

12.

BÖLÜM

DİRENÇLİ HİPERTANSİYONDA RENAL DENERVASYON DIŐI CİHAZ TEDAVİ YÖNTEMLERİ

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GİRİŐ

Hipertansif hastaların çoğunda kan basıncı, antihipertansif ilaçlar ile ucuz bir şekilde kontrol edilebilmektedir. İlaç tedavileri de çoğunlukla iyi tolere edilmektedir. Dirençli hipertansiyon (HT), bir tanesi diüretik olmak koşuluyla 3 ve daha fazla antihipertansif ilacın etkin dozda kullanılmasına rağmen ofis kan basıncının (KB)>140/90 mmHg olmasıdır. Hipertansif hastaların %30' undan fazlası bu kategoriye girmektedir (1). Mineralokortikoid antagonisti ilaçlar, bu grup hastalarda özellikle etkin görünmektedir (2). Ancak tedaviye dirençli hipertansiyonu olan hastaların çoğu aslında gerçekten tedaviye dirençli değildir. Dirençli görünen bu hastaların bir bölümü reçete edilen antihipertansif ilaçlarını önerildiği şekilde kullanmamaktadır. Yapılan arařtırmalarda yeni tanı konmuş hipertansiflerin %50 kadarı ilk reçeteden 6 ay sonra antihipertansif ilaçlarını bırakmakta ve dirençli hipertansiyonlu hastaların ¼' ü antihipertansif ilaçlarının hiçbirini kullanmamaktadır (3, 4). İlaç uyumunun yeterli olup olmadığı, dirençli HT tanısı koymadan önce mutlaka değerlendirilmelidir. Terapötik ilaç monitörizasyonu, suboptimal ilaç uyumunu dışlamada yardımcı olabilir (5). Dirençli hipertansiyonun gerçek prevalansı %8-18 arasında değişmektedir (6, 7).

Dirençli hipertansiyonlu hastalarda kardiyovasküler (KV) risk, kan basıncı tedavi ile hedefte olan hastalara kıyasla belirgin derecede artmıştır (8, 9). Cihaz bazı antihipertansif tedaviler öncelikli olarak bu hasta grubu için geliştirilmiş ve klinik olarak test edilmiştir. Bu tedavi seçeneklerinin çoğu sempatik sinir sistemini hedef almaktadır. Esansiyel hipertansiyonun patogenezi multifaktöriyeldir. Hastadan hastaya hipertansiyona yol açan mekanizmalar değişkenlik göstermektedir. Bu nedenle antihipertansif tedaviler, kabul edilebilir yan etki profili ile KB kontrolünü sağlamak için bireyselleştirilmelidir. Dirençli hipertansiyonu olanlarda alta yatan nedeni tek bir mekanizma ile açıklamak pek mümkün değildir. Örneğin dirençli hipertansiyonu olan hastalarda sempatik sinir sistemi aktivitesinin ortalama akti-

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