24. Bölüm

COVID-19 HASTALIĞINDA KOAGÜLOPATİ VE İMMUN PLAZMA

Sude Hatun AKTİMUR[1]

1. COVID-19'da koagülopati nasıl olmaktadır?
2. COVID-19 koagülopatisinin klinik ve laboratuvar özellikleri nelerdir?
3. COVID-19 ile ilişkili koagülopatinin yönetimi nasıl olmalıdır?
4. COVID-19 tedavisinde immun plazma nasıl etki etmektedir.
5. İmmun plazma tedavisi mekanizması nasıl açıklanmaktadır?
6. İmmun plazma tedavisinin riskleri var mıdır?
7. İmmun plazma tedavisinde başarıyı öngören faktörler nelerdir?

GİRİŞ

COVID-19 için hiçbir aşı, hiperimmün immünoglobulin veya spesifik antiviral ajan şu anda mevcut değildir ve steroidler, klorokin, antiviral ilaçlar (remdesivir, loparinir / ritonavir), antiinflamatuar ajanlar (tocilizumab, sarilumab) dahil olmak üzere çeşitli terapötik modaliteler ve hiperimmün konvalesan plazmasının kullanımı, şiddetli COVID-19 hastalarında bir dizi randomize olmayan veya randomize çalışmada araştırılmaktadır (1-3). Antikoagülan profilaksisi ve tedavisi de COVID-19 hastalarının yönetiminde anahtar rol oynamaktadır. İlk COVID-19 vakaları tanımlanır tanımlanmaz, SARS-CoV-2 ile ilişkili semptomların solunum yolu ile sınırlı olmadığı, ancak virüsün çoklu sistemik inflamatuar yanıtları ve koagülopatiyi tetikleyebildiği ortaya çıkmıştır (4-7).

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ar parametreler (IL-6, C-reaktif protein, ferritin ve prokalsitonin) değerleri ile risk sınıflaması yapılması gereklidir. COVID-19'un trombotik yükü göz önüne alındığında, DMAH ile tromboprofilaksi, bu antikoagülan ajanın antiinflamatuvar özelliklerini de dikkate alarak şu anda terapötik bir öncelik olarak kabul edilmektedir.

İncelenen çalışmalar tarafından bildirilen bulgular ışığında, İP, COVID-19 hastalığı için potansiyel bir terapi gibi görünmektedir. Yeterli olmayan farmakolojik tedavi koşullarında, başarılı bir iyileştirici çare için acil ihtiyaç olarak İP düşünülebilmektedir. Ek olarak, tedavinin en erken fırsatta ele alınması gerekmektedir.

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