

# 35. Bölüm

## COVID-19 PANDEMİSİNDE MULTİPL MİYELOMDA HASTA YÖNETİMİ

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### GİRİŞ

Multipl miyelom (MM), plazma hücrelerinin neoplastik, klonal çoğalması ile karakterizedir. Enfeksiyonlar MM'li hastalarda morbidite ve mortalite için önemli bir kaynaktır<sup>(1-3)</sup>. MM'li hastalar, yaklaşık ~7-10 kat viral ve bakteriyel hastalıklara duyarlıdır<sup>(4)</sup>. Disfonksiyone monoklonal immünooglobulinlerin aşırı üretimi, normal immünooglobulinlerin baskılanması, tanı sırasındaki azalmış CD+4 T-hücresi sayısı, konakçının patojenlere karşı suboptimal immünolojik yanıtının temelidir<sup>(5)</sup>. Ayrıca, tanı sırasında olabilen böbrek yetmezliği ve tedavide kullanılan ilaçlar da enfeksiyonlara eğilim yaratabilir<sup>(6-11)</sup>.

Miyelom için ortalama tanı yaşı yaklaşık 65'tir ve bu yaş grubunun komorbiditelere sahip olma olasılığı daha yüksektir<sup>(12)</sup>. Ek olarak, MM'li bireyler hem hastalık, hem de tedavi ile ilişkili olarak venöz tromboembolizm için artmış bir risk altındadır<sup>(13)</sup>.

COVID-19 enfeksiyonu nedeniyle hastaneye yatırılan hastalarda, ileri yaş, erkek cinsiyet, obezite ve komorbiditelerin olması kötü prediktif risk faktörleri olarak bildirilmiştir<sup>(14-17)</sup>. Bununla beraber SARS-CoV-2 enfeksiyonu hiperkoagülasyon durumunu da teşvik eder<sup>(18)</sup>. Bu durumların hepsi göz önünde bulundurulduğunda, MM'li hastalarda COVID-19 ile ilgili komplikasyon riskinin artmış olduğu açıktır. Ülkemizden yapılan 77 MM hastasının da dahil olduğu, toplam 740 hematolojik maligniteli COVID-19 hastasının değerlendirildiği ça-

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## SONUÇ

COVID-19 pandemisinde, terapötik yaklaşımımızı optimize etmek son derece zordur. Potansiyel olarak mortalite ile sonuçlanabilecek bir enfeksiyon riski ile tedavisi zor bir hastalık riskini dengelememiz gerekmektedir.

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