

## Bölüm 19

# BAŞ BOYUN KANSERİ TEDAVİSİNE BAĞLI ORAL KOMPLİKASYONLAR

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### GİRİŞ

Baş boyun kanseri tedavi komplikasyonlarını etkileyen önemli nedenler hastaya ait yaş, cinsiyet, genetik farklılıklar, sigara ve alkol kullanımı, oral hijyen alışkanlıkları, radyasyon doku toleransı gibi biyolojik değişkenler, toplam doz, fraksiyon dozu, fraksiyonasyon biçimi, tedavi volüm genişliği, doku doz dağılımı, toplam tedavi süresi, radyasyonun eksternal veya internal uygulanışı ve verilmiş planlaması, radyasyon kaynağının çeşidi, enerji düzeyleri gibi fiziksel değişkenler ile kullanılan kemoterapötik ilacın cinsi ve dozudur. (1,2).

Kanser tedavilerinin, dokular ve organlar üzerindeki etkilerini akut, subakut ve kronik olarak sınıflandırmak mümkündür. Tedavinin başlangıcından itibaren ilk 90 gün içinde akut etkiler görülmektedir (3). Fakat, subakut ve kronik etkileri zamana bağlı olarak ayırmak oldukça güçtür. Genellikle, tedaviden 3-6 ay sonraki etkiler subakut döneme ve 6-12 aydan sonraki etkiler kronik döneme ait olarak kabul edilmektedir. Akut dönem etkileri tedavi ile veya spontan olarak iyileşebilirken subakut etkiler kısmen iyileşebilmektedir. Kronik etkiler ise genellikle kalıcı olmaktadır. (4,5).

Baş-boyun kanseri nedeniyle radyoterapi uygulanan olgularda erken dönemde mukozit, tat alma ve tükürük salgısında azalma, ciltte eritem veya deskuamasyon; geç dönemde ise cilt ve mukozalarda atrofi, telenjiektazi, ülserasyon, fibrozis, trismus, ödem, nekroz gibi komplikasyonlarla karşılaşmakta; tükürük salgısında azalma ağız kuruluğuna ve ağız hijyenini bozarak diş çürüklerine neden olmaktadır (6). Baş-boyun kanserlerinde geç yan etkilerin büyük bir kısmı ilk 3 yıl içinde gelişmekte çok az bir kısmı da daha uzun bir dönemde gelişmekte veya progresyon göstermektedir (7).

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