

BÖLÜM 21



Kronik Karaciğer Hastalığında Atriyal Fibrilasyon Yönetimi

Halil YILMAZ¹

GİRİŞ

Atriyal fibrilasyon (AF), 2010 yılında küresel olarak tahminen 33,5 milyon AF'li birey ile dünya çapında en yaygın aritmidir (1). Birçok kişi asemptomatik veya teşhis edilmemiş olduğundan AF'nin gerçek prevalansı muhtemelen çok daha yüksektir. AF için ileri yaş, alkol, sigara, obezite, diyabetes mellitus, hipertansiyon, kalp yetmezliği, iskemik kalp hastalığı ve kalp kapak hastalığı gibi çok sayıda risk faktörü olmasına rağmen, AF riskiyle ilgili hala yanıtlanmamış birçok soru vardır. Kardiyovasküler risk faktörlerinin önlenmesi ve yapısal kalp hastalığının tedavisi, AF'den kaynaklanan morbidite ve mortaliteyi azaltmaya yardımcı olabilir (2).

Kronik karaciğer hastalığı(KKH), trombosit sayısı, trombosit agregasyonu, pıhtılaşma faktörleri, doğal inhibitörler ve fibrinolizin değiştirilmiş regülasyonu nedeniyle kanamanın yanı sıra tromboza da eğilimlidir (3,4). Karaciğer yetmezliğinin şiddeti genellikle Child-Pugh (CP) sınıflandırmasına göre belirlenir ve Sınıf A, B, C sırasıyla hafif, orta ve şiddetli karaciğer

yetmezliğini temsil eder (5). Pıhtılaşma faktörlerinin azalması genellikle karaciğer yetmezliğinin ciddiyeti ile ilişkilidir (6). AF hastalarında KKH sıktır, çünkü hem AF Hemde KKH ortak risk faktörleri vardır. Karaciğer hastalığı, AF için risk sınıflandırma şemalarının çoğunda herhangi bir noktayı hesaba katmasa da, karaciğer sirozu varlığının artan iskemik inme riski ile ilişkili olduğu bulundu (7-11).

AF'li hastalarda gastrointestinal ve karaciğer hastalıkları yaygındır. Karaciğer ve gastrointestinal sistem hastalıkları, otonomik modülasyon ve inflamasyon dahil olmak üzere çeşitli mekanizmalar yoluyla AF riskine katkıda bulunabilir. Tersine, AF ve AF'nin ablasyon, antiaritmik ilaçlar ve antikoagülanlarla tedavisi gastrointestinal ve karaciğer komplikasyonlarının ve hastalıklarının gelişimini etkileyebilir.

AF'NİN PATOFİZYOLOJİSİ

AF patogenezinin iki önemli hipotezi, duyarlı bir atriyal substrat üzerindeki ektopik tetiklemelerin veya hızlı tetiklenen iletilerin yüksek

¹ Uzm. Dr., Denizli Devlet Hastanesi, İç Hastalıkları ve Gastroenteroloji Kliniği, drhalil48@gmail.com

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