

24. BÖLÜM

GEBELİKTE AKUT YAĞLI KARACİĞER

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GİRİŞ

Gebeliğin akut yağlı karaciğeri, karaciğerin yağlı infiltrasyonuna sekonder akut karaciğer yetmezliği ile karakterize, potansiyel olarak morbid obstetrik bir komplikasyondur. Ortaya çıkan etkiler arasında koagülopati, elektrolit anormallikleri ve çoklu sistem organ disfonksiyonu bulunur.

EPİDEMİYOLOJİ

Gebeliğin akut yağlı karaciğeri önceleri çok nadir görülüyordu; ancak artan farkındalık, iyileştirilmiş doğum öncesi bakım ve uygun testlerle tanı daha erken konulmaya başlanmıştır. Bu durum daha hafif vakaların erken tanı konulabilmesi sonucunu getirmiştir. Şu anda yaygınlığın 10.000 doğumda 1 ila 3 arasında olduğu tahmin edilmektedir (1, 2).

Gebelikte akut yağlı karaciğer için mortalite oranı tahminleri geniş bir aralıkta bulunmaktadır. 1980'lerdeki yayınlardan elde edilen veriler, ölüm oranlarının %70'i aştığını (3), ancak daha yeni tahminler bu oranın çok daha düşük yaklaşık %2 oldu-

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me ile sonuçlanacaktır. Erken teşhis ve deneyimli bir üçüncü basamak bakım merkezine sevk, morbidite ve mortalitenin azalmasına ve daha iyi tedaviye katkı sağlar.

Obstetrik ve anestezi yönetimi stratejileri, bireysel hasta, bir arada bulunan koşullar, laboratuvar değerleri, klinik seyir ve beklenen hastalık gidişatının dikkate alınmasını gerektirir. Gebelik akut yağlı karaciğeri hastalarının, ciddi komplikasyonlar geliştirme potansiyeli vardır ve peripartum dönemde yoğun bakım yönetimi gerektirebilir. Bu karmaşık hastaları güvenli ve etkili bir şekilde yönetmek için multidisipliner bir yaklaşım gereklidir.

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