



10. Bölüm

COVID-19 ve Gastrointestinal Sistem

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GİRİŞ

Şiddetli akut solunum sendromu-koronavirüs-2 (SARS-CoV-2) viral membran glikoproteinleri büyük çıkıntılar oluşturarak tipik bir taç gibi görüldüğü için “Corona” adını almıştır. Koronavirüs hastalığına neden olan SARS-CoV-2 bulaşıcı bir pnömoni ile kendini gösteren küresel bir pandemidir. SARS-CoV-2 virüsü, sindirim sistemi dahil olmak üzere ana organları etkileyen ciddi sistemik viral enfeksiyondur (1).

Hastalar öncelikle ateş, öksürük ve nefes darlığı ile başvursa da, bazı hastalarda gastrointestinal (Gİ) ve hepatik belirtiler de gelişir. Bildirilen en yaygın Gİ semptomları ishal, bulantı, kusma ve abdominal rahatsızlıktır. Karaciğer anormallikleri yaygındır ve aspartat transferaz, alanin transferaz ve toplam bilirubin yükselmesini içerir. Araştırmalar, SARS-CoV-2 için hedef giriş reseptörü olduğuna inanılan ACE2 (anjiyotensin converting enzim II), gastrik, duodenal ve rektal epitelyumda bolca eksprese edilir, böylece ACE2’nin olası fekal-oral bulaşma için bir araç olarak rol oynar(2). Viral RNA, COVID-19 hastalarının dışkı örneklerinden de izole edilmiştir, bu da damlacık geçişine ek olarak fekal-oral bulaşma endişesini artırmıştır. Dolaylı kanıtlar, SARS-CoV-2’nin olası fekal-oral bulaşma olduğunu öne sürse de, fekal- oral geçiş yolunun rolünü belirlemek için daha fazla çaba gereklidir. Ayrıca, ACE2 reseptörleri, hepatik kolanjiyositler ve hepatositlerde eksprese edilebilir. Böylelikle de enfeksiyon direkt hepatositlere yayılabilir. COVID-19 için Gİ (gastrointestinal) dışı semptomlar arasında ateş, öksürük, ne-

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SONUÇ

Koronavirüs hastalığına (COVID-19) neden olan şiddetli akut solunum sendromu-koronavirüs-2 (SARS-CoV-2), bulaşıcı bir zatürree ile kendini gösteren küresel bir pandemidir. Hastalar öncelikle ateş, öksürük ve nefes darlığı ile başvursa da, bazı hastalarda Gİ ve hepatik belirtiler de gelişir. Bildirilen en yaygın Gİ semptomları ishal, bulantı, kusma ve abdominal rahatsızlıktır. Karaciğer anormallikleri yaygındır ve aspartat transferaz, alanin transferaz ve toplam bilirubin yükselmesini içerir. Viral RNA, COVID-19 hastalarının dışkı örneklerinden de izole edilmiştir, bu da damlacık geçişine ek olarak fekal-oral bulaşma endişesini artırmıştır. Dolaylı kanıtlar, SARS-CoV-2'nin olası fekal-oral bulaşma olduğunu öne sürse de, fekal- oral geçiş yolunun rolünü belirlemek için daha fazla çaba gereklidir. Daha fazla araştırma, kronik karaciğer hastalığı ve inflamatuvar bağırsak hastalığı gibi altta yatan Gİ hastalıkları olan hastalar ve COVID-19'un ciddiyeti arasındaki ilişkiyi aydınlatmaya yardımcı olacaktır. Gelecekteki çalışmalar, SARS-CoV-2 enfeksiyonunun Gİ rolünü daha iyi anlamamıza yardımcı olacaktır.

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