

Obstrüktif Uyku Apnesinde Distraksiyon Osteogenezi Uygulamaları

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Giriş

İlk olarak, Guilleminault ve ark.¹ tarafından tanımlanan obstrüktif uyku apne sendromu (OUAS) tıp ve diş hekimliğinde önemli bir konu olarak yerini almıştır. OUAS uyku sırasında genellikle düşük oksijen satürasyonu ile beraber seyreden üst solunum yollarındaki tekrarlayan aralıklarla gelişen kısmi veya tam tıkanıklık olarak tanımlanmaktadır.¹ OUAS gece uykusu ve gündüz uyuklama sırasında artmış hava akımı direnci ile beraber tekrar eden faringeal kollaps ile karakterizedir. OUAS'ın yoğun gün içi uykululuk, yorgunluk ve nörobilişsel bozukluklar yanında, kardiyovasküler ve serebrovasküler ilişkili morbidite ve mortalitelere yol açtığı gösterilmiştir. Tedavi edilmediği takdirde, OUAS'a bağlı mortalitenin 15 yıl içerisinde %30 olduğu da bildirilmiştir.² Bununla birlikte toplumda teşhis edilmiş birçok OUAS hastası olduğu düşünülmekte, özellikle hipertansif hastalarda görülme sıklığı %17'ye kadar ulaşabilmektedir.²

OUAS tedavisi temel olarak cerrahi ve medikal olmak üzere iki gruba ayrılmaktadır. Medikal tedavide devamlı negatif hava basıncı yöntemi (DNHB) altın standart olarak kabul edilmekte ve OUAS hastalarının çoğu hala bu yöntemle tedavi edilmektedir.³ 2006 yılında yapılmış olan bir "cochrane" sistematik taramada, uykusuzluk semptomlarının azaltılmasında ve orta veya yüksek düzeydeki OUAS hastalarının yaşam kalitelerini yükseltmede DNHB'nın etkili bir tedavi olduğu ileri sürülmektedir.⁴ Bununla birlikte, DNHB yöntemi hastaların %50'sinden daha azı tarafından tolere edilebilmektedir.^{5,6} DNHB tedavisine karşı hastaların uyumsuz olması, genel olarak; uyku arkadaşına verilen rahatsızlık, seksüel yaşam düzensizliği gibi psikolojik durumlar ve tolerans sorunları ile ilişkilendirilmektedir.⁷

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Kaynakça

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