

7. BÖLÜM

İLAÇLARA BAĞLI ÜVEİTLER

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Göz, kan-retina bariyeri sayesinde sistemik ilaçların potansiyel toksik etkilerinden korunmaktadır. Bu mekanizmaya rağmen, birçok ilaç olumsuz oküler etkilere neden olabilmektedir. Son dekatlarda güçlü yeni ilaç sınıflarının geliştirilmesi, tıbbın çeşitli alanlarında terapötik seçeneklerde önemli ilerlemelere neden olmuştur. Bu ilaçların bazıları bağışıklık sistemini hedeflediğinden, birçoğunun üveit ve retinopati gelişimine neden olabilmektedir.

İlaça bağlı üveit, üveitin nadir fakat önemli bir nedenidir. İlaça bağlı üveit prevalansı son derece düşüktür (%0.5) ve mevcut veriler sınırlıdır. Bu durum, vakaların eksik bildirilmesinden kaynaklanıyor olabilir. Sistemik, topikal veya intravitreal yolla uygulanan ve aşular da dahil olmak üzere çeşitli ilaçlar, üveitin bir nedeni olarak gözlenmektedir. Klinik ön, orta, arka veya pan üveit şeklinde olabilir. Episklerit, sklerit ve orbitit de bildirilmiştir. Üveite neden olan ajanın ilaç olarak tanımlanması çok önemlidir, çünkü çoğu kez ilacın kesilmesi veya bununla birlikte kortikosteroidlerin kullanılması üveitin iyileşmesine neden olabilir.

İLAÇLARA BAĞLI ÜVEİT PATOGENEZİ

İlaça bağlı üveitin kesin etiyolojisi büyük ölçüde bilinmemektedir; bununla birlikte, doğrudan veya dolaylı çeşitli mekanizmalar önerilmiştir.

Direkt Mekanizma

Doğrudan mekanizma, ilacın göz içi dokuya doğrudan erişimi olduğu zamandır. Bu, topikal, intravitreal veya intrakameral uygulama şeklinde olabilir. İlaç metabolitinin veya kendisinin doğrudan toksik etkisine bağlı olabilir. Bu durum, kan retina bariyerinde bozulmaya yol açarak oküler inflamasyona neden olur.

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