

BÖLÜM 20

İnfertilite Tedavilerinde Akupunktur Kullanımı

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GİRİŞ

Üreme çağındaki çiftlerin tahminen %8 ila 12'si dünya çapında infertiliteden muzdariptir (1) ve kadın infertilite insidans oranı %15 olarak rapor edilmiştir (2), bu da onu kanser ve kardiyovasküler hastalıklardan sonra üçüncü hastalık yapmaktadır.

Ayrıca kadın infertilitesi kadının psikolojisini olumsuz etkilemeye ve aile içi uyumun bozulmasına neden olmaktadır. Kadın infertilitesi insidansının her yıl artmasıyla birlikte acil çözümü gereken sorunlardan biri haline gelmiş ve araştırmacıların yaygın endişesini uyandırmıştır. İnfertilite, 12 aylık düzenli korunmasız cinsel ilişkiden sonra klinik gebelik oluşmaması durumdur (3). Yapay kontrasepsiyon dışında birçok faktör, davranış ve patoloji gebelik sürecini engelleyebilir ve infertiliteye yol açabilir (4). Ayrıca, artan yaşı da fertiliteye olumsuz katkıda bulunan önemli faktörlerden biri olarak kabul edilmiştir (5). Genç kadınlar arasında kadın infertilitesi insidansının oranı son yıllarda artmıştır (6). Sağlıksız yaşam tarzları ve çevresel faktörler nedeniyle, kadın infertilitesinde prematür yumurtalık yetmezliği

(POI), polikistik over sendromu (PKOS), kronik endometrit (CE) ve endometriyal polipler gibi üreme ve endokrin hastalıklarının insidansı giderek artmaktadır (7). Hepsi farklı mekanizmalarla gebeliğin olmasını engeller ve olumsuz gebelik sonuçlarına yol açar. Son zamanlarda kadın infertilite vakalarındaki artış, artifisyal inseminasyon (AI), tüp bebek-embriyo transferi (IVF-ET) ve intrasitoplazmik sperm enjeksiyonu (ICSI) gibi yardımcı üreme teknolojilerinin geliştirilmesini ve uygulanmasını da teşvik etmiştir. Bununla birlikte, AI ve ET teknolojisinin mevcut başarı oranının sırasıyla %15 (8, 9) ve %30 ila 40 (10) olduğu bildirilmektedir. Bu nedenle, yardımcı üreme teknolojisinin başarı oranını daha da artırmak, güncel araştırmaların da odak noktasıdır. Tamamlayıcı ve alternatif tip (TAT) ve yardımcı üreme teknolojisinin birlikte uygulanması, klinik gebelik oranını iyileştirmek için bir çözüm olabilir.

Akupunktur binlerce yıldır var olan ve klinik pratikte yaygın olarak kullanılan alternatif bir yardımcı tedavi yöntemidir. Akupunkturun terapötik etkisini destekleyen pek çok araştırma kanıtı vardır (11). Geleneksel akupunktur, belirli

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olmak üzere klinik heterojenliğe bağlı olduğunu düşündürüyoruz. Akupunkturun uygulanması kolay olmasına rağmen, etkinliği açı, derinlik, tek seferlik süre, optimal akupunktur süresi, akupunkturun tedavi süreci, farklı akupunktur noktalarında farklı akupunktur manipülasyonları ve hastaların bireysel yanıtlarındaki farklılıklar tarafından belirlenir. Bu kontrol değişkenlerindeki farklılıklar, klinik çalışmalar arasında heterojenliğe yol açar ve tutarsız araştırma sonuçlarının ana nedenidir, ancak akupunkturun etkinliği göz ardı edilemez.

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