

21. Bölüm

RETİNAL İSKEMİ REPERFÜZYON

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21.1. Giriş

Retinanın iskemik hastalıkları klinikte çok sık karşılaşılan ve büyük oranda retina üzerinde geri dönüşümsüz hasara yol açması nedeniyle tedavisi mümkün olmayan patolojilerdir. Yalnızca retinal iskemi değil, iskemi sonrası reperfüzyon da bazı patolojik sonuçlara yol açmakta ve iskeminin retinada oluşturduğu hasara katkı sağlamaktadır. Retina iskemisine yol açan faktörlerin tanınması, patofizyolojisinin anlaşılması ve hücresel düzeyde nekrotik/apoptotik süreçlere yol açan mekanizmaların açığa çıkarılması bu hastalıkların tedavisine de ışık olacaktır. Bunun için klinik kullanım için faydalı veriler sağlayabilecek uygun deney modelleri seçilmeli ve çıkan sonuçlar gerçek yaşam pratiğine yansıtılabilmelidir. Bu doğrultuda, günümüzde literatürde yer alan retinal iskemi reperfüzyon (İ/R) patofizyolojisi ve modellerinin derlenmesi amaçlanmıştır.

21.2. Retinal Fizyoloji – Retinal Kan Dolaşımı

Retina, embriyolojik kaynağını yansıtacak şekilde ikili bir kan akımına sahiptir. Dış pleksiform tabakanın büyük kısmı, dış nükleer tabakadaki hücre gövdeleri ve fotoreseptörler, beyindeki pia-araknoid damarlara karşılık gelen zengin bir anastomotik vasküler katman olan koryokapillaristen dolaylı olarak beslenmektedir. Bu nedenle, düzgün retina işlevi için normal retina damarlarına ek olarak

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