

DUYGUDURUM DÜZENLEYİCİLERİ

102.

BÖLÜM

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GİRİŞ

Duygudurum düzenleyicileri (DDD)'nin bipolar bozukluğun belirlenmiş dört bölümünden (mani, depresyon, maninin önlenmesi ve depresyonun önlenmesi) hepsini ya da herhangi bir bölümünü tedavi edebilen ilaçlar olduğu öne sürülebilir (1).

Bipolar bozukluğun çocukta ve ergenlerde tedavisiyle ilgili kanıtlar sınırlıdır ve genel olarak sanki küçük yetişkinlermiş gibi erişkin literatüründeki kanıtların adaptasyonu ile tedavi edilirler (2). Tablo 1'de Amerikan Gıda ve İlaç Dairesi (FDA) tarafından çocuklarda ve ergenlerde bipolar bozukluk tedavisinde kullanımı onaylanan ilaçlar verilmiştir.

LİTYUM

Lityum, doğada kolaylıkla ulaşılabilen en hafif metal olup sıklıkla ilaç endüstrisinde LiCO_3 şeklinde bileşikleri kullanılmaktadır. Bipolar bozukluğu

manik epizodunda faydalı olduğu 1949'da Avusturyalı psikiyatrist Cade tarafından kanıtlanmış (4), 1970'lerde bipolar bozukluk tedavisi için yetişkin hastalarda FDA onayı verilmiştir. Lityum, erişkinde, bipolar bozukluğun manik epizodu kadar sürdürüm tedavisinde de yaygın olarak kullanılmaktadır (5). Depresif epizotlarda etkinliğinin daha az olduğu öne sürülmekle birlikte, unipolar depresyonda antidepresanlar için güçlendirme tedavisi olarak da tercih edilmektedir (1) ve intihar riskini azalttığı düşünülmektedir. Ancak bu kullanımları için resmen onaylanmamıştır. Lityumun ayrıca nörodejeneratif değişimleri hafiflettiği ve demansa karşı önleyici olabileceği düşünülmektedir (4).

Çocuk ve ergen bipolar hastalarda, akut mani ve sürdürüm tedavisinde tek FDA onayı bulunan DDD'dir. Bipolar bozukluğu olan çocuklarla ve ergenlerle yapılan çalışmalarda, psikotik özellikler yoksa veya madde kullanımı eşlik ediyorsa Lit-

Tablo 1. Çocukta ve Ergende Bipolar Bozukluk Tedavisinde FDA Onayı Alan İlaçlar (2 ve 3)

İlaç	Bipolar Bozukluğun epizodu	Yaş	Günlük doz mg/gün
Lityum	Karma/manik/sürdürüm	12-17	900-1200
Risperidon	Karma/manik	10-17	0.5-6
Olanzapin	Karma/manik	13-17	5-20
Aripiprazol	Karma/manik	10-17	10-30
Asenapin	Karma/manik	10-17	5-10
Ketiapin	Karma/manik	10-17	400-600
Olanzapin/fluoksetin kombinasyonu	Depresif epizod	10-17	3/25-12/50
Lurasidon	Depresif epizod	10-17	20-80

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yarlı sodyum kanal blokeri olan riluzol ile bipolar depresyon, tedaviye dirençli unipolar depresyon ve anksiyete tedavisinde umut verici sonuçlar bildirilmiştir ancak yüksek maliyeti ve sık görülen hepatotoksik yan etkileri kullanımını sınırlamaktadır (1).

Antihipertansif ve antiaritmik olarak işlev gören kalsiyum kanal blokerleri vasküler düz kaslar üzerindeki L tipi kanallar üzerine etki gösterirken, nöronlar üzerine yerleşik L tipi kanalların işlevi tartışmalıdır. Bir L tipi kalsiyum kanal blokeri olan dihidropiridin ile ilgili bipolar bozuklukta faydalı olduğuna dair anektodal kanıtlar sunulmuştur (1).

Bunun dışında kolinerjik sistem (fizostigmin, donepezil, skopolamin), melatonerjik sistem (ramelton, agomelatin), glukokortikoid sistem (mifepriston, ketokonazol, metirapon), immünolojik ve inflamatuvar sistem (selekoksib), pürinerjik sistem (allopurinol) yeni ilaç arayışları için uygun hedefler olabilirler (59).

İnozitol ve L-metilfolat (MTHF)

Bipolar bozukluk ve tedaviye dirençli bipolar depresyonda atipik antipsikotik veya DDD'ye eklenerek güçlendirilmesi önerilebilir (1).

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