

ENDOKRİN HASTALIKLARIN NÖROLOJİK BULGULARI

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GİRİŞ

Endokrin sistemi oluşturan ve vücudumuzda sayısız önemli olayı kontrol eden hipotalamus, hipofiz, tiroid, paratiroid, pankreas ve adrenal bezlerin yapısal ya da fonksiyonel sorunları ile ortaya çıkan pek çok endokrin hastalıklarda nörolojik bulgular görülebilmektedir. Endokrinolojik hastalıklarda mikrosefali, baş ağrısı, bilişsel bozukluklar, koma, ensefalopati, fokal nörolojik belirtiler, zihinsel gerilik, pitozis, konvülsiyon, myopati, nöropati gibi çok geniş nörolojik bulgular ortaya çıkabilmektedir. Bu yazımızda endokrin hastalıklardaki nörolojik bulgular sistematik bir şekilde ana hatları ile bahsedilecektir.

Hipotalamohipofizer hastalıklarda nörolojik bulgular

Hipotalamusun hastalığı hipofiz disfonksiyonu, nöropsikiyatrik ve davranışsal bozukluklar, otonomik ve metabolik regülasyonda bozulmalara neden olabilir. Hipotalamik hastalığın etiyolojisi yaşa göre değişmektedir. Etiyolojik nedenler: intraventriküler hemoraji, bakteriyel ve tüberküloz menenjit, travma, hidrosefali,

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de; aşil refleksi azalır yada alınmaz, hafif tipte distal güçsüzlük ve vibrasyon duyu kaybı vardır. EMG'de hem akson kaybı hem de demyelinizasyon izlenir.⁴⁷ Diyabetik nöropati için hastaların taranmasında diyabetin başlangıç yaşı önemlidir. Diyabet prepubertal başlangıçlı ise 5 yıl sonrasında, pubertal başlangıçlı ise 2 yıl sonra tüm hastaların nöropati taramasının yapılması önerilir.⁵ Diyabetin uzun dönem nörolojik bulgularının tedavisinde kan şekeri kontrolü, aldoz redüktaz inhibitörleri, alfa-lipoik asit, antidepressanlar (amitriptilin, imipramin, SSRI) ve nöropatik ağrı için antikonvülzan kullanımımızdır (lorazepam, valproat, gabapentin, karbamazepin, pregabalın, fenitoin, tiagabin ve topiramet).⁴⁴

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