartritte en sık görülen semptom ağrıdır. Ağrı tipik olarak istirahatle azalan karakterdedir. Eklemde tutukluk, şişlik, krepitasyon, instabilite, eklemde kısıtlılık, fonksiyon kaybı eşlik eden diğer semptomlardır. Diz, kalça, el, omuz, vertebra, ayak-ayak bileği en sık etkilenen bölgelerdir.

Osteoartrit risk faktörleri arasında yaş, cinsiyet, genetik faktörler, travma, hipermobilite sendromlarının yanısıra obezite, fiziksel aktivite yetersizliği ve diyet de yer almaktadır.



Şekil 1. Normal eklem ve osteoartritli eklem

OSTEOARTRİT PATOGENEZİ

Osteoartritte patoloji multifaktöriyel olup, sonucunda sinoviyal inflamasyon, eklem kartilajında kayıp ve subkondral kemikte remodelling görülür (5).

Osteoartritte ilk bulgular eklem kıkırdağında başlar. Eklemle beraber kemik, ligament, kapsül, sinovyum ve kas dokuları da etkilenir (6). Eklem kıkırdağının yapısı ekstraselüler matriks ve matriks sentezinden sorumlu kondrositlerden oluşur. Ekstraselüler matriksin %65-80'i sudan geri kalanı kollajen, proteoglikan, lipid, fosfolipid, protein ve glikoproteinlerden oluşur. Tip II kollajen eklem kıkırdağının temel kollajenidir; VI, IX,

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beslenmedir. Haftada 1 ya da 2 porsiyon balık yağı tüketimi, zeytin ve zeytinyağından zengin besleme antioksidan mekanizmalar üzerinden etki ederek eklem ve kemik yapısını korur. Antioksidan vitaminler, özellikle D vitaminin yeterli alımı osteoartrit riskini azaltır. Osteoartritte beslenme tipi, hastanın yaşına, egzersiz kapasitesine, ek hastalıklarına, besin takviyesi alıp almadığına bakılarak kişiye özel planlanmalıdır.

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