HIV SÜRECİNDE DEPRESYON VE OLASI İLİNTİLİ DURUMLARI ELE ALMAK

Dr. M.Kemal Kuşcu

Marmara Üniversitesi Tıp Fakültesi
Psikiyatri ABD

I GÜNDEM

HIV…..

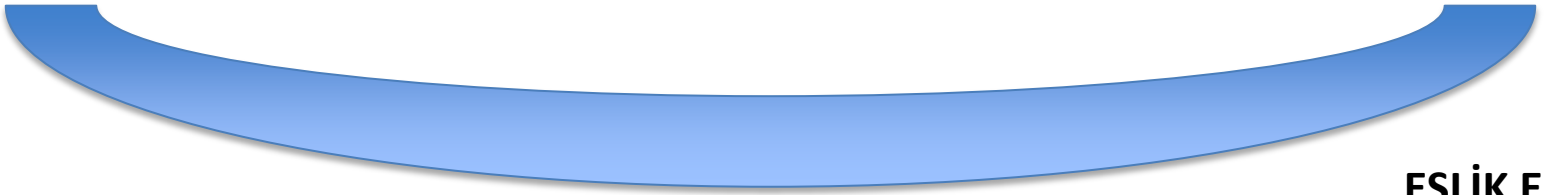
AKUT-ÖLDÜRÜCÜ

KRONİK

HIV…..

