

STREPTOKOK İLE İLİŞKİLİ PEDIATRİK OTOİMMÜN NÖROPSİKİYATRİK BOZUKLUKLAR (PANDAS)

50.

BÖLÜM

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GİRİŞ

Çocuklarda ani başlangıç gösteren yeni nöropsikiyatrik semptomlar, aile ve çocuklar kadar hekimler için de zorlayıcıdır. Klinisyenin düşünmesi gereken geniş bir ayırıcı tanı listesi ve tanılayıcı testler bulunmaktadır ki doğru tedavi buna göre şekillenecektir. PANDAS (Pediatric autoimmune neuropsychiatric disorders associated with Streptococci), PANS (Pediatric acute-onset neuropsychiatric syndrome) ve CANS (Childhood acute neuropsychiatric symptoms) tanımlamaları da görece yeni tanımlar olarak ani başlangıçlı nöropsikiyatrik semptomlar için araştırmacıların dikkatini çekmektedir. Bu bölümde PANDAS'tan bahsedilecektir.

TARİHÇE VE TANIM

Tıbbi literatürde, enfeksiyöz hastalıklar ile davranışsal değişiklikler arasındaki ilişkiyi tanımlayan yayımlar çok uzun zamandır bulunmaktadır (1). Sydenham koresi (SK), post-enfeksiyöz, immün aracılı patofizyolojilerin prototipi olarak kabul edilir. 1686 yılında Thomas Sydenham tarafından istemsiz, hiperkinetik hareketler olarak romatizmal ateşin majör nörolojik görünümü şeklinde tanımlanmıştır (2). Sir William Osler ise 1894 yılında -sonradan diğer çalışmalarda da doğrulanacak biçimde- Sydenham koreli hastalarda obsesif kompulsif davranışlar tanımlamış ve 1920 yılında da Dr. Laurence Selling, üç olguda sinüzit sonrasında gelişen tikleri yayımlamıştır (3,4). Kiessling

ise pediatrik A grubu beta hemolitik streptokok (AGBHS) salgını ile artan tikler arasındaki ilişkiyi yayımlamıştır (5). 1998 yılında da Dr. Susan Swedo ve arkadaşları Sydenham koresindeki obsesif kompulsif bozukluk (OKB) belirtili çocukları araştırırken, Sydenham koresi tanısını karşılamayan ancak enfeksiyon sonrası yeni başlangıçlı OKB belirtileri ve/veya tik bozukluğu gösteren çocuklarla karşılaşmıştır. Elli vaka üzerinden yayımladıkları makale ile Sydenham koresinin gelişimine benzer şekilde geliştiklerine inandıkları bir klinik tabloyu, “streptokok ile ilişkili pediatrik otoimmün nöropsikiyatrik bozukluklar (PANDAS)” terimini gündeme getirmişlerdir (6). Bu tanım, çocukluk döneminde geçirilen AGBHS enfeksiyonları ile tetiklenen ani başlangıçlı tik bozukluğu ve/veya OKB gibi nöropsikiyatrik bozukluk geliştiren olguları ifade etmektedir (7). Her ne kadar bu klinik tabloyu destekleyen kanıtlar literatürde görülse de birçok aksi kanıt da tanıyla ilgili bilimsel şüpheler uyandırmaktadır (1,8). Zamanla bu tanımlama genişletilerek, pediatrik akut başlangıçlı nöropsikiyatrik sendrom (PANS) olarak ifade edilen, ani başlangıçlı OKB ve anoreksiya başta olmak üzere geniş semptom yelpazesi gösteren nöropsikiyatrik tablo tanımlanmıştır (8,9). PANDAS/PANS gibi tanımlamaların yapılmasının altında yatan en önemli etken, bu rahatsızlıkların, tipik gelişen OKB ve tik bozukluklarındaki genetik ya da çevresel etkenler ile değil inflamatuvar veya otoimmün etiyoloji ile ilişkili görülmesidir (9).

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