



BÖLÜM 16

Duygudurum Dengeleyici İlaçlar

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GİRİŞ

Bipolar bozuklukta (BB) duygudurum dalgalanmalarının kronik ve tekrarlayan doğası göz önüne alındığında, altın standart tedavi, akut veya uzun süreli dönemde duygudurum dengeleyici ajanların kullanımınıdır(1). “Duygudurum dengeleyici” teriminin yaygın olarak kullanılmasına rağmen, anlamı ve özellikleri konusunda ortak bir tanımlama eksikliği vardır. Bu durumun ABD Gıda ve İlaç İdaresisinin (FDA) duygudurum dengeleyici terimini resmi olarak tanımlanmamasıyla ilişkisi bulunmaktadır ve araştırmacılar henüz standart bir tanıma atıfta bulunamamaktadırlar. Duygudurum dengeleyicilerin kavramsallaştırılmasına ilişkin literatürde önemli farklılıklar mevcuttur. Bazı yazarlar, duygudurum dengeleyici etkileri olan bir ajanın, bipolar bozuklukta herhangi bir epizodun sıklığını ve şiddetini azaltmada etkili olması gerektiğini öne sürmüştür(2). Öte yandan bazı yazarlar, duygudurum dengeleyici kavramının geçerliliği için bipolar bozukluğun hem manik hem de depresif semptomlarının tedavisinde etkili olması gerektiğini bildirmişler(3). Daha katı tanımlar da önerilmiş olmasına rağmen, duygudurum dengeleyici bir ajandan klinik geçerliliği için bipolar bozukluğun tüm evrelerinde afektif,

psikotik, davranışsal ve bilişsel alanlara etki edebiliyor olması beklenebilir. Ayrıca bu ajanlar, mani ve depresyonu tedavi etmeli, tekrarları önlemeli, iyi tolere edilmeli ve nihayetinde hastaların yaşam kalitesini iyileştirmelidir(4). Duygudurum dengeleyici ilaçların etki mekanizması henüz tam olarak aydınlatılamamıştır. Antipsikotikler dahil çeşitli ajanların duygudurum dengeleyici olarak kullanımları olsa da şu anda duygudurum dengeleyiciler; lityum, valproik asit, karbamazepin ve lamotrijini içerir.

Duygudurum Dengeleyici Ajanların FDA Onaylı Endikasyonları(5):

- Lityum, akut manik ataklar için monoterapi veya kombinasyon tedavisi ve idame tedavi için onaylanmıştır.
- Valproik asit, akut manik ataklar için monoterapi veya kombinasyon tedavisi için onaylanmıştır.
- Karbamazepin, bipolar bozuklukta akut manik ve karma dönemler için monoterapi ve kombinasyon tedavisi için onaya sahiptir.
- Lamotrijin bipolar bozuklukta idame tedavi için onaylanmıştır.

Duygudurum Dengeleyici Ajanların FDA Onaylı Olmayan Endikasyonları(5)

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Lamotrijinle en sık görülen yan etkileri baş ağrısı, mide bulantısı, enfeksiyon, baş dönmesi, ciltte kızarıklık, somnolans ve ağrıdır(110). Kalp hastalığı olan hastalarda, lamotrijin artmış aritmi riski ile ilişkili olabilir(112). Lamotrijinin sistemik yan etkileri arasında döküntü ve mide bulantısı bulunur. İlk bir ila iki aylık tedavi sırasında hastaların yüzde 10'una kadar iyi huylu bir döküntü gelişebilir ve ilacın kesilmesini gerektirir. Daha önce başka bir anti-epileptik ilaçla döküntüsü olan hastalarda lamotrijin ile döküntü yaşama olasılığı daha yüksektir(113–115). Stevens-Johnson sendromu (toksik epidermal nekroliz) veya anjiyo ödem gibi yaşamı tehdit eden bir döküntü geliştirme riski yaklaşık 1000 yetişkinde 1'dir; çocuklarda bu risk daha fazladır(115).

Lamotrijin ile bipolar bozukluk idame tedavisi, plaseboya kıyasla nüks riskini azaltmaktadır. Özellikle depresyonu geciktirmede veya önlemede, karma özelliklere sahip mani veya duygudurum ataklarından daha etkili görülmektedir(116). Ayrıca lamotrijinin etkinliği, lityumunkile karşılaştırılabilir görünmektedir ve tolere edilebilirlik lamotrijin ile lityumdan daha iyidir(117).

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