AKUT-ÖLDÜRÜCÜ

KRONİK



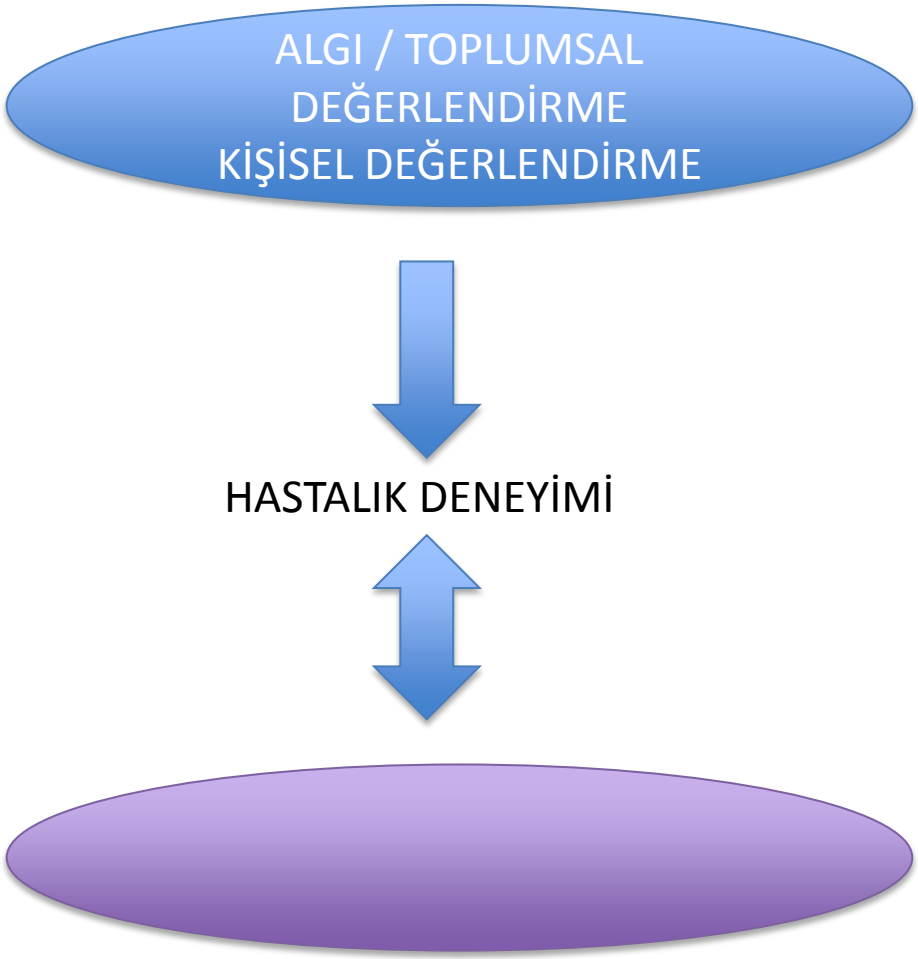
HEKİM –HASTA İLİŞKİSİ

HASTA DENEYİMİ

YAŞAM ORTAMI-İLİŞKİLER

EŞLİK EDEN TIBBİ DURUMLAR-SORUNLAR-
Depresyon

TOPLUMSAL DEĞERLER VE POLİTİKALAR

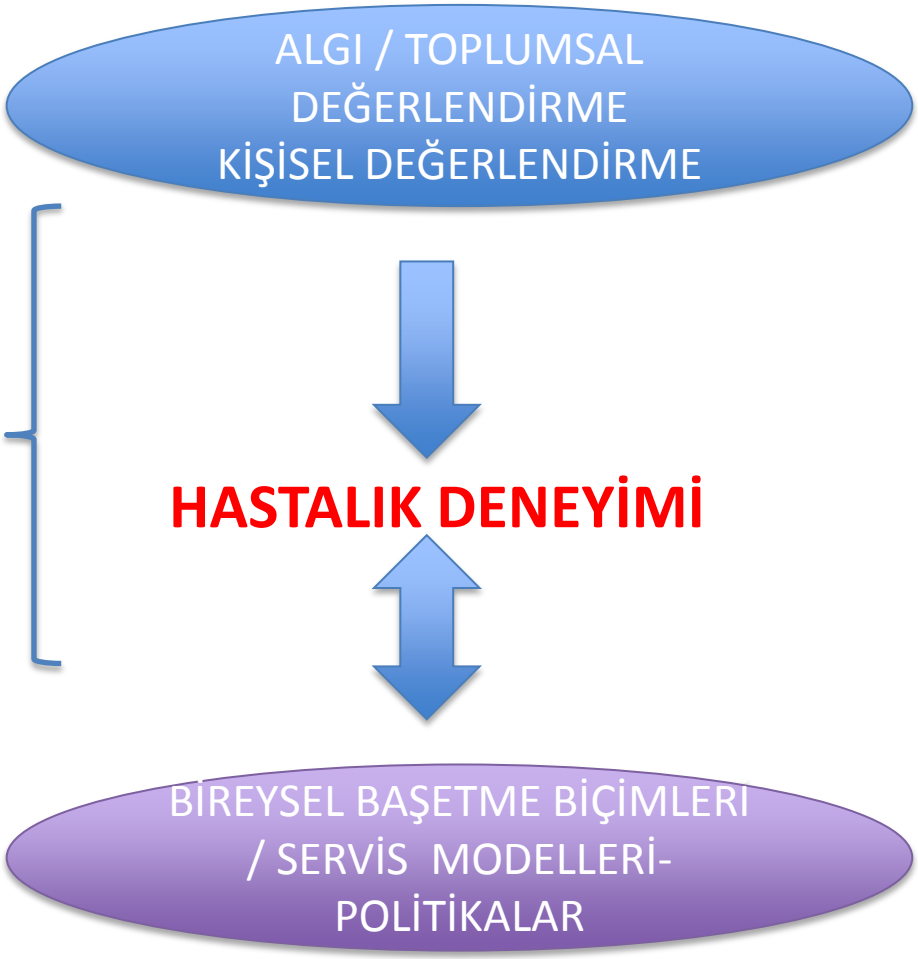


TOPLUMSAL DEĞERLER VE POLİTİKALAR

STİGMA

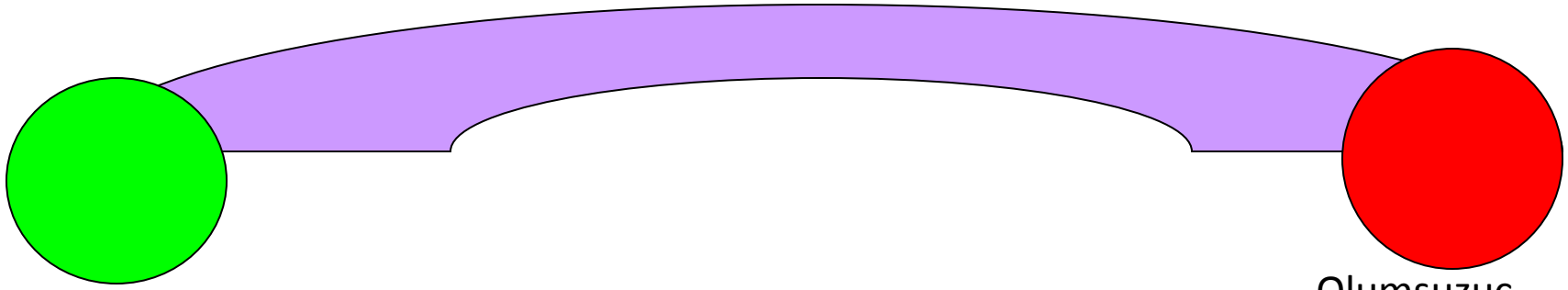
ETİK GÜNDEMLER

TEDAVİLERLE İLGİLİ ÖNYARGILAR



III. GÜNDEM

KRONİK HASTA TAKİBİ



Olumlu

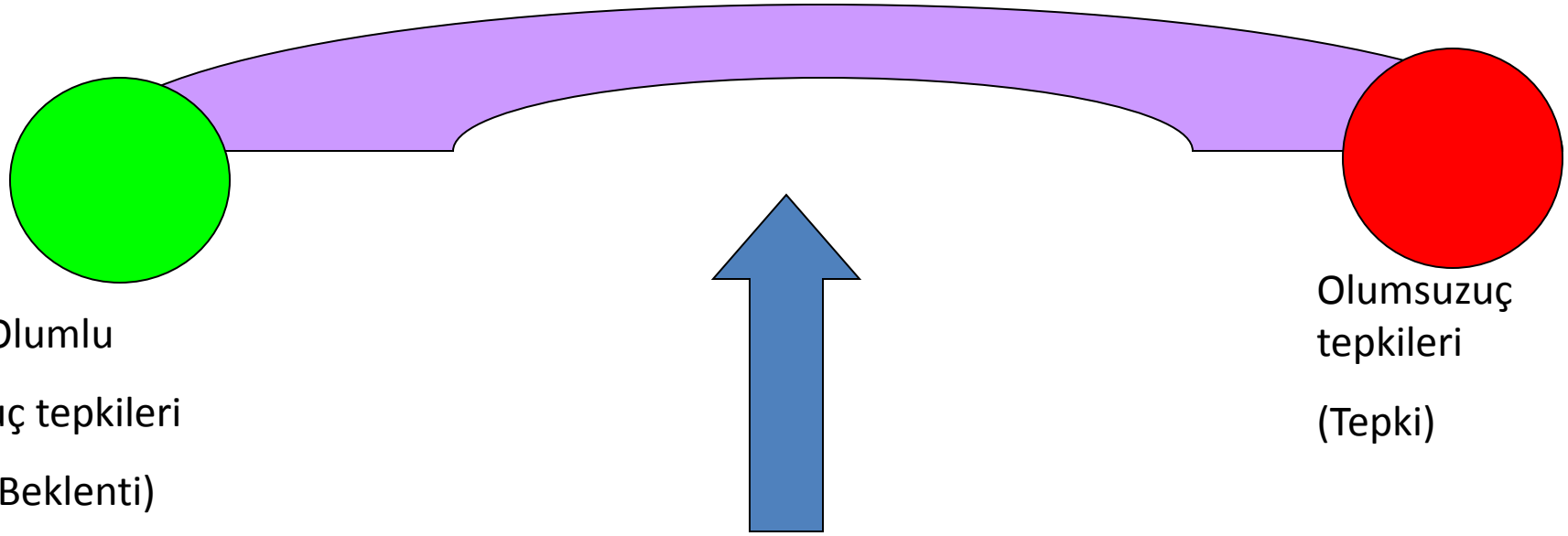
uç tepkileri

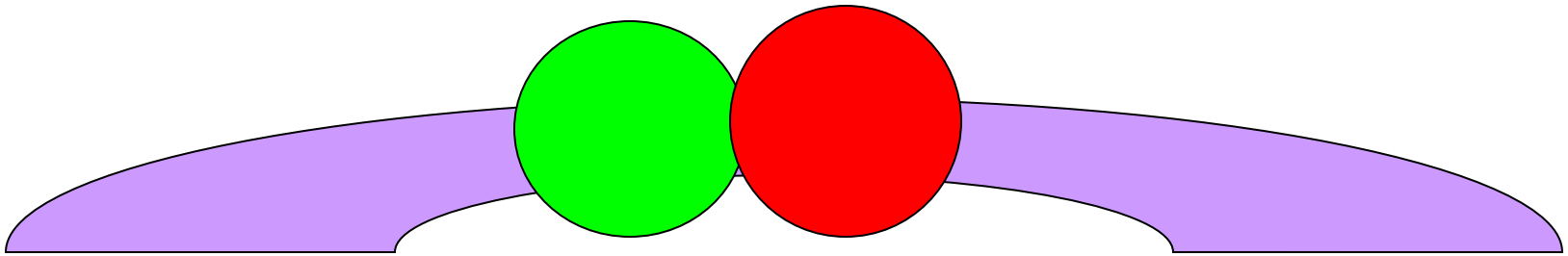
(Beklenti)

Olumsuzuç

tepkileri

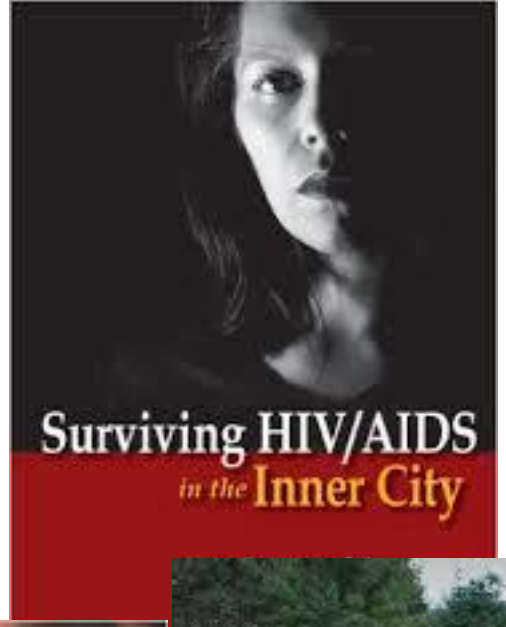
(Tepki)

