

# Bölüm 74

## HİPOFARİNKS KANSERLERİ

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### GİRİŞ

Hipofarinksin superior sınırını hyoid kemik, inferior sınırını ise krikoid kartilaj oluşturur. Farinksin en alt bölümüdür; üst sınırı orofarinksten başlar ve servikal özefagus olarak devam eder. Betz katlantısı alt sınırı belirlemede önemlidir ve krikofaringeal kasın üst sınır mukozal katlantısını belirler. Hipofarinks anatomik olarak üç kısma ayrılır bunlar; piriform sinüs, posterior faringeal duvar ve post krikoid bölgedir.

Piriform sinüsler hipofarinks lateral duvarlarının larinkse doğru posterior ya da lateral yöne invazyonundan oluşur. 3 duvarı vardır bunlar; lateral, medial ve anterior duvarlardır. Medial duvar superiorda ariepiglottik katlantı olarak devam eder. Piriform sinüsler posterior faringeal duvara açılır ve bu bölge ile devamlılık halindedir. İnferiora 3 duvar konik hale dönüşerek apeksi oluşturur.

Hipofarinks kanserinin değerlendirilmesinde klinik ve biyolojik davranışının bilinmesi önemlidir çünkü;

- Submukozal yayılımı endoskopik olarak değerlendirmek zordur.
- Çoklu neoplastik odaklar oluşturan kanserleşme alanı oluşturur.
- Superfisial yayılıma eğilim göstererek komşu bölgelere yayılım yapar (larinks, orofarinks vb).
- Rejyonel lenf nodlarına ve uzak bölgelere belirgin metastaz özelliği vardır (1,2).

Benzer histolojik tipler olmalarına rağmen baş boyun kanserleri arasında en kötü prognoza sahip kanser hipofarinks kanseridir ve 1990'lu yıllardan beri çok az sörvi artışı sağlanabilmiştir. Buna sebep olarak geç evrede bulgu vermesi, yüksek multisentirite oranı, submukozal yayılım özelliği, lenfatik ve sistemik yayılıma meyli, yüksek sekonder malignite birlikteliği, multipl ko-morbidite birlikteliği, kötü beslenme, yüksek alkol ve sigara kullanımını ayrıca düşük sosyoekonomik durum gibi nedenler sayılabilir (3,4).

### ETİYOLOJİ

Gelişmekte olan ülkelerde kanser büyük bir halk sağlığı sorunudur. Yeni kanser tanılarının %50'si 2010 yılında gelişmekte olan ülkelerde tespit edilmiştir ve 2030 yılında bu oranın %70 olacağı tahmin edilmektedir. Bunun nedeni olarak nüfus artışı, enfeksiyon nedenli ölümlerin azalması ve yaşlı nüfus artışı sayılabilir (5).

Sigara, tütün ve alkol gelişmekte olan ülkelerde hipofarinks kanserinin en sık nedenidir. Asya'daki en sık sebep ise tütün ve areca fındığıdır(6). Larinks kanseri sigara ile ilişkili iken hipofarinks kanseri daha çok tütün kullanımı ile ilişkilidir (7).

### KLİNİK BULGULAR VE DEĞERLENDİRME

Hipofarinks kanserlerinin %65-70'i piriform sinüsten, %15-20'si posterior faringeal duvardan ve %15-20'si post krikoid alandan kaynaklanır.

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