19. Bölüm

HİPERSENSİTİVİTE PNÖMONİSİ

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GİRİŞ

Hipersensitivite Pnömonisi (HSP); duyarlı erişkinlerde tespit edilmiş ya da edilememiş bir faktöre maruziyet sonrası gelişen, interstisyel akciğer hastalıkları (İAH) içerisinde yer alan, inflamatuar ve/veya fibrotik bir sürecin işlediği, akciğer parankimi ve küçük havayollarını etkileyen, tipik bir immünite-kaynaklı hastalıktır [(1)]. Şimdiye kadar birçok farklı tanım geliştirmiştir; ancak uluslararası grupların çabasına rağmen kesinleşmiş bir tanısal kriter ve yaklaşım belirlenememiştir [(2, 3).]

HSP daha önce 'ekstrensek alerjik alveolit' olarak tanımlanmış ve akut/subakut/kronik olarak sınıflandırılmıştır. Ancak bu yaklaşım ile sınıflandırma ve tanımlama kolay olmayıp bazı çalışmalarda keyfi değişkenlik göstermiştir. Bu nedenle ATS (American Thoracic Society), JRS (Japanese Respiratory Society) ve ALAT (Asociaci´on Latinoamericana del T´orax)'ın 2020 de ortak olarak yayınladıkları HSP rehberinde [(4)] ; prognozun en önemli belirteci histolojik ve radyolojik fibrozis olduğu için sınıflama fibrotik ya da nonfibrotik olarak yapılmıştır. Bazı hastalarda her iki görünüm olması durumunda, baskın olan görüntü sınıflamada tercih edilmiştir.

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dengesizlik ve persistan inflamasyon durumunda ortaya çıkmaktadır. Hastalığın farklı formları olmakla birlikte en sık sebepler; çalışma ortamı, yaşam alanı ya da rekreasyonel aktiviteler kaynaklı bakteri, protein, mantar, mikobakteri inhalasyonlarıdır. Tanı potansiyel antijen kaynaklarının belirlenmesine dayanmaktadır. Antijen ile temasın sonlandırılması tedavinin temel prensibidir.

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