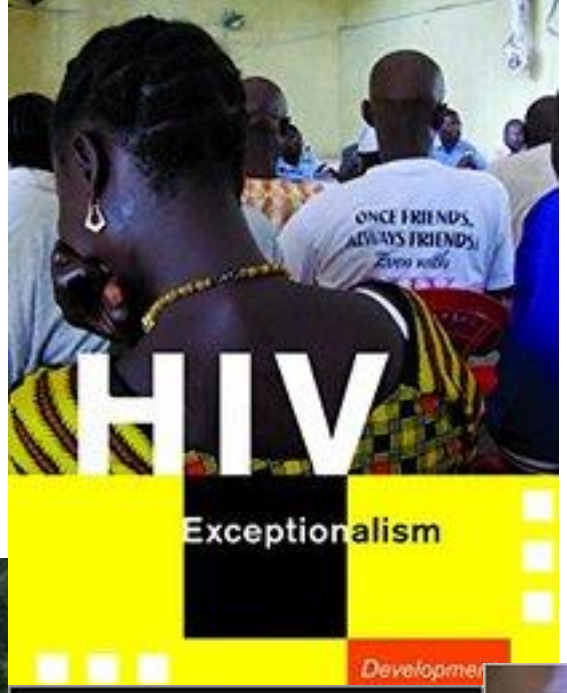

Olumlu
uç tepkileri
(Beklenti)
Olumsuzuç
tepkileri
(Tepki)
BİREYSEL BECERİLER

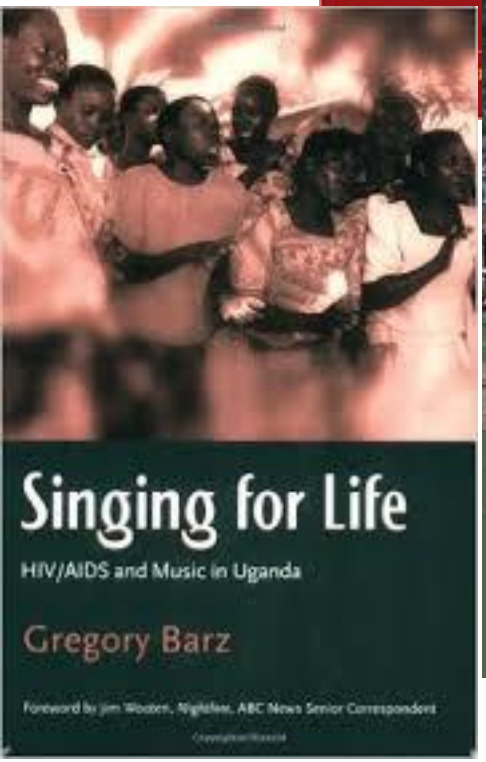


Makul tepkiler-ilişki

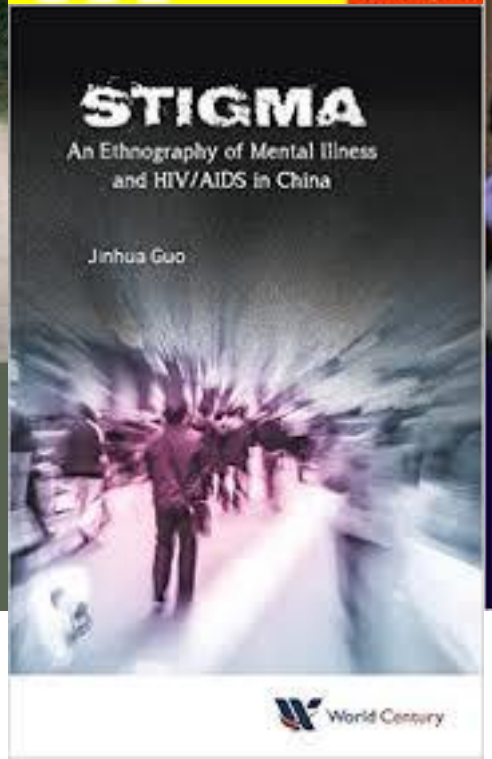
TEDAVİ EDİCİ DENEYİMLER-KLİNİK KÜLTÜR

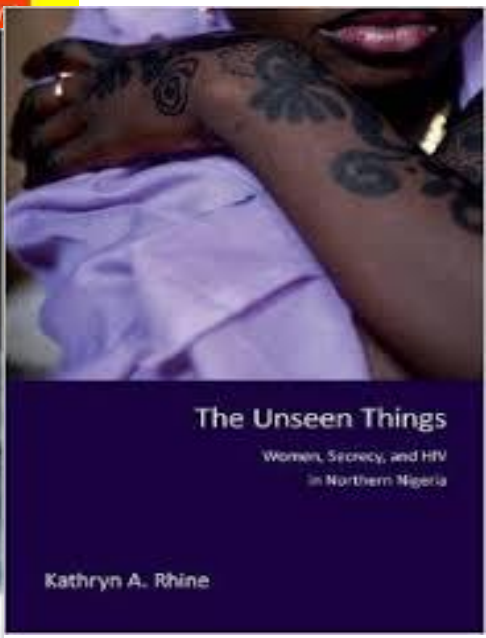

Surviving HIV/AIDS
in the Inner City


ONCE FRIENDS,
ALWAYS FRIENDS
HIV
Exceptionalism


Singing for Life
HIV/AIDS and Music in Uganda
Gregory Barz


JARRETT ZIGON
"HIV IS GOD'S BLESSING"
Rehabilitating Morality in Neoliberal Russia


STIGMA
An Ethnography of Mental Illness
and HIV/AIDS in China
Jinhua Guo
World Century


The Unseen Things
Women, Secrecy, and HIV
in Northern Nigeria
Kathryn A. Rhine

NORWEGIAN MINISTRIES

HIV ‘I KARŞILAMAK----------TOPLUMSAL POLİTİKALAR

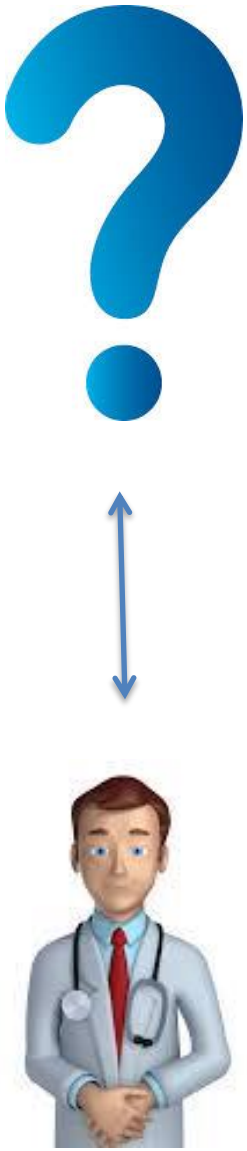
PSİKOSOSYAL MODELLER

HIV ALGILANMASI VE OLUŞTURDUĞU İLİŞKİSEL SORUNLAR

HIV TANISINI BASKIN OLARAK ALAN GRUPLARIN ÖZELLİKLERİ

HIV SÜRECİNE EŞLİK EDEN DEPRESYON BENZERİ PSİKOLOJİK ÖRÜNTÜLER

HIV ALGILANMASI VE OLUŞTURDUĞU İLİŞKİSEL SORUNLAR



Vaka 1

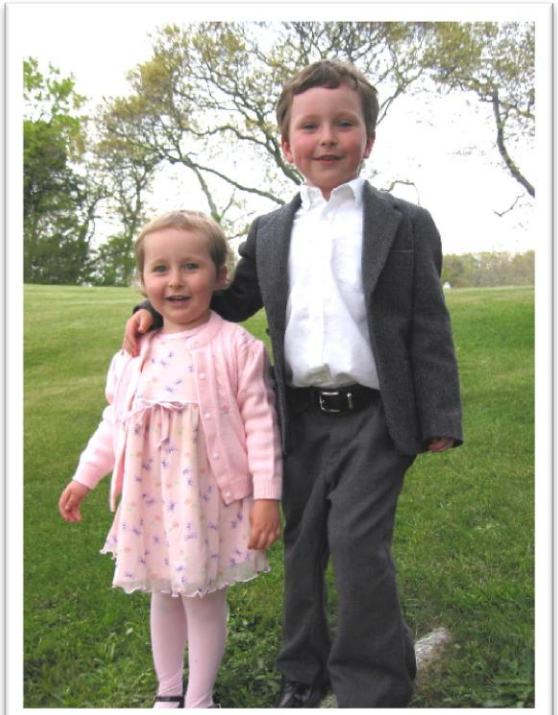
60 yasında karı-koca +

5 yıl önce (2010) tanı alınmış.

