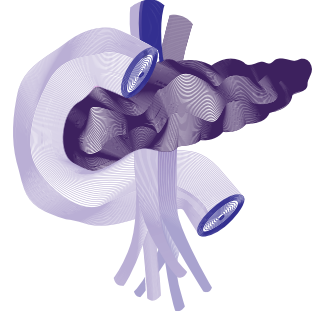# Bölüm 20

Malign Pankreas Hastalıklarında Görüntüleme

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Giriş

Pankreasın malign neoplazileri, birbirlerinden ayırt edilmelerini sağlayan görüntüleme özelliklerine sahip çeşitli histolojik tipler içeren heterojen bir gruptur. Malign tümörlerin %90'ı, duktal adenokarsinom ve nadir asiner hücreli karsinom (%1-2) dahil olmak üzere ekzokrin kökenlidir. Daha az görülen kistik neoplaziler arasında seröz ve müsinöz pankreas tümörleri (her biri %1-2) ve intrapapiller müsinöz neoplaziler (%3-5) bulunur. Pankreasın ayrıca solid psödopapiller neoplazileri (%1-%2), nöroendokrin tümörleri (%1-%2) ve pankreatoblastomu (<%1) içeren epitelyal ve mikst diferansiye tümörleri mevcuttur (1). Pankreasa metastaz yapan sekonder tümörler, tedavi kararını etkilediği için küçük ama önemli bir kategoriyi oluşturur. Klinik veriler, pankreas metastazlarının insidansının %2-5 olduğunu göstermektedir (2).

Pankreas görüntüleme yöntemleri içerisinde yer alan ultrasonografi (US), bilgisayarlı tomografi (BT), manyetik rezonans görüntüleme (MRG), pozitron emisyon tomografisi (PET) ve endoskopik ultrasonografi (EUS), fokal lezyonlarının karakterizasyonunda, ilk evrelemede, cerrahi ve terapötik planlamada ve tedavi yanıtının değerlendirilmesinde önemli role sahiptir (3, 4).

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rın pankreatik kanal ile ilişkisini net bir şekilde gösterebildiğinden ayırıcı tanıda oldukça yardımcı bir yöntemdir. PET taramaları okült metastaz hakkında bilgi sağlayabilmektedir. Hızla gelişen, yeni görüntüleme tekniklerinin yaygın olarak kullanılması ile yakın gelecekte pankreas kanseri değerlendirilmesinde radyolojik yöntemlerin mükemmel performans göstermesi beklenmektedir.

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