Bölüm 20

ENDOKRİN BOZUKLUKLAR VE KARDİYOVASKÜLER HASTALIKLAR

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Kardiyovasküler hastalıklar tüm dünyada mortalite ve morbiditenin en önemli sebebidir. Bu hastalıklar ekonomik yük oluşturmakta olup önümüzdeki yıllarda daha da artması beklenmektedir [1]. Endokrin sistem vücutta çok çeşitli etkilere sahip olan bezlerden oluşan kompleks bir sistemdir. Endokrin sistemin,kardiyovasküler sistemi modüle eden birçok etkiye sahip olduğu kanıtlanmıştır. Bununla birlikte hormonların artması veya azalması kardiyovasküler hastalıkların patogenezinde önemli bir rol oynamaktadır[2].Biz de bu bölümde endokrin bozukluklar ve kardiyovasküler hastalıklar arasındaki ilişkilerden bahsedeceğiz.

HİPOFİZ BEZİ

Hipofiz bezi 2 ayrı anatomik kısımdan oluşur. Ön hipofiz;6 farklı hücre tipinden meydana gelmiştir ;bu hücre tiplerinden insan büyüme hormonu (hGH) salgılayan somatotropik hücreler, adrenokortikotropik hormon (ACTH) salgılayan kortikotropik hücreler kardiyak hastalığa sebep olabilirler. Arka hipofiz ya da nörohipofiz olarak adlandırılan bölümden ise vazopressin (ADH) ve oksitosin salgılanır.

Büyüme Hormonu (GH)

Erişkinlerde epifizlerin kapanmasından önce aşırı büyüme hormonu salgılanması gigantizme sebep olurken, epifizlerin kapanmasından sonra aşırı salgılanması akromegaliyle sonuçlanır. Büyüme hormonu etkilerini 2 şekilde gösterir. Birinci etkisi; hedef hücreler üzerindeki özgün GH reseptörlerine bağlanması ile oluşur. Bu reseptörler iskelet kası, kalp kası, yağ doku, böbrek, karaciğer ve fetal dönemde birçok dokuda tespit edilmiştir. İkincisi ise İGF-1(insülin benzeri büyüme faktörü) sentezini arttırmasıdır. Bu protein esas olarak karaciğerde üretilir ancak diğer hücreler de GH etkisi altında İGF-1'i üretebilir.

Akromegalinin Kardiyovasküler Belirtileri

Akromegali ve gigantizm, kardiyovasküler hastalıklarla belirgin mortalite ve morbidite ile ilişkilidir. Tedavi edilmemiş GH yüksekliği olan hastaların %20

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