3. BÖLÜM

Ürolojide En Sık Kullanılan Antibiyotikler

Emre ŞAM[1]

Son birkaç dekatta, dünya genelinde antibiyotik direnci korkutucu oranda arttı. Antibiyotik direncinin artmasına katkı sağlayan en önemli faktör antibiyotiklerin aşırı kullanımıdır (1). Akut bakım hastanelerinde reçete edilen antibiyotiklerin %20-50'si gereksiz veya uygunsuzdur. Dahası dirençli mikroorganizmalar ile enfeksiyon, daha yüksek mortalite ve morbidite, daha pahalı ikinci basamak ilaçlara ihtiyaç duyulması ve tedavi başarısızlığı sebebiyle daha uzun hastanede kalış süreleri ile ilişkilidir. Sonuç olarak antimikrobiyal direnç hem toplum sağlığı hem de ekonomisi üzerine olumsuz etkiye sahiptir (2). Artan antibiyotik direnci üroloji pratiğini de önemli ölçüde etkilemektedir. Ürolojik prosedürler öncesi profilaksiyi (özellikle transrektal ultrason yardımlı prostat biopsisi), ürolojik prosedürler sonrası enfeksiyöz komplikasyonların yönetimini ve hem toplumda hem de sağlık bakımı ile ilgili durumlarda en sık görülen enfeksiyonlardan biri olan üriner sistem enfeksiyonunun ampirik tedavisi için uygun antibiyotik seçimini zorlaştırmaktadır (3,4). Çalışmalar, ülkemizde ve dünyada üriner sistem enfeksiyonunun en sık sebebi olan Escherichia coli'nin yıllar içerisinde birçok antibiyotiğe direncinin önemli ölçüde arttığını göstermektedir (5,6). Direnç gelişimini önlemek veya en azından geciktirmek için klinisyenlerin doğru zamanda doğru antibiyotik kullanması önem arz etmektedir. Dünya çapında hastanelerde antimikrobiyal ilaç kullanımının kalitesini iyileştirmek için çeşitli Antimikrobial

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Normal böbrek fonksiyonu olan hastalarda, nitrofurantoinin küçük bir kısmı metabolizma ve safra atılımı ile elimine edilir. Bu yüzden, karaciğer yetmezliği olan hastalarda doz ayarlamasına gerek yoktur (77). Artmış birikim ve toksisite riski nedeniyle, kreatinin klirensi 60 ml/dak'dan az olan hastalarda kullanımı kontrendikedir (34).

Yan Etkiler

Akut ve kronik pulmoner reaksiyonlar (uzun süre kullanım ile ilişkili), gastrointestinal yan etkiler (bulantı ve kusma), döküntü, akut ve kronik hepatit (uzun süre kullanım ile ilişkili), hemolitik anemi (glukoz 6 fosfat dehidrogenaz eksikliği ile ilişkili), periferal sensörimotor nöropati (özellikle böbrek yetmezliği olanlarda) nitrofurantoinin başlıca yan etkilerindendir (77).

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