

Covid-19 Pandemisi Gölgesinde Diş Hekimliği

8. BÖLÜM

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GİRİŞ

Koronavirüsler (CoV), basit gribal hastalıklar gibi toplumda sık rastlanılan hafif enfeksiyon tablolarından, Orta Doğu Solunum Sendromu (Middle East Respiratory Syndrome, MERS) ve Ağır Akut Solunum Sendromu (Severe Acute Respiratory Syndrome, SARS) gibi daha ciddi enfeksiyon tablolarına neden olabilen zoonotik kökene sahip büyük bir virüs ailesinin üyeleridir (1). CoV zarflı ve segmentsiz, tek zincirli pozitif RNA virüsleridir. “**Coronavirüs (taçlı virüs)**” ismini yüzeylerindeki çubuksu uzantıları nedeniyle Latince’deki “**corona**”, yani “**taç**” anlamından yola çıkılarak almışlardır (2).

31 Aralık 2019’da Çin’in Hubei / Wuhan şehrinde deniz ürünleri ile kümes hayvanları, yarasalar, dağ sıçanları, yılanlar dahil çeşitli canlı hayvanları satan bir markette çalışan 4 kişide ve aynı günlerde bu marketi ziyaret edenler dâhil toplam 27 kişide akut solunum yetmezliği sendromunun tespit edilmesi ile başlayan COVID-19 salgını; SARS-CoV-2 virüsün hızla dünya genelinde 381.000 insanı enfekte etmesi ve 16.000’den fazla kişinin ölümüne yol açması nedeniyle 11 Mart 2020’de Dünya Sağlık Örgütü (DSÖ) tarafından koronavirüslerin sebep olduğu ilk pandemi olarak ilan edilmiştir (3-5).

Bir salgını pandemi olarak ilan edebilecek kuruluş DSÖ’dür. DSÖ’nün bir hastalığı pandemi olarak ilan etmesi için şu üç koşulu taşıyor olması gereklidir: Salgın hastalığa daha önce maruz kalınmamış olması, etkenin insanlara bulaş yoluyla tehlikeli bir hastalığa neden olması ve hastalık etkeninin bulaşının kolay ve devamlı olması (6). İlk pozitif vaka ülkemizde 11 Mart 2020’de tanımlanmıştır. Pandemi süreci ülkemizde olduğu gibi tüm dünyada etkisini artırarak devam etmektedir (7, 8).

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Dental Tedavi Sonrası Önlemler

Hastanın tedavisinin bitirilmesinin ardından tekrar kullanılabilen KKE'ler dezenfekte edilmeli veya yenisi ile değiştirilmelidir (64). Kapı kolları, sandalyeler, masalar, asansörler, tuvalet ve banyo yüzeyleri ve kullanılan cihazlar %1 hipoklorit veya %70'lik alkol ile silinmelidir. Kullanılan el aletleri buharlı otoklav cihazları ile steril edilmelidir (65).

SARS-Cov-2'nin havada asılı kalmadığını belirten yayınların yanı sıra 3 saate kadar havada asılı kalarak bireyler arasında yayılabildiğini gösteren çalışmalar da mevcuttur. Olası çapraz enfeksiyon riskini azaltmak için her müdahaleden sonra klinik alanda tam bir hava değişimi yapılması gerekmektedir (66-68). Havalandırma pencerelerinin olmadığı durumlarda plazma kümesi iyon teknolojisi, UV ışıkları, Yüksek Verimli Partikül Hava (HEPA) filtreleri, Ultra Düşük Hava Penetrasyonu (ULPA) filtreleri, negatif basınçlı odalar ile içerideki havanın temizlenmesi sağlanabilir (69-71). Havalandırma sistemleri kullanıldığında enfeksiyonun yayılma ihtimali olabileceği düşünüldüğünden; klima sistemlerinin hava ile temas eden filtre ve bileşenlerinin hidroalkolik çözeltiler ile günlük temizliği ve sanitasyonunun yapılması gerekmektedir (72).

SONUÇ

COVID-19 pandemi döneminde en yüksek risk grubu olarak tanımlanan diş hekimleri güncellenen kılavuz ve literatürlerin takibini yapmalı, risk analizleri doğrultusunda hareket etmelidir. Yapılması zorunlu tedaviler pandemi sürecinde önerilen rehberler doğrultusunda gerçekleştirilmelidir.

Diş hekimliği uygulamalarının yapıldığı hastahaneler, klinikler ve diş hekimliği fakültelerinde tüm birimlerde çalışan personellere bilgilendirme yapılmalı, tedbir ve yönetim planlamaları oluşturulmalıdır.

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