



21. Bölüm

COVID-19 ve Enfeksiyon Hastalıkları

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GİRİŞ

Koronavirüsler, *Nidovirales* grubu altında *Coronaviridae* ailesine ait olup, dört ana cinse (α , β , γ ve δ) ayrılır. *Coronavirüs* (CoV) ailesinin, β -koronavirüslere ait yedinci yeni üyesi akut solunum sendromu koronavirüsü 2 (SARS-CoV-2) olarak adlandırılmaktadır. SARS-CoV-2'ye ait ilk salgın Çin'in Wuhan kentinde gelişti. SARS-CoV-2'nin erken enfekte olmuş hastalarının çoğunun Wuhan'daki Huanan Güney Deniz Ürünleri Pazarı'nın sık ziyaretçileri olduğu tespit edilmiştir (1-3). Dolayısıyla, ilişkili hastalığın zoonotik bir hastalık olduğu varsayılmıştır. Altı eski koronavirüsten dört türü (229E, OC43, NL63 ve HKU1) hafif patojeniken, diğer iki tür şiddetli akut solunum sendromu (SARS)-CoV ve orta doğu solunum sendromu (MERS)-CoV bağışıklık sistemi zayıflamış kişilere karşı oldukça patojeniktir. Kasım 2002'den Ağustos 2003'e 8422 SARS-CoV enfekte vaka tespit edilirken, 916 kişide vefat etmiştir. MERS-CoV'a bağlı ise Nisan 2012'den Aralık 2012'ye kadar 2496 doğrulanmış vaka ve 868 (% 34.77) vefat bildirilmiştir (1). Dünya Sağlık Örgütü (DSÖ), 11 Şubat 2020'de SARS-CoV-2 ve beraberindeki hastalığı koronavirüs hastalığı 2019 (COVID-19) olarak adlandırdı (4). DSÖ, bulaşmanın yayılmasını azaltmaya yönelik uluslararası çabaları koordine etmeye yardımcı olmak amacıyla 11 Mart 2020 COVID-19'u bir pandemi olarak tanımladı (5). Dünya çapında, 16 Mayıs 2021 itibari 225 ülkeden 3.364.178 ölüm dahil olmak üzere 162.177.376 doğrulanmış COVID-19 vakası bildirildi (<https://COVID19.who.int/>).

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Tablo 2 COVID-19 Bağlı Semptomlar Ve Sıklığı (44,54,58,62,64)

Semptom	Tüm olgular	Hafif Olgu	Kritik Olgu
Ateş	%43.8-98.6	%43-98	%48-100
Öksürük	%59-79	%59-8-82	%58.3-85
Balgam	%23-33.7	%21-33.4	%22.2-38
Boğaz Ağrısı	%7-17.4	%14-28.4	%13.3-33.3
Nefes Darlığı	%7-55	%15.1-37	%37.6-92
Hemoptizi	%0.9-5	%0.6-4	960.3-8
Baş ağrısı	%6.5-13.6	%5.9-13.4	%0-15
Halsizlik	%7-69.6	%21-65.7	%28-80.6
İştahsızlık	%39.9	%30.4	%66.7
Diyeare	%3.8-10.1	%3.5-7.8	%0-16.7
Bulantı-Kusma	%5-4-10.1	%3-7.8	%6-16.7
Döküntü	%11.5	%10.8	%15
Miyalji / Artralji	%14.9-44	%14.5-39	%15-54
Konjunktival konjesyon	%0.8	%0.5	%2.3

Koagülopati ve trombositopeni, COVID-19 enfeksiyonu için kanama ve tromboz riskini arttıran yaygın komplikasyonlardır. Bazı vakalarda peteşiyal veya purpurik döküntü, melena, hematüri görülebilir. Persistan hipoksemi, göğüs ağrısı, pre-senkop, senkop ve hemoptizisi olan hastalarda pulmoner tromboembolizm (PTE) olasılığından kuşkulıdır (67).

Dünya Sağlık Örgütü iyileşme süresini hafif olgularda 2 hafta, ciddi olgularda ise 3-6 hafta olarak bildirmektedir(68).

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