

Bölüm 4

SEPSİSTE MEDIATÖRLER ve ÖNEMİ

Harun YILDIZ¹
Berzan EKMEN²
Makbule Beyza ŞEN³

1. GİRİŞ

Sepsis vücudun enfeksiyona karşı verdiği cevaptır ve önemli bir mortalite ve morbidite nedenidir. Hastanede ölüm nedenlerinde ilk sıralarda yer almakta ve ülkeler için ciddi bir maliyete neden olmaktadır. Amerika'da yılda ortalama 750 000 sepsis vakası görülmektedir ve yılda ortalama 215 000 ölüm (tüm ölümlerin %9.3'ü) sepsisten kaynaklanmaktadır. Bu da yılda 16 milyar doları aşan bir maliyete neden olmaktadır (1).

Sepsis tanımları 2016 yılına kadar sistemik enflamatuvar yanıt sendromu (SIRS) kriterlerine dayanıyordu. SIRS vücudun enfeksiyon ve/veya enfeksiyon dışı etkenlere vücudun verdiği enflamatuvar yanıtı denilmektedir (2).

Eski tanımlamalarda SIRS kriterlerine ilaveten enfeksiyon şüphesi de varsa sepsis denilmekteydi. Bu klinik tabloya organ disfonksiyonu ve sıvı resüsitasyonuna cevap veren hipotansiyon varsa şiddetli sepsis, eğer sıvı resüsitasyonu yetmiyor , inotrop ihtiyacı varsa septik şok denilmekteydi (3).

Sistemik enflamatuvar cevap sendromu (SIRS) (1): Ateş $>38^{\circ}\text{C}$ ya da $<36^{\circ}\text{C}$

Kalp atım hızı $>90/\text{dk}$

Solunum sayısı $>20/\text{dk}$ ya da arteriyal $\text{CO}_2 < 32 \text{ mmHg}$ Lökosit sayısı $>12.000/\text{mm}^3$ ya da $<4.000/\text{mm}^3$

¹ Dr., Ankara Etlik Şehir Hastanesi, dr.harunyildiz@yahoo.com, ORCID iD: 0000-0002-1918-2575

² Öğr. Gör., Lokman Hekim Üniversitesi, Sağlık Hizmetleri Meslek Yüksekokulu,
ORCID iD: 0000-0001-6260-6196

³ Arş. Gör., Lokman Hekim Üniversitesi, Eczacılık Fakültesi, Biyokimya AD,
ORCID iD: 0000-0003-4015-5595

ve eksojen vazopressörlere karşı vazomotor yanıtın belirlenmesinde önemli bir rol oynadığı görülmektedir. Ayrıca NO, miyokard fonksiyonunu derinden etkiler ve muhtemelen miyokard depresan maddesi olarak görev yapan son araçtır. NO'nun septik hastada kardiyovasküler fonksiyondaki bu merkezi rolünün tanınması, NO konsantrasyonunu değiştirme girişimlerini teşvik etmiştir (49).

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