

OBEZİTE VE KIRIK İYİLEŞMESİ

19. BÖLÜM

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Obezite, günümüzde tüm yaşları etkileyen küresel bir salgın olarak dikkat çekmektedir. Başlı başına ölümcül hasar oluşturan obezite Tip 2 diyabet, hipertansiyon, kardiyovasküler hastalıklar, nonalkolik yağlı karaciğer hastalığı ve bazı kanser türleri gibi birçok komorbid durumla ilişkilendirilmiştir. Bunun yanı sıra kemik sağlığı üzerine obezitenin etkileriyle ilgili literatürde tartışmalı ve zıt yön- lü sonuçlar bulunmaktadır. Vücut ağırlığı gibi mekanik yük oluşturan faktörlerin kemik oluşumu üzerindeki olumlu etkisi nedeniyle obezitenin kemik sağlığına yararlı olabileceği düşünülmektedir. Bu bağlamda kemik sağlığı için önemli bir başka faktör olan kemik mineral yoğunluğu vücut ağırlığının artması ile pozitif korelasyon göstermektedir. Ancak, obeziteye bağlı yağ birikiminin kemik kütle- sine zararlı olabileceği de literatürde yer almaktadır.

Mevcut kanıtların çoğu obez erişkinlerde proksimal femur ve vertebral kırık riskinin daha düşük olduğunu desteklemektedir (1). Bununla birlikte, obezitede kırık riski tüm iskelet için geçerli değildir: proksimal humerus, üst bacak ve ayak bileği kırığı dahil olmak üzere bazı omurga dışı kırıkların riski daha yüksektir (2). Bu nedenle, obezite kırığa karşı tamamen koruyucu değildir ve kırılma üzerine bölgeye özgü bazı etkileri vardır.

Obezite ve Kemik Metabolizması

Obezitenin kemik üzerinde nasıl etki yaratabileceğine dair bazı bilgiler, kemik döngüsünün biyokimyasal belirteçlerinden elde edilmektedir. Obezite çeşitli mekanizmalarla kemik metabolizmasını etkileyebilmektedir. Birincisi, osteoblastlar ve adipositler ortak bir mezenkimal kök hücreden türetilir (3). Bununla

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yapılacak çalışmalar ile obezitenin kırık iyileşmesi üzerindeki olumlu ve olumsuz etkilerinin farklılaşma mekanizmaları ortaya konabilir.

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