

ANTİDİYABETİK İLAÇLAR, TİROİD İLAÇLARI VE KOLŞİSİN ZEHİRLENMELERİ

Salih KOCAOĞLU¹

1. Giriş

Diyabet tüm dünyada ve ülkemizde sık görülen hastalıkların başında gelmektedir. Haliyle antidiyabetik ilaçların kullanımı da yaygın olarak artmıştır. İnsülin bağımlı olmayan diyabette (Tip 2 Diyabet) temel sorun insüline olan direncin artmasıdır ve bu hastalarda öglisemiye sağlamak için öncelikle oral antidiyabetikler tercih edilir. İnsülin bağımlı diyabette (Tip 1 Diyabet) ise sorun daha çok insülin sekresyonundadır ve bu hastalarda normal insülin düzeyini sağlamak için dışarıdan insülin kullanımı gereklidir. Diyabet tedavisinde kullanılan ilaçlar iki ana grupta toplanabilir; hipoglisemik ilaçlar (insülin, sülfonilüre, meglitinid) ve antihiperglisemik ilaçlar (biguanid, α -glukozidaz inhibitörü, glitazon) (1). Tip 1 ve Tip 2 diyabette bu ilaçlar tek başlarına kullanılabilmesi gibi hastanın durumuna göre hekim tarafından birden fazla ilaç kombinasyonu da tercih edilebilir. Antihiperglisemik ilaç grubunun tek başına kullanımı genelde hipoglisemiye neden olmaz. Hipoglisemi ve kan glukoz regülasyonunun bozukluğu ile ilgili durumlar acil servislerde çok sık karşılaştığımız vakalardır. Acil servise hipoglisemi semptomlarıyla başvuran diyabet hastalarında sebep genellikle yüksek insülin dozu, yetersiz beslenme, ilaç etkileşimi veya uzamış ilaç etkileridir. Ancak suicid amaçlı yüksek dozda alınan insülinlerin ve oral antidiyabetiklerin de benzer tabloya neden olabileceği unutulmamalıdır (2).

¹ Dr. Öğr. Üyesi Salih KOCAOĞLU, Balıkesir Üniversitesi Tıp Fakültesi Sağlık Uygulama ve Araştırma Hastanesi Acil Tıp AD. salihkocaoglu1986@gmail.com

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