

BÖLÜM 11

Febril Kanser Hastasında Ampirik Antibiyotik Tedavisi

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GİRİŞ

Kanser hastalarında mortalite ve morbiditenin ana nedenlerinden biri enfeksiyondur. Hematolojik malignitelerin yanı sıra solid organ tümörlü hastalarda yaklaşık %50'sinde mortalitenin birincil veya ilişkili nedenin bir enfeksiyona sekonder geliştiği tahmin edilmektedir(1). Kanser hastaları uzun süreli kullandıkları immunsupresif ajanlar, tekrarlayan nötropenileri nedeniyle tüm enfeksiyöz etkenlere açıktır(2). Solid organ tümörlü hastalar, hematolojik maligniteye sahip hastalara göre daha az enfeksiyon riskine sahiptir. Nedensel olarak incelendiğinde, kullanılan standart kemoterapiler uzun süreli ve derin nötropeni gelişmesine daha az oranda sebep olabilmektedir. Akciğer küçük hücreli karsinomu, bazı sarkomlar ve genç erkeklerde görülen testis tümörlerine uygulanan kemoterapi ajanları bu gruba dahil edilmediğinde yaklaşık 1 hafta-10 günü bulan nötropeniler yaratmaktadırlar (3). Hastanın sistemik tedavisinin yanı sıra enfeksiyon yönetimine hakim olmak, uygun bir antibiyotik planı hem mortalite, hem morbiditeyi azaltmaya yönelik doğru bir adım olacaktır.

İmmun sistemi baskılanmış hasta grubunda potansiyel enfeksiyon patojenlerinin grubu daha geniştir, doğru tanıyla tedaviye ilerlemek enfeksiyonun ilerlemesi hızlıca olacağı için daha önemlidir(4). Bu nedenle hastanın başvuru halinde riskini belirlemek, buna yönelik ihtimal dahilindeki patojenleri kapsayabilecek doğru ampirik antibiyotik tedavi planı; hayati öneme sahiptir.

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