



BÖLÜM 17

BAĞ DOKUSU HASTALIKLARI

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GİRİŞ

Demyelizan hastalık kitabımızın bağ dokusu hastalıkları bölümü bu kısımda açıklanmıştır. Hastalıkların kısaca patogenezi, klinik seyirleri ve tanı kriterleri açıklandıktan sonra nörolojik tutulumları ve merkezi sinir sistemine olan etkileri tartışılmıştır. Nörojenik sistemi en çok tutan bağ dokusu hastalıkları olan Behçet hastalığı, sistemik lupus eritematozus (SLE), Sjögren hastalığı ve sistemik sklerozis ön planda olacak şekilde konular ele alınmıştır.

BEHÇET HASTALIĞI VE NÖROBEHÇET

Kronik tekrarlayan ve skar bırakmayan aftöz ülserler ve skar bırakabilen genital ülserlerin beraberliği ile seyreden mukokutanöz bir hastalıktır. Prof. Dr. Hulusi Behçet tarafından tanımlanmıştır (1). İlk tanımlandığı dönemlerde enfeksiyöz bir sürecin hastalığa sebep olabileceği düşünülmüştür. Behçet hastalığı, genetik olarak duyarlı bireylerde enfeksiyöz ya da nedeni bilinmeyen tetikleyicilerle ortaya çıkan vasküler, inflamatuvar, tekrarlayıcı multifaktöryel bir hastalıktır ve hala nedeni tam olarak belirlenememiştir. Klinik olarak mukokutanöz tutulumun dışında, sıklıkla eklem, sinir sistemi, solunum sistemi ve gastrointestinal sistem tutulumu gözlenmektedir (2,3). Hastalığın dağılımına bakıldığında en çok Türkiye, İran, Irak başta olmak üzere Akdeniz ve Ortadoğu ile Uzak Doğu ülkelerinin daha fazla etkilendiği gözlemlenebilir. Türkiye’de yapılan daha önceki prevalans çalışmalarında 20-400/100,000 arasında değişen yaygınlık gözlenirken, bu oran

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larının nörojenik tutulum davranışının tam olarak bilinebilmesiyle ayırıcı tanı doğru yapılabilir. Yukarıda bahsedilmeyen diğer bağ dokusu hastalıkları, daha nadir nörojenik tutulum yapmaktadır. Bu nedenle kitabın konusu dahilinde değerlendirilmemiştir.

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