

BÖLÜM 8

Çocuklarda Horlama ve Obstrüktif Uyku Apnesi

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Giriş

Horlama ve obstrüktif uyku apne sendromu (Obstrüktif Uyku Apne Sendromu-OSAS), uyku sırasında üst solunum yolunda kısmi veya tam obstrüksiyonları sonucu oluşan uzun süreli hipoksi ve uyku bölünmeleri ile karakterize bir hastalıktır. Bu hastalarda gece semptomlarına ek olarak gündüz semptomlarının oluşması durumuna OSAS denir.¹

OSAS daha çok erişkin hastalığı olarak bilinmesine karşın çocukluk çağında yenidoğan döneminden adölesan çağa kadar her yaşta değişen sıklıkta görülebilmektedir. Ayrıca pediatrik OSAS epidemiyolojik, patofizyolojik ve klinik özellikleri ile yetişkin dönem OSAS'dan çok farklıdır.² Çocukluk dönemi OSAS tanısı ve tedavide gecikme ya da başarısızlık, çocukta büyüme yetersizliği, okul başarısızlığı, nörodavranışsal sorunlar, kardiyovasküler başarısızlık ve hatta ölüm gibi ciddi sonuçlara yol açabilir.³ Bununla birlikte, çocuklarda OSAS'ı en iyi değerlendirme ve yönetim yöntemleri konusunda fikir birliği yoktur.⁴ Bu bölümde morbidite ve komplikasyonları ile önemli bir sağlık sorunu olan pediatrik horlama ve OSAS değerlendirilecektir.

Tanım

Çocuklarda OSAS, normal ventilasyonu ve uykuyu bozan uzun süreli kısmi üst hava yolu tıkanıklığı ve aralıklı obstrüktif apne birlikteliği ile karakterizedir. Uykuda solunum bozukluğu; OSAS, *üst solunum yolu rezistans sendromu* ve tartışmalı olarak *primer horlamayı* içeren genel bir terimdir.⁵ Geçmişte çocukluk çağı OSAS için yetişkin dönemi tanı kriterleri uygulanmış fakat bunun yanlış

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Çocukluk dönemindeki OSAS'ın tanımlanmasından bu yana 30 yıl içinde çok ilerleme kaydedilmiş olsa da ebeveynler ve klinisyenler çocuklarda OSAS belirtilerini ve semptomlarını tanımlama konusunda tetikte kalmalıdır ve klinisyen-bi- lim adamları bu bilgi boşluklarını pediatrik alanda daraltmaya çalışmalıdır.¹²

Kaynakça

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