2 çocuk, kızlarından biri 40 yaşında ve beraber yaşıyor.

1 ve 3 yaşında 2 torunları var.

İlişkilerinde sorun yok, mutlu aile tablosu.



ORTAK DENEYİM --------KÜLTÜR

HIZLI VE TELAŞLI HAREKET ETME

DİNLE- TAM OLARAK ANLA ENDİŞELER NELER ?

KENDİ İNANÇ SİSTEMİNİ GÖZDEN GEÇİR

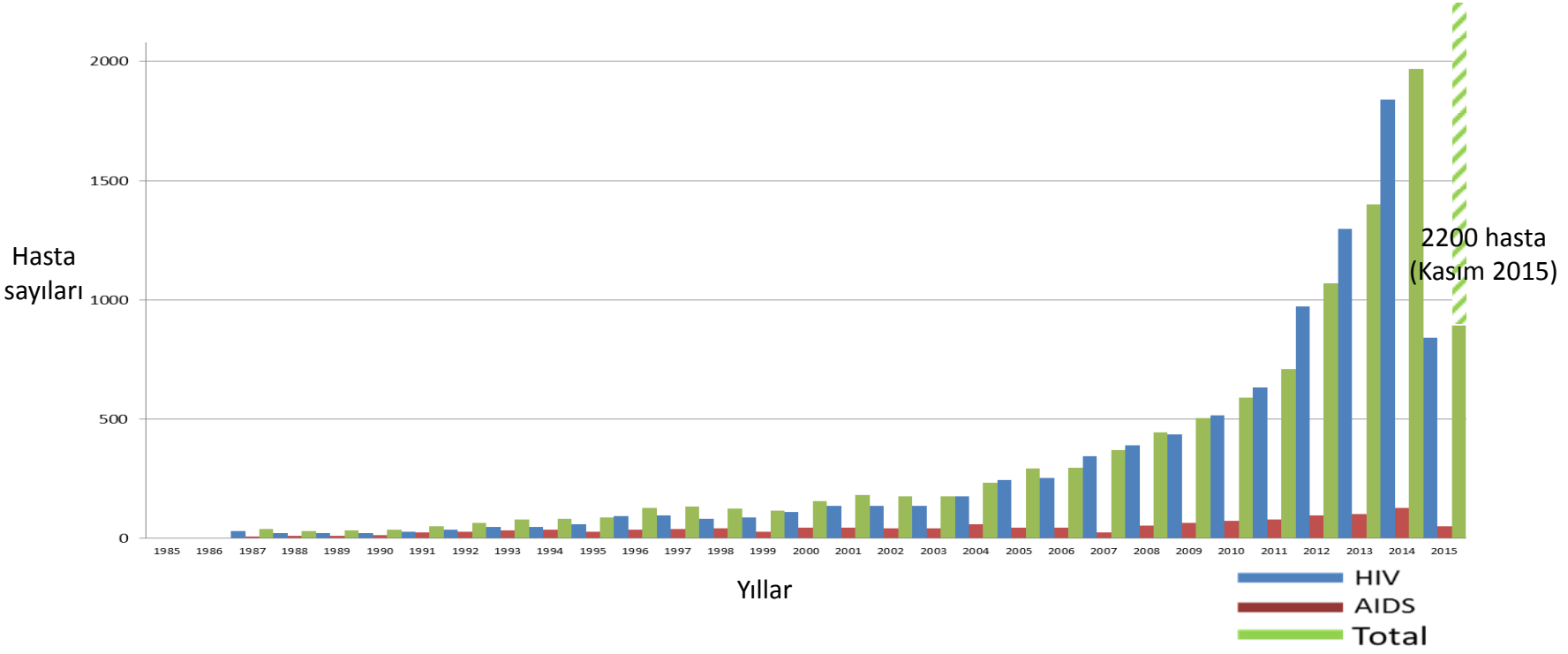
PAYLAŞ- EKİBİNE TAŞI – FARKLI FİKİRLERİ AL

İYİ UYGULAMALAR VAR MI ?

HIV TANISINI BASKIN OLARAK ALAN GRUPLARIN ÖZELLİKLERİ

TÜRKİYE'DE BİLDİRİLEN YILLARA GÖRE HIV/AIDS VAKA DAĞILIMLARI
01 EKİM 1985 – 30 HAZİRAN 2015

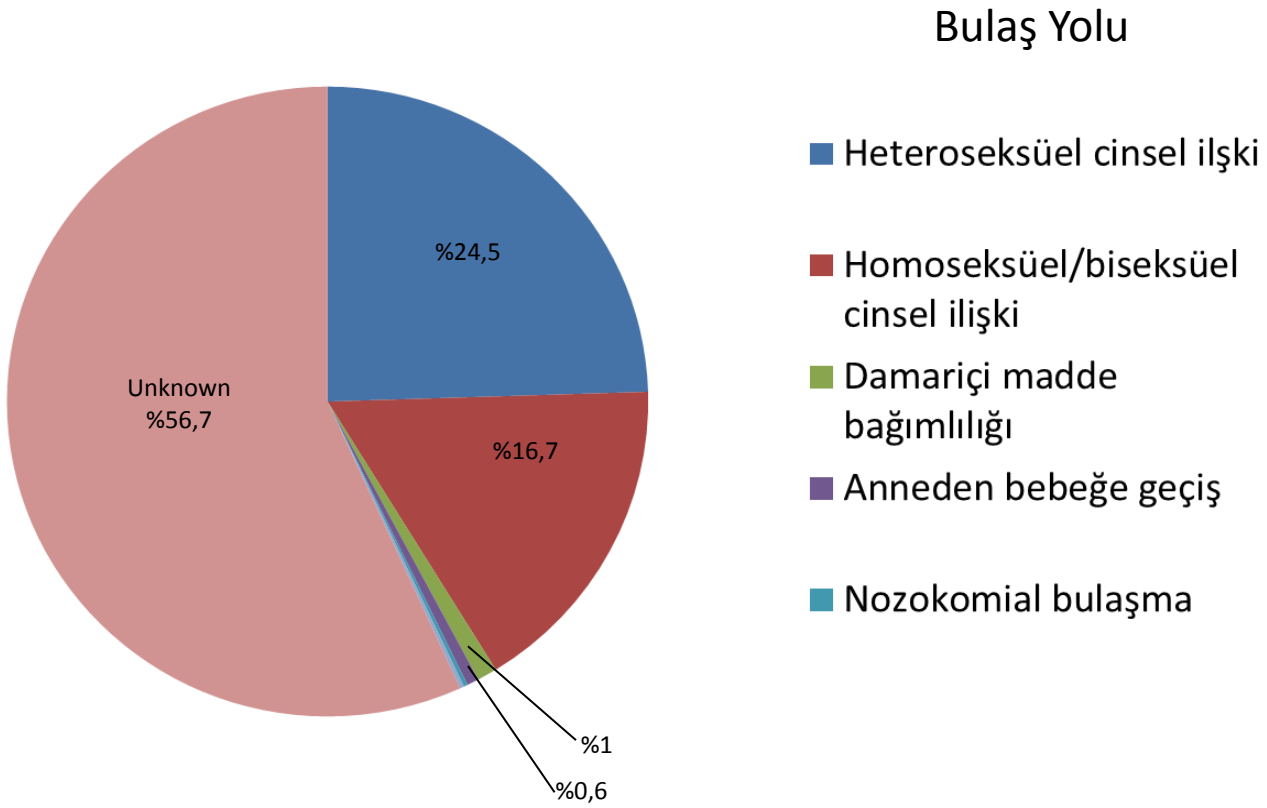
THSK Bulaşıcı Hastalıklar Daire Başkanlığı

