

## BÖLÜM 3



# KARDİYOEMBOLİK İNME TEDAVİSİNDE YENİ ORAL ANTİKOAGÜLANLARIN KULLANIMI

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## GİRİŞ

Atrial fibrilasyon (AF), genel populasyonda % 2 oranında görülürken yaşla birlikte prevalansı artar ve 80 yaş üzerindeki populasyonda % 10-12 arasında görülen en sık ritim bozukluğudur. Küresel hastalık yüküne göre AF' nin tahmini prevalansı 33, 5 milyon kişidir. AF tüm kardiyak aritmilerin yarısından sorumludur. Göründüğü üzere dünya genelinde bu durumdan muzdarip olan insan sayısının fazla olması bu alanda çok sayıda çalışma yapılmasını ve yeni tedavi seçeneklerinin ortaya çıkışmasını sağlamıştır (1).

AF, sol atriumda staz yaparak burada trombus oluşumunu kolaylaştırır ve sistemik tromboemboli riskini arttırır. En sık emboli beyine olur. AF iskemik inme riskini yaklaşık 5 kat arttırır. Bu hastalarda inme riskini azaltmak için profilaktik tedavide daha önce antiagregan ve antikoagulan ilaçların kullanıldığı bilinmektedir (2).

Yapılan bir çalışmada (ACTİVE W) yüksek inme riski olan AF hastalarından bir kısmına oral antikoagulan (OAK) (n:3371) verilirken diğer kısmına da aspirin artı klopidogrel (n:3335) verilerek yakın takibe alınmış. Yıllık inme riski OAK alan grupta % 3,93 iken ikili antiagregan alan grupta % 5.9 olarak belirlenmiş. Ayrıca bu çalışma ile AF hastalarında oral antikoagülasyon tedavisinin antiag-

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## Kardiyoembolik İnme Tedavisinde Yeni Oral Antikoagüllerin Kullanımı

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