

PEDİATRİK AKUT BAŞLANGIÇLI NÖROPSİKİYATRİK SENDROM

51.

BÖLÜM

Orçun DEMİR¹

GİRİŞ

Pediatric akut başlangıçlı nöropsikiyatrik sendrom (PANS, Pediatric Acute-onset Neuropsychiatric Syndrome), obsesif kompulsif bozukluk (OKB) semptomları, ağır düzeyde yeme kısıtlamalarının görülmesi ve en az iki kognitif, davranışsal semptom veya nörolojik bulgunun aynı anda ortaya çıkması ile tanımlanmış nadir bir klinik tablodur (1). PANS kriterleri oldukça geniş bir nöropsikiyatrik spektruma yayılmıştır. Bu hâliyle PANS'ın çeşitli hastalık mekanizmalarından kaynaklandığı, psikolojik travmanın yanı sıra altta yatan nörolojik, endokrin ve metabolik hastalıklardan streptokok enfeksiyonları ile ilişkili pediatrik otoimmün nöropsikiyatrik sendrom (PANDAS, Pediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal infection), serebral vaskülit, nöropsikiyatrik lupus gibi post-infeksiyöz otoimmün ve nöroinflamatuvar hastalıklara kadar birçok etiyolojiye sahip olduğu düşünülmektedir (1,2). PANS tanılı hastalarla yapılan birçok kohort çalışması olguların %70'ten fazla oranda post-infeksiyöz otoimmün veya nöroinflamatuvar etiyolojiye sahip olduğunu göstermiştir (3,4).

TARİHÇE

1980'lerde Ulusal Sağlık Enstitüleri'ndeki araştırmacılar (NIH), tipik olarak Streptococcus pyogenes, varicella ve Mycoplasma pneumoniae gibi çeşitli mikroorganizma enfeksiyonlarını takiben psikiyatrik bulguları aniden başlayan OKB tanılı çocukların farklı bir alt küme olduğunu belirt-

mişlerdir. Bu alt küme pediatrik enfeksiyonun tetiklediği otoimmün nöropsikiyatrik bozukluklar (PITANDS) olarak adlandırılmıştır (5). Araştırmacılar, akut başlangıçlı OKB ve Sydenham koresinin (SK) prodromal dönemi arasında paralellikler saptandığı için A grubu streptokok (GAS) enfeksiyonlarının tetiklediği alt gruba odaklanmayı seçmişler ve bu alt kümeyi streptokok enfeksiyonu ile ilişkili pediatrik otoimmün nöropsikiyatrik bozukluklar (PANDAS) olarak adlandırmışlardır (6-8). PANDAS, prepubertal dönemde GAS enfeksiyonu ile ilişkili tik veya OKB semptomları ve spesifik nöropsikiyatrik semptomların akut başlangıcı ile tanımlanmıştır (9). GAS enfeksiyonlarının, semptomların başlangıcı ve alevlenmesiyle ilişkili olması gerekliliği; ilkökul çağındaki çocuklarda GAS enfeksiyonlarının prevalansı ve romatojenik GAS organizmalarının asemptomatik doğası nedeniyle tanılama aşamasında zorluk yaşanmasına neden olmaktadır (10). Bu durum hem yanlış tanı koymaya hem PANDAS tanısının atlanmasına neden olmuştur (11).

Başlangıç kriterlerini çevreleyen karmaşanın bir sonucu olarak, sonraki çalışmalar PANDAS için kriterleri karşılamayan gençleri içermiş ve çelişkili bulgular rapor ederek PANDAS'ı gidecek daha tartışmalı bir teşhis hâline getirmiştir. PANDAS kriterlerinin, araştırma çalışmalarında etiyolojik olarak homojen bir hasta grubunu tanımlamak için geliştirilmiş olması ve GAS enfeksiyonları tarafından tetiklenmeyen akut başlangıç vakalarını hariç tutması GAS dışı ajanlar tarafından tetiklenen akut başlangıçlı OKB tanılı çocuk-

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