

NECROBIOSIS LIPOIDICA (L92.1)

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REMEMBER

- ▶ Necrobiosis lipoidica (NL) is a rare idiopathic granulomatous collagen degeneration disease with a risk of ulceration.
- ▶ NL most commonly occurs between the ages of 30-40, but the age of onset can be affected by many factors. Therefore, it can be seen at any age, including at birth.
- ▶ The exact etiology of the disease is still unknown; diabetes mellitus has been held responsible for the development of the disease for many years. Various studies have shown that the prevalence of diabetes at the time of diagnosis of NL is somewhere between 30-60%.
- ▶ The pathogenesis of NL is uncertain, but several theories have been reported. These can be listed as microangiopathic changes, neutrophil migration disorders, immune complex deposition leading to collagen degeneration, and collagen production abnormalities.
- ▶ According to the small-centered studies published in the literature, it has been reported that the disease is more common in women. However, the possibility of ulceration is higher in men, and the disease tends to be more severe.
- ▶ Although NL can occur in healthy individuals without any underlying disease, the most commonly associated conditions are inflammatory diseases such as ulcerative colitis, Crohn's Disease, sarcoidosis, rheumatoid arthritis, and thyroid disorders.

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CONSULT

Infectious Diseases

- ▶ NL poses a risk for secondary infections when ulcerated. Wound swabs should be taken from the patients and consulted with an infectious diseases' specialist.

Internal Medicine / Endocrine and Metabolic Diseases

- ▶ NL patients may have type I or type II diabetes mellitus. Patients' blood glucose levels, HbA1c values, and insulin parameters should be evaluated. Regulation of blood glucose levels of patients is effective in the improvement of NL lesions.
- ▶ Autoimmune thyroid diseases (Hashimoto and Graves' Diseases) may accompany NL. Patients can be screened in this respect.
- ▶ In addition, arterial hypertension, dyslipidemia, and metabolic syndrome were found at an increased frequency in individuals with NL compared to the normal population. Thus, patients should be evaluated by an internist.

Rheumatology

- ▶ It has been reported in the literature that there is a relationship between rheumatoid arthritis, and NL. Patients with arthralgia and/or arthritis should be consulted with a rheumatologist.

Pulmonary Medicine

- ▶ It has been reported that NL may occur in the course of sarcoidosis, but it is rare. In the presence of dry cough, dyspnea and/or other symptoms suggestive of sarcoidosis, it is appropriate to seek advice from a pulmonologist.

Gastroenterology

- ▶ Although rare, inflammatory bowel diseases such as Crohn's Disease, and ulcerative colitis can be detected in individuals with NL. In the presence of symptoms/doubt, patients should be consulted with a gastroenterologist.

Nutrition and Dietetics

- ▶ Appropriate diet, and exercise programs should be recommended for NL patients with diabetes, and metabolic syndrome.

Psychiatry

- ▶ The disease can cause body image disorder, and decrease in self-confidence. In addition, a decrease in the quality of life of the patients may also be detected. For these reasons, patients can be evaluated psychiatrically.

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NEKROBİYOZİS LİPOİDİKA (L92.1)

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HATIRLA

- ▶ Nekrobiyozis lipoidika (NL), ülserasyon riski olan ve nadir görülen idiyopatik granümatöz kollajen dejenerasyon hastalığıdır.
- ▶ NL en sık 30-40 yaş arasında ortaya çıkar ancak başlangıç yaşı birçok faktörden etkilenebilir. Bu nedenle doğum da dahil olmak üzere herhangi bir yaşta görülebilir.
- ▶ Kesin etyolojisi hala net olarak bilinmemektedir, çok uzun yıllar boyunca hastalık gelişiminden diyabetes mellitus sorumlu tutulmuştur. Çeşitli çalışmalar NL tanısı esnasında diyabet prevalansının %30-%60 olduğunu göstermiştir.
- ▶ NL'nin patogenezi kesin değildir ancak birkaç teori üzerinde durulmuştur. Bunlar mikroangi-yopatik değişiklikler, nötrofil göçü ile ilgili sorunlar, kollajen dejenerasyonuna yol açan immün kompleks birikimi ve kollajen üretim anormallikleri olarak sıralanabilir.
- ▶ Literatürde yayınlanan küçük merkezli çalışmalarda göre hastalığın kadınlarda daha sık izlendiği bildirilmiştir. Ancak, erkeklerde ise ülserasyon olasılığı daha yüksektir ve hastalık daha şiddetli seyretmeye meyillidir.

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DANIŞ

Enfeksiyon Hastalıkları

- NL, ülsere olduğunda sekonder enfeksiyonlar için risk teşkil eder. Hastalardan yara sü-rüntüleri alınmalı ve enfeksiyon hastalıkları uzmanı ile konsülte edilmelidir.

İç Hastalıkları/Endokrin ve Metabolizma Hastalıkları

- NL hastaları tip I veya tip II diyabetes mel-litusa sahip olabilir. Hastaların kan glukoz düzeyleri, HbA1c değerleri ve insulin parametreleri değerlendirilmelidir. Hastaların kan glukoz seviyelerinin regülasyonu NL lezyonlarının düzelmesinde etkilidir.
- NL'ye otoimmün tiroit hastalıkları (Hashimoto ve Graves Hastalıkları) eşlik edebilir. Hastalar bu açıdan taranabilir.
- Ayrıca NL'li bireylerde arteryel hipertan-siyon, dislipidemi ve metabolik sendrom normal popülasyona göre artmış sıklıkta bulunmuştur. Hastalar tüm bu sayılan nedenlerden dolayı dahiliye uzmanı tarafından değerlendirilmelidir.

Romatoloji

- Literatürde romatoid artrit ve NL arasında ilişki olduğu bildirilmiştir. Artralji ve/veya artrit izlenen hastalar romatoloji uzmanına danışılmalıdır.

Göğüs Hastalıkları

- NL'nin sarkoidoz seyrinde ortaya çıkabi-leceği bildirilmiştir ancak nadirdir. Kuru öksürük, dispne ve/veya sarkoidozu düşün-dürecek diğer semptomlar varlığında göğüs hastalıkları uzmanından görüş almak uygundur.

Gastroenteroloji

- Nadiren de olsa Crohn Hastalığı ve ülseratif kolit gibi inflamatuvar bağırsak hastalıkları NL'li bireylerde saptanabilir. Semptom/şüphne varlığında hastalar gastroenteroloji uzmanına danışılmalıdır.

Beslenme ve Diyetetik

- Diyabet ve metabolik sendroma sahip NL'li hastalara uygun diyet ve egzersiz program-ları önerilmelidir.

Psikiyatri

- Hastalık beden algı bozukluğu ve özgüven-de düşmeye neden olabilir. Ayrıca hastaların yaşam kalitelerinde düşme de saptanabilir. Hastalar bu nedenlerle psikiyatrik açıdan değerlendirilebilir.

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