

BÖLÜM 7

PRIAPİZM

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TANIM

Priapizm, seksüel uyarı sonrasında devam eden ya da seksüel uyarıdan bağımsız olarak meydana gelen penisin 4 saatten uzun süren ereksiyon halidir.⁽¹⁾ Nadir görülen bir patoloji olup genel popülasyonda yıllık insidansı 100000'de 0,5-0,9 olarak raporlanmıştır.⁽²⁾ Yendioğan dönemi dahil her yaşta görülmekle beraber, erişkinlerde 20 ile 50 yaş arasında çocuklarda ise 5 ile 10 yaş arasında daha sık görülmektedir.⁽³⁾

SINIFLANDIRMA

Priapizim, her birinin kendine ait patofizyoloji ve tedavisi olan üç farklı tipe ayrılır; iskemik (veno-oklüsif, düşük akımlı), non-iskemik (arteriyel, yüksek akımlı), stuttering (tekrarlayan, kekeme). İskemik priapizm en sık görülen priapizm şekli olup, tüm olguların %95'inden fazlasını oluşturmaktadır.^(4,5)

İSKEMİK PRIAPİZM

İskemik priapizm aslında bir kompartman sendromudur. Patolojik venooklüzyona ek olarak kavernoza arteriyel akım ya hiç yoktur ya da ileri derecede azalmıştır.⁽⁵⁾ İskemik priapizm gerçek bir ürolojik acil olup zamanında tedavi edilmezse mutlaka erektil disfonksiyonla sonuçlanır.^(6,7) Hastalığın prognozunu gösteren en önemli faktör semptomların süresidir. Priapizm süresi uzadıkça kavernöz cisimlerde hipoksi, hiperkapni ve asidoza bağlı olarak ultrastrüktüel değişiklikler olur.⁽⁸⁾ Tedavi edilmediği takdirde, 12. saatte kavernöz cisimlerde interstisyel ödem; 24. saatte sinüzoid endoteli hasarı ve trombosit adezyonu; 48. saatten sonra ise sinüzoidal boşluklarda trombüslerin biriktiği ve düz kas hücrelerinde nekroz-fibrosis olduğu korporal biyopsilerde gösterilmiştir.⁽⁷⁾

Etiyolojik olarak değerlendirildiğinde, çocuklarda en sık neden olarak hücreli anemi (%63) iken,⁽⁹⁾ erişkinlerde ise idiyopattir.^(5,10) Erişkinlerde bilinen en sık neden farmakolojik ajanlar (%25) olup, bunların da içinde en yaygın olan intra-

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