

# 21. Bölüm

## EOZİNOFİLİK AKCİĞER HASTALIKLARI

Selami EKİN<sup>1</sup>

### GİRİŞ

Eozinofilik akciğer hastalıkları, akciğer interstisyumu ve alveolar boşlukların polimorfonükleer eozinofillerinin belirgin infiltrasyonu ile karakterize bir grup yaygın parankimal akciğer hastalığıdır<sup>1-3</sup>. Eozinofilik akciğer hastalıklarının ortak paydası, sistemik kortikosteroid tedavisine dramatik bir yanıt ve hemen hemen tüm vakalarda herhangi bir sekel olmaksızın iyileşme olarak kabul edilebilir. Alveolar eozinofili, bronkoalveolar lavajda (BAL)% 25'ten fazla eozinofil (özellikle >% 40) olması ve periferik kanda 1000/ $\mu$ L (özellikle > 1500/ $\mu$ L) fazla artış gösteren eozinofil sayısı olarak tanımlanır.

### EOZİNOFİLLER

Eozinofiller, klasik olarak parazitlere karşı konakçı savunmasında rol oynadığı ve alerjik reaksiyonları teşvik ettiği görülen bir granülosittir. Homeostaz sırasında, eozinofiller kemik iliğinde gelişir ve eotaksin gibi bir kemokin ve eozinofil proliferasyonu için anahtar bir sitokin olan interlökin-5' e yanıt olarak kandan hedef dokulara geç eder. Çok sayıda hedef dokuda, eozinofiller, geniş

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toksinite nedeni ile siklosporin tedavisinin kesilmesi sık karşılaşılan bir durumdur. Ortalama maksimum günlük doz 200 mg' dir<sup>70</sup>.

### Metotreksat

Metotreksat HES tedavisinde, kortikosteroid tedavisi ile olabilecek komplikasyonları azaltmak için ve özellikle pulmoner semptomları veya EGPA'yı düşündüren bulguları olan hastalarda alternatif bir ikinci basamak tedavi olarak kabul edilmektedir<sup>78</sup>.

### Mepolizumab

Eozinofillerin olgunlaşması ve aktivasyonunda rol oynayan IL-5' e yönelik bir monoklonal antikör olan mepolizumab, idiyopatik HES, L-HES, EGPA ile örtüşen durumlarda ve HES/eozinofilik granülomatoz dahil olmak üzere kortikosteroidde duyarlı HES' de faydalı olabilir. Mepolizumab, dört haftada bir ve 300 mg olarak deri altından uygulanır<sup>82</sup>.

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