

BÖLÜM 1

Kanser Sonrası Nüksler ve Diğer Birincil Kanserler İçin Yaşam Yönetimi

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GