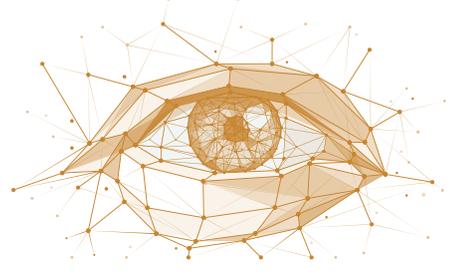


# BÖLÜM 5

## Alın Germe ve Kaş Pitozisi Tedavisi



Serdar İLGÜY<sup>1</sup>

### GİRİŞ

Kaş pitozisi, kaşın normal olması gereken yerden daha aşağıda olması durumudur. Periorbital yumuşak dokularının yerçekimine bağlı sarkması sonucu ortaya çıkar ve sıklıkla üst göz kapağı dermatoşalazisi ile birlikte görülür. Diğer etiyojileri dışlamak ve uygun tedaviyi belirlemek için ayrıntılı anamnez ve muayene gereklidir.

### Etiyoloji

Konjenital kaş pitozisi nadirdir ve fasiyal sinir ile mimik kaslarının gelişimsel bozuklukları sonucu oluşur.<sup>(1)</sup>

Edinsel kaş pitozisi farklı nedenlerle ortaya çıkabilir. Yaşa bağlı pitoz en sık görülen formudur.

Yaşa bağlı pitoz; periorbital yumuşak dokulardaki değişiklikler ile frontal kasın yaşla beraber gevşemesi sonucu oluşur.<sup>(2)</sup> Spazm kaynaklı pitozlar; orbikularis okuli kasının blefarospazm ve fasiyal distoni gibi konjenital/edinsel spazmları neticesinde oluşabilir.<sup>(3)</sup> Miyastenia gravis, okülofaringeal musküler distrofi ve miyotonik distrofi gibi hastalıklar frontal kasın atrofisi veya denervasyonuna neden olup miyojenik kaş pitozisine neden olabilir.<sup>(4)</sup> Ramsay Hunt Sendromu, Lyme hastalığı, herpes simpleks virüsü, tersiyer sifiliz, Batı Nil virüsü, HIV ve polio

<sup>1</sup> Uzm. Dr., Göz Hastalıkları, Eskişehir Yunus Emre Devlet Hastanesi, serdarilguy@hotmail.com

## SONUÇ

Kaş pitozu çeşitli patofizyolojik nedenlere bağlı ortaya çıkabilir. Patoloji anlaşıldıktan sonra, cerrahi olan ve cerrahi olmayan tedavi seçenekleri hastaya anlatılıp karar verilir. Cerrahi teknikler arasında farklılıklar vardır. Seçilen tedavi yönteminin komplikasyonları hakkında hastaya ayrıntılı şekilde bilgi verilmeli ve daha sonra cerrahi planlanmalıdır.

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