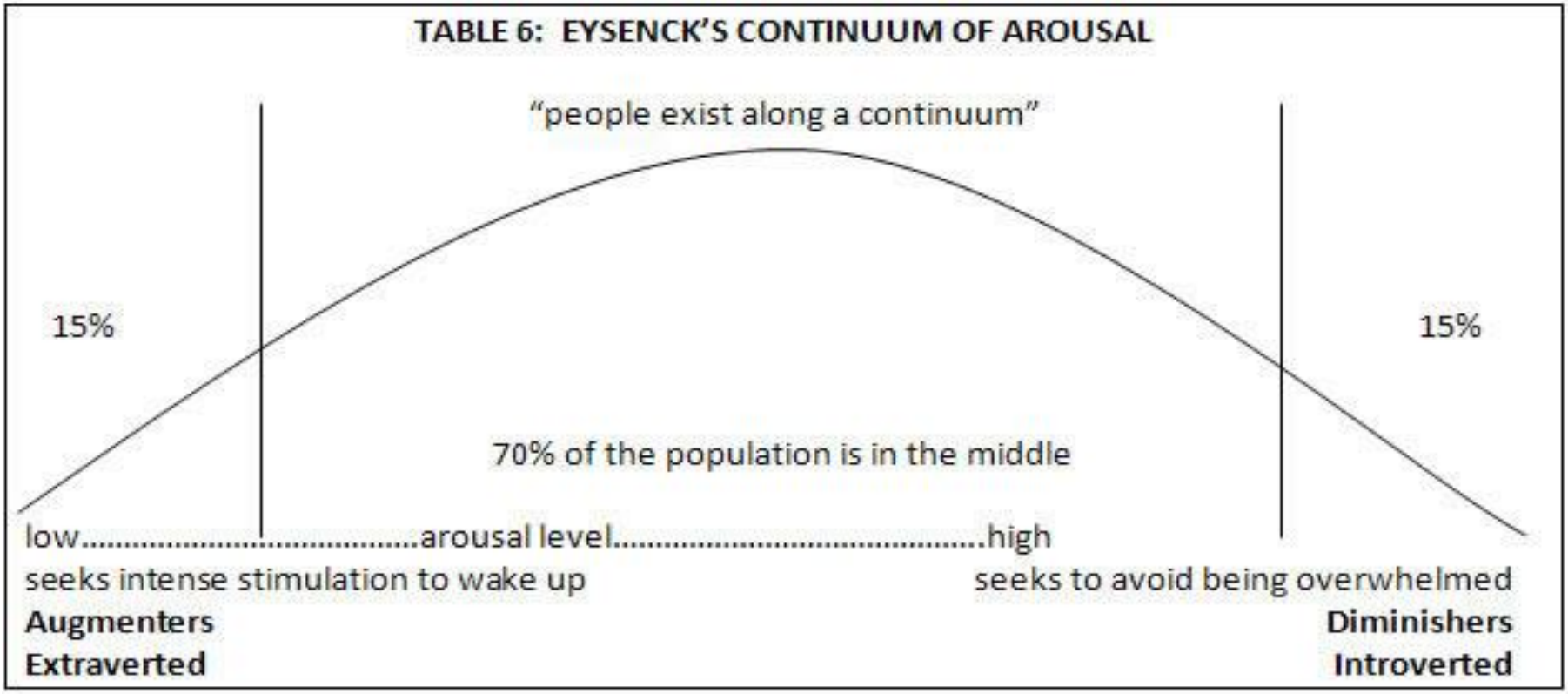


Source: National HIV Symposium 2015, Turkish Public Health Institute Data

TÜRKİYE'DE BİLDİRİLEN OLASI BULAŞ YOLU DAĞILIMLARI
01 OCAK 2015 – 30 HAZİRAN 2015

THSK Bulaşıcı Hastalıklar Daire Başkanlığı





Şu ana odaklı

Ödül merkezli

Duygu odaklı

Cezadan kaçınan

Gelecek odaklı

İşlev odaklı

HASTALIK DENEYİMİ TEPKİLERİ

AIDS PATIENT CARE and STDs
Volume 22, Number 5, 2008

DOI: 10.1089/apc.2007.0145

Coping, Goal Adjustment, and Psychological Well-Being in HIV-Infected Men Who Have Sex with Men

VIVIAN KRAAIJ, Ph.D.,[1] SHELLEY M. C. VAN DER VEEK, M.Sc.,[2]
NADIA GARNEFSKI, Ph.D.,[3] MAYA SCHROEVERS, Ph.D.,[3] ROBERT WITLOX, M.Sc.,[4]

TABLE 1. RELATIONSHIPS BETWEEN COPING STRATEGIES, GOAL ADJUSTMENT, AND WELL-BEING: PEARSON CORRELATIONS

	Depression r	*Anxiety* r
Self-blame	0.09	0.07
Acceptance	0.10	0.04
Rumination	0.11	0.09
Positive refocusing	−0.51***	−0.37***
Refocus on planning	0.08	0.02
Positive reappraisal	−0.37***	−0.28**
Putting into perspective	−0.24*	−0.13
Catastrophizing	0.34***	0.29**
Other-blame	0.37***	0.19
Active coping	0.10	−0.04
Emotional support	0.04	0.12
Substance use	0.10	0.13
Goal disengagement	−0.39***	−0.38***
Goal reengagement	−0.50***	−0.40***

*$p < 0.005$. **$p < 0.01$. ***$p < 0.001$.

YENİDEN ODAK OLUŞTURAN

HEDEF ŞEKİLENDİREBİLENLER

YÜKSEK UYUM

Baillière's Clinical Endocrinology and Metabolism
Vol. 13, No. 4, pp. 615–633, 1999

9

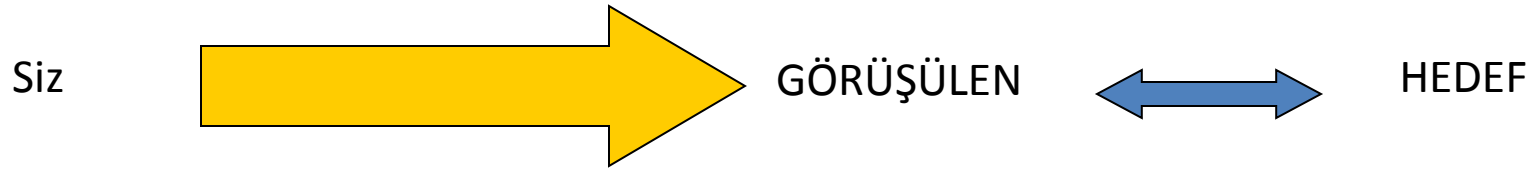
Stress and coping: the psychoneuroimmunology of HIV/AIDS

