

## BÖLÜM 7

# KANSERLİ ÇOCUK VE ERGENLERDE GÖRÜLEN UYUM SORUNLARI, YAŞAM KALİTESİ VE PSİKİYATRİK BOZUKLUKLAR

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### GİRİŞ

Kanser, çocuklarda erişkinlere nazaran daha az görülmekle birlikte her yaşta ortaya çıkabilmektedir. Dünya sağlık örgütünün verilerine göre her yıl 0-19 yaş arasındaki yaklaşık 427.000 çocuk ve ergen kanser tanısı almaktadır (1,2). Çocuklarda yaklaşık % 30 oranında görülen lösemiler, en sık görülen kanser türünü oluşturmaktadır. Çocukluk çağında her iki cinsiyette de merkezi sinir sistemi tümörleri ve lenfomalar lösemileri takip etmektedir (3).

Çocukluk çağı kanserlerinin yetişkinlerdeki gibi belirli tarama testleri yoktur ve çoğu zaman önlenemez. Genellikle bulgular sonrasında tanı konularak jenerik ilaçlar, cerrahi ve radyoterapi dahil diğer tedavi yöntemleri ile tedavi edilir. Gelişen teknoloji ile birlikte çocukluk çağı kanserlerin tedavi edilme oranları artmıştır. Kapsamlı hizmetlere ulaşılabilirliğin kolay olduğu yüksek gelirli ülkelerde kanserli çocukların % 80'inden fazlası tedavi edilmektedir (4). Düşük ve orta gelirli ülkelerde ise teşhis eksikliği, yanlış veya gecikmiş teşhis, bakıma erişimdeki engeller gibi sebeplerden dolayı kanser tedavisi alanlar tahmini % 15-45 arası iyileşme göstermektedir.

Geçmişte çocuklardaki kanser tedavisinde sağ kalıma odaklanırken, iyileşme oranlarının artması ile kanserin kendisinin veya tedavisinin beraberinde getirdiği çocuk ve aile üzerine yaşam kalitesini etkileyen fiziksel ve psikolojik etkilerin de dikkate alınması gerektiği ortaya çıkmıştır. Bu sebeple çocuk ve gençlerin kanser tedavisi alırken duygusal ve davranışsal sorunlarını, psikolojik ihtiyaçlarını, aile, okul ve sosyal yaşamlarındaki zorlukları kapsamlı şekilde değerlendirmek önemli hale gelmiştir.

Araştırmalar, çocukluk çağı kanseri olan çocuk ve gençlerin bir alt grubunun ve ebeveynlerinin hastalık boyunca ciddi psikolojik sıkıntı yaşayabileceğini gös-

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Kanserin ve tedavisinin karmaşık doğası sebebi ile psikiyatrik sonuçlara tek bir sebebin yol açtığıнын söylenmesi zordur ancak psikososyal risk değerlendirmesinin sadece hastalık süresinde değil sağ kalım sonrasında da düzenli şekilde yapılması, kişinin ileriki yaşamında psikiyatrik hastalıklarla karşılaşmaması açısından önemlidir. Özellikle risk faktörlerinin dikkatlice değerlendirilmesi ve erken müdahale gelecek psikiyatrik hastalıkların önüne geçecektir.

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