

DİYABETİK ANNE BEBEĞİ

10.

BÖLÜM

Elvis KRAJA ¹
Emel OKULU ²

GİRİŞ

Tüm dünyada diyabetes mellitus (DM) sıklığının artışı ile birlikte, gebelikte diyabet sıklığı da artmaktadır. DM ile komplike bir gebelik hem anne, fetus ve yenidoğanı etkilemekte, hem de uzun dönem olumsuz sonuçlara neden olmaktadır. Maternal DM, pregestasyonel ve gestasyonel olmaktadır.

PREGESTASYONEL DİYABETES MELLİTUS

Pregestasyonel diyabetes mellitus (PGDM), gebelik öncesi tanı alan diyabet (Tip 1 DM veya Tip 2 DM) olarak tanımlanır ve tüm gebeliklerin %1-2'sini, gebelikteki diyabetlerin %13-21'ini oluşturmaktadır ^(1,2). PGDM'nin konjenital malformasyon, düşük, prematüre doğum, preeklampsi, makrozomi ve perinatal mortalite gibi olumsuz sonuçları vardır.

GESTASYONEL DİYABETES MELLİTUS

Gestasyonel diyabetes mellitus (GDM), gebelik sırasında ortaya çıkan diyabet olarak tanımlanır. Patogenezi Tip 2 DM gibi olup gebeliğin ilerlemesi ile insülin duyarlılığında azalma söz konusudur. GDM, gebelikte ortaya çıkan ve doğumdan kısa süre sonra düzelen bir durumdur. Bununla birlikte GDM, birçok kadında Tip 2 DM'nin öncüsüdür ve takip edilmesi gerekir. GDM'li anne bebeklerinde konjenital malformasyon riski düşüktür. Ancak preeklampsi, polihidroamniyoz, ölü doğum, makrozomi ve yenidoğanda metabolik sorunlar gelişebilir ⁽³⁾.

¹ Öğr. Gör. Dr., Ankara Üniversitesi Tıp Fakültesi Neonatoloji Bilim Dalı, eakr aja@gmail.com
ORCID iD: 0000-0002-2522-6191

² Doç. Dr., Ankara Üniversitesi Tıp Fakültesi Neonatoloji Bilim Dalı, emelokulu@gmail.com
ORCID iD: 0000-0002-1101-3355

DM ile komplike gebeliğin bebekteki nörogelişimsel sonuçlar üzerine etkisi çok iyi bilinmemektedir. GDM'li gebelerden doğan çocuklarda bilişsel ve dil gelişiminde, PGDM'li gebeden doğan çocuklarda bilişsel alanda gerilik bildirilmiştir⁽⁴³⁾. Bunun yanında, DAB'leri ile diyabeti olmayan gebelerin bebeklerin arasında nörogelişimsel fark olmadığını bildiren çalışmalar mevcuttur⁽⁴⁴⁾. PGDM'li ve GDM'li gebelerin bebekleri otizm gelişimi açısından risk altındadırlar^(45,46).

SONUÇ

DAB'leri kısa ve uzun dönemde komplikasyonları açısından risk altındadırlar. PGDM'li gebelerin prekonsepsiyonel dönemde glisemik kontrolünün sağlanması, gebelik oluştuktan sonra yakın takibi ve gebelerin GDM açısından değerlendirilmesi, bu komplikasyonların oluşumunda azaltıcı rol üstlenmektedir. DAB'lerinin doğum sonrası dönemde uygun şekilde takip ve yaklaşımlarının yapılması önemlidir.

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