Elizabeth G. Balbin BS
Research Associate

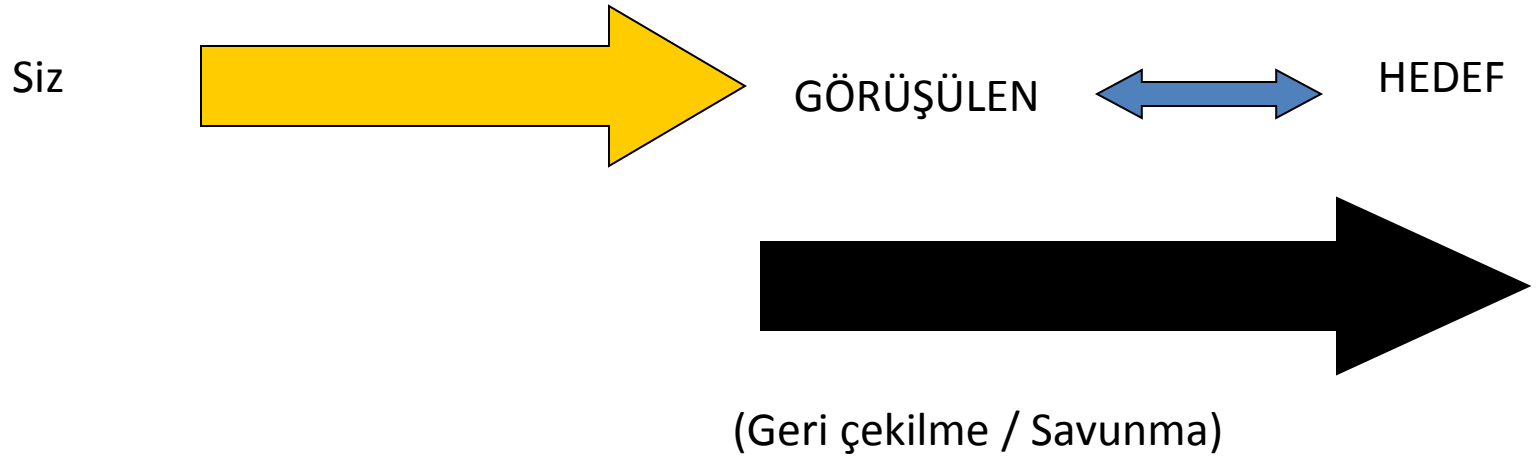
Gail H. Ironson* MD, PhD
Professor of Psychology and Psychiatry
University of Miami, Behavioral Medicine Program, PO Box 248185, Coral Gables, FL 33124-2070, USA

UYUM –TAMPONLAMA STİLLERİ ----------ENFEKSİYON PROGRESYONU

I. Model- ele geçirme/ikna

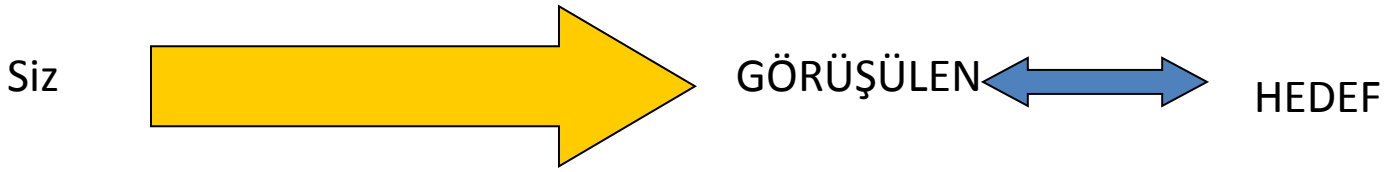


I. Model- ele geçirme/ikna

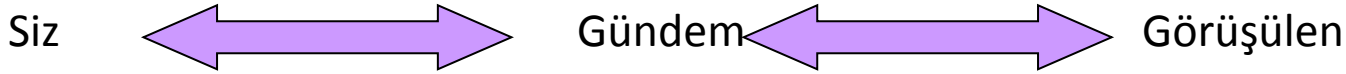


İkircikli – Telaşlı-- Kendi merkezli - Bencil

I. Model- ele geçirme/ikna



II. Model- paylaşım/ortaklaşma/araştırma



Eşit mesafe- *Kendi deneyimini dokunmayan eşit mesafe oluşturamaz*

İhtiyaç merkezli- *Karşısındaki takip eden / kendi endişesini teskin edebilen*

Anlamaya yönelik- *Sonuçlardan çok süreçleri gözeten*

HER KİŞİYE AYNI YÖNTEM İYİ GELMEZ

TEKRARLAYAN DAVRANIŞ DÖNGÜLERİ NELER ?

NASIL BİR BAŞA ÇIKMA STİLİ VAR ? İŞE YARIYOR MU?

DAVRANIŞ RİSKİ TAŞIYOR MU?

RİSKİ ARTTIRAN FAKTÖRLER NELER ?

HIV SÜRECİNE EŞLİK EDEN DEPRESYON BENZERİ PSİKOLOJİK ÖRÜNTÜLER

Impact of Psychiatric Disorders Volume 16 Issue 2 June/July 2008

Commentary

Impact of Psychiatric Disorders on the HIV Epidemic

International AIDS Society–USA *Topics in HIV Medicine*

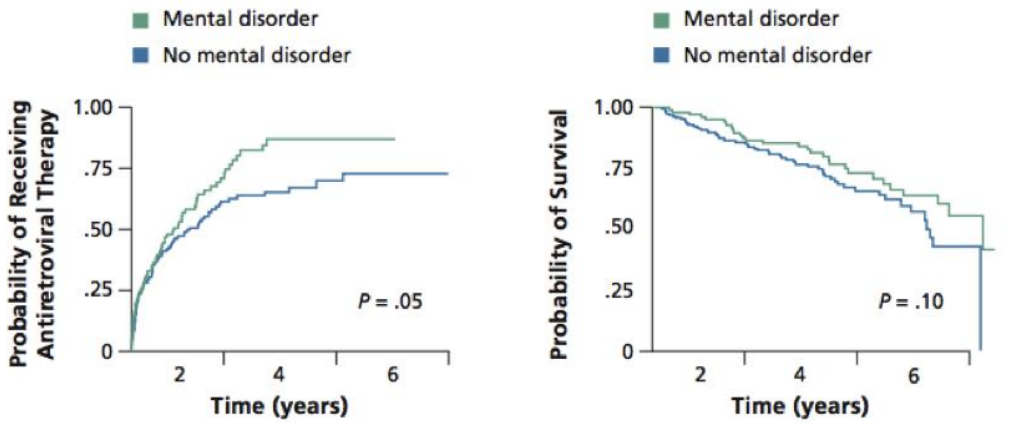


Figure **1.** Left: Time to receipt of antiretroviral treatment in patients with versus without documented mental disorders at the Johns Hopkins Moore Clinic. Right: Length of survival among HIV-infected individuals receiving treatment for mental disorders at the Johns Hopkins Moore Clinic versus those with no documented mental disorder or psychiatric intervention.

HEM TEDAVİYE ULAŞIMI HEM HAYATTA KALIMI BELİRLİYOR !!!

Depressive Symptoms and AIDS-Related Mortality Among a Multisite Cohort of HIV-Positive Women

Judith A. Cook, PhD, Dennis Grey, BA, Jane Burke, MS, Mardge H. Cohen, MD, Alejandra C. Gurtman, MD, Jean L. Richardson, DrPH, Tracey E. Wilson, PhD, Mary A. Young, MD, and Nancy A. Hessol, MSPH

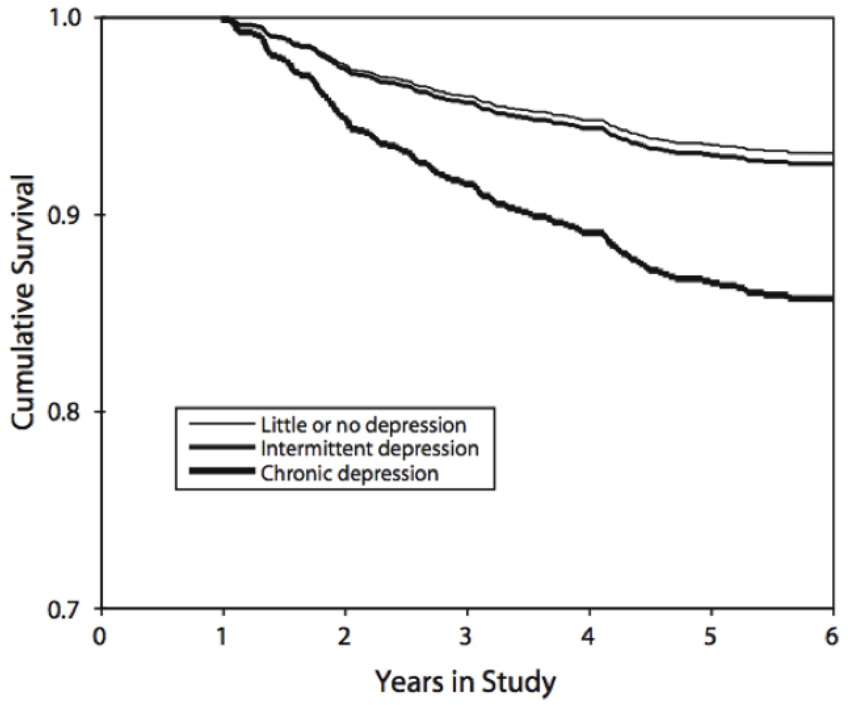
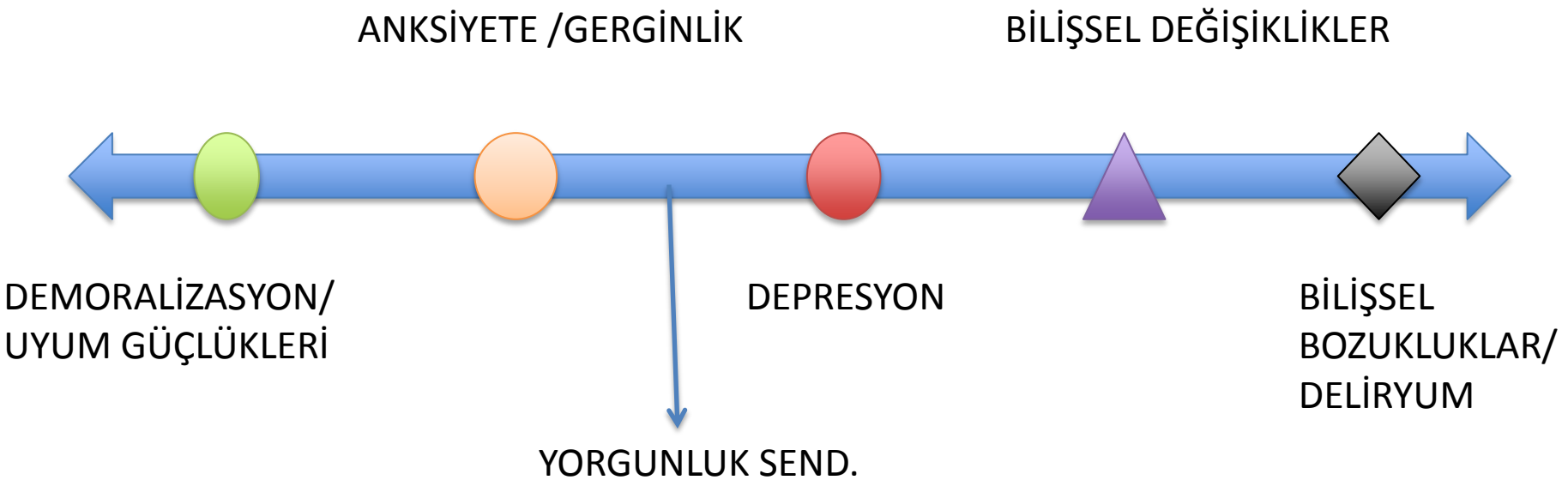
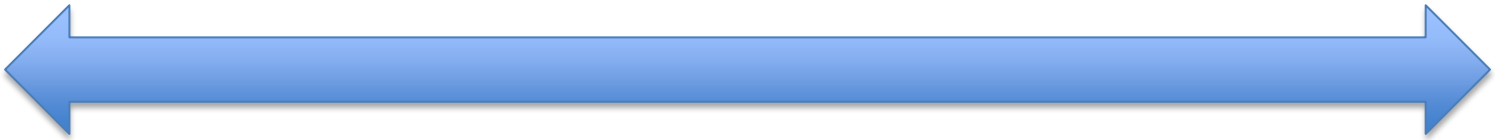


FIGURE 1—Kaplan–Meier survival curves, stratified by level of depressive symptoms.


ANKSİYETE /GERGİNLİK
BİLİŞSEL DEĞİŞİKLİKLER
DEMORALİZASYON/
UYUM GÜÇLÜKLERİ
DEPRESYON
BİLİŞSEL
BOZUKLUKLAR/
DELİRYUM
YORGUNLUK SEND.



DEMORALİZASYON

-Ödüle karşı duyarlılık- keyif alma
-Aile öyküsü yok
-Başlangıçta uyku bozukluğu
-Hayat akışını etkilemiyor
-Pozitif olaylara olumlu etki

DEPRESYON

-Keyif alamama
-Aile öyküsü varlığı
-Uyku bozuklukları
-Hayat akışının etkilenmesi
-Pozitif olaylra tepkisizlik

Published in final edited form as:
Psychiatr Q. 2008 March ; 79(1): 43–53. doi:10.1007/s11126-007-9055-x.

Antidepressant Treatment and Adherence to Combination Antiretroviral Therapy among Patients with AIDS and Diagnosed Depression

James Walkup[1], **Wenhui Wei**[1], **Usha Sambamoorthi**[2], and **Stephen Crystal**[1]
[1]Institute for Health, Health Care, Policy and Aging Research, 30 College Avenue, New Brunswick, NJ 08901, USA, e-mail: Jamie.walkup@gmail.com

[2]Department of Community Health and Preventive Medicine, Morehouse School of Medicine, Atlanta, GA, USA

Abstract

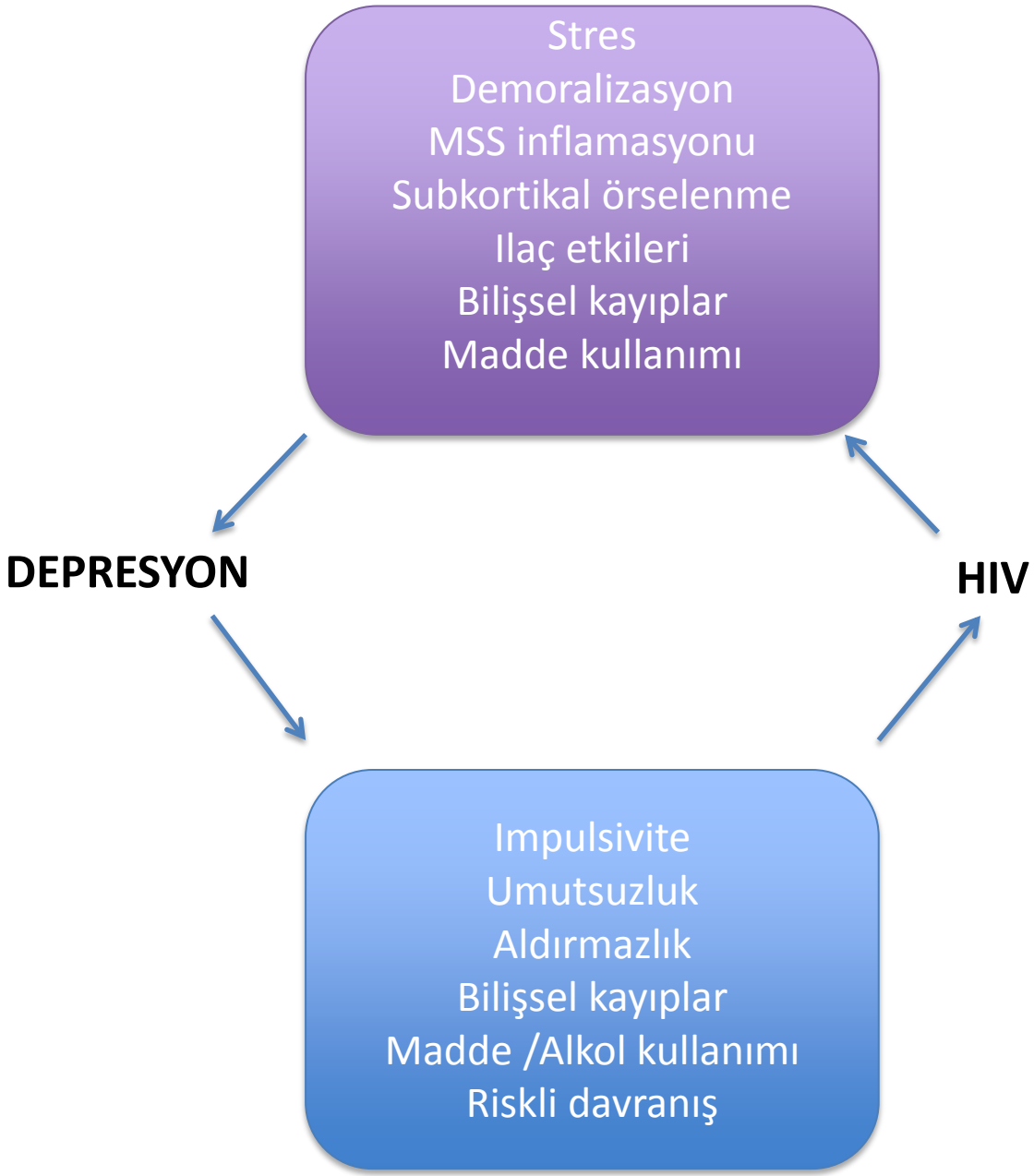
HAART (Highly Active Antiretroviral therapy ---------Tedavi öncesi ve tedavi sırasında Antidepresan kullanımı-----Tedaviye katılımı arttırıyor..

Published in final edited form as:
AIDS Behav. 2011 November ; 15(8): 1819–1828. doi:10.1007/s10461-011-9938-6.

Antidepressant Treatment and Adherence to Antiretroviral Medications among Privately Insured Persons with HIV/AIDS

Ayse Akincigil[a,b], **Ira Wilson**[c], **James T. Walkup**[d,b], **Michele J. Siegel**[b], **Cecilia Huang**[b], and **Stephen Crystal**[b,a]

Antidepresan tedavi > Psikoterapi seansları


Stres
Demoralizasyon
MSS inflamasyonu
Subkortikal örselenme
Ilaç etkileri
Bilişsel kayıplar
Madde kullanımı
DEPRESYON
HIV
Impulsivite
Umutsuzluk
Aldırmazlık
Bilişsel kayıplar
Madde /Alkol kullanımı
Riskli davranış

HIV and Clinical Depression

HIV Medication	May trigger
Interleukin	Depression, disorientation, confusion and coma
Steroids	Mania or depression
Efavirenz (Sustiva)	Decreased concentration, depression, nervousness, nightmares
Stavudine (Zerit, d4T)	Depression or mania, asthenia
Zidovudine (Retrovir, AZT)	Mania, depression
Interferon	Neurasthenia fatigue syndrome, depression
Zalcitabine (Hivid)	Depression, cognitive impairment
Vinblastine	Depression, cognitive impairment

Table Psychotropic effects of antiretrovirals

Diagnosis	*Implicated agent*
Depression	Abacavir[39] Amprenavir[40] Efavirenz[36,40,41] Enfuvirtide* Indinavir[42] Nevirapine[43] Ritonavir/lopinavir* Saquinavir* Stavudine* Zidovudine*
Mania	Didanosine[44] Efavirenz[45,46] Zidovudine[47–49]
Psychosis	Abacavir[35,39] Efavirenz[36,50–52] Nevirapine[43]
PTSD	Efavirenz[53]
Vivid dreams	Abacavir[54] Enfuvirtide* Entricitabine* Nevirapine[55] Efavirenz[56]
Suicidal ideation	Abacavir[39] Efavirenz[55,56]
Miscellaneous symptoms (anxiety, sleep disturbance, emotional lability, etc.)	Efavirenz[56,57] Ritonavir/lopinavir* Stavudine* Zalcitabine*

*Adverse effects reported in individual SPCs.

Maudsley Prescribing Guidelines 2009

Choosing Antidepressants for HIV and AIDS Patients:

Insights on Safety and Side Effect

by JASON YANOFSKI, MD, and PAUL CROARKIN, DO

AUTHOR AFFILIATIONS: Dr. Yanofski is a fellow in child psychiatry at the University of Texas, Southwestern, Dallas, Texas, and Dr. C child psychiatry consult attending at the University of Texas, Southwestern, Dallas, Texas.

TABLE 1. Theoretical CYP inhibitions and actual effects of SSRIs and other antidepressants in the setting of retroviruses

SSRI OR OTHER NEW ANTIDEPRESSANTS	CYP INHIBITIONS	ACTUAL EFFECTS TO RETROVIRAL LEVLS	ACTUAL EFFECTS TO ANTIDEPRESSANT LEVELS
Fluoxetine and metabolite norfluoxetine	Strong: CYP2D6 Weak: CYP3A4	Increased	None
Paroxetine	Strong: CYP2D6	None	Decreased
Sertroline	Weak: CYP2D6	None	Decreased
Citalopram	None	None	None
Fluvoxamine	Strong: CYP1A2, CYP2C19 Weak: CYP2C9, CYP2D6, CYP3A4	Unknown	Unknown
Nefazadone	Strong: CYP3A4	Unknown	Unknown
Trazodone	Unknown	None	Increased
Venlafaxine	Some weak	Unknown	Unknown
Mirtazapine	Some weak	Unknown	Unknown
Reboxetine	Some weak	Unknown	Unknown
Escitalopram	Unclear	Unknown	Unknown

KÜÇÜK DOZLA BAŞLA YAVAŞ YAVAŞ YÜKSELT

BASİT DOZ REJİMLERİ SEÇ (ZATEN HASTAMIZIN KOMPLEKS BİR REJİMİ VAR)

YAN ETKİSİ- İLAÇ ETKİLEŞİMİ EN DÜŞÜK ,YARILANMA ÖMRÜ DÜŞÜK BİR İLAÇ SEÇ

MUHAKKAK HIV TAKİBİNİ YAPAN HEKİM VE EKİPLE YAKIN ÇALIŞ

Maudsley Prescribing Guidelines 2009

ENGELİ OLUŞTURAN HASTALIK KADAR BİZİM KULLANDIĞIMIZ DİLDİR…

E.Goffman

DİL

KÜLTÜR