

Bölüm 10

HİPERTANSİYON VE GÖZ HASTALIKLARI

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GİRİŞ

Hipertansiyona bağlı göz dibi mikrovasküler değişiklikleri ilk olarak 19. yüzyıl sonunda Markus Gunn tarafından renal ve serebrovasküler hastalığı olan bireylerde tanımlanmıştır. Bu değişikliklerin prognostik değeri 1930'ların sonlarında Keith, Wagener-Barker tarafından belgelenmiştir. O zamandan beri oftalmoloğun fundus bulguları hipertansiyonun hem şiddetini hem de prognozunu belirlemek için sistemik muayenenin parçası olarak kabul görmektedir (1).

Amerikan Kardiyoloji Derneği/Amerika Kalp Birliği (ACC/AHA) tarafından Kasım 2017'de yayınlanan yeni kılavuz yetişkinlerde normal kan basıncının (KB) 120/80 mmHg'den düşük olması gerektiğini belirtmektedir (2). Hipertansiyonun eşik değerleri erişkin grupta aşağı çekilmiş ve optimal koşullar altında iki farklı günde yapılan ölçümlerde KB 130/80 mmHg'ye eşit veya daha yüksek olan bireylerde yaşam tarzı değişiklikleri ve ilaç tedavisi önerilmektedir. 'Evre 1' hipertansiyon, KB'nin sistolik 130–139 mmHg veya diyastolik 80–89 mmHg arasında olması olarak tanımlanmaktadır. 'Evre 2' hipertansiyon, KB'nin sistolik en az 140 mmHg veya diyastolik en az 90 mmHg olması anlamına gelmektedir (2).

Tıbbi tedavisindeki önemli ilerlemelere rağmen hipertansiyon dünya genelinde yaklaşık 1,39 milyar kişiyi etkilemekte ve yılda 10 milyondan fazla bireyin ölümden sorumlu tutulmaktadır (3). Hipertansiyon vasküler endotel hasarı, küçük ve büyük arterlerin yeniden şekillenmesi ve vasküler yoğunlukta azalma gibi mikro ve makro düzeyde istenmeyen etkiler yaparak çeşitli organlarda hasara neden olur. Hedef organ hasarı (TOD; Target Organ Damage) olarak tanımlanan bu durumlar, iskemik ve hemorajik inme, koroner kalp hastalığı ve miyokard enfarktüsü, proteinüri ve böbrek yetmezliği, retinopati ve aterosklerotik değişikliklerin hepsini kapsar ve güncel kaynaklarda hipertansiyon

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değerlendirmelerinde büyük bir görev üstlenmektedir. Oküler etkilerinin tanınması hipertansiyonun tedavi yönetiminde hekimlere yardımcı olabilir. Hastaların göz ve genel sağlıkları için uygun tedaviyi almalarını sağlamada, oftalmologlar ve ilgili branş hekimleri arasında yakın iş birliği gereklidir.

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