

BÖLÜM 10

GENEL ÜROLOJİ İLE İLGİLİ SENDROMLAR – 2

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AŞIRI AKTİF MESANE (AAM)

Tanım ve Klinik Önemi

Aşırı aktif mesane (AAM), idrar sıkışması, sık idrara çıkma ve nokturi ile karakterize edilen, dengesiz mesane kasılmalarının neden olduğu yaygın bir klinik sendromdur(1). İdrar kaçırma da tabloya eşlik edebilir ve bu durum hastaların yaşam kalitesinde belirgin bozulmaya yol açar(2).

AAM semptomlarının büyük kısmı detrusor aşırı aktivitesi ile ilişkilidir. Tanım gereği AAM idiyopattir; ancak değiştirilebilir ve değiştirilemez risk faktörleri tanımlanmıştır(3). Risk faktörlerinin belirlenmesi, özellikle korunmaya yönelik stratejilerin geliştirilmesi açısından kritik öneme sahiptir.

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doğrularken, BT ipsilateral böbrek agenezisini tespit eder. Görüntüleme tekniklerinin gelişimi sayesinde, eskiden nadir kabul edilen bu sendrom artık daha sık tanımlanmaktadır.(39)

Zinner sendromu cinsel aktivite başlamadan önce asemptomatiktir; semptomlar ortaya çıktığında ise disüri, sık idrara çıkma, ejakülasyondan sonra perineal ve skrotal ağrı gibi nonspesifik klinik bulgular şeklinde kendini gösterir.(40)

Tedavi klinik bulgulara bağlıdır ve bulguların ciddiyetine göre semptomların takibi gibi konservatif yaklaşımlardan, vakumlu ponksiyon kullanılarak cerrahi eksizyona (laparoskopi) kadar değişkenlik gösterebilir.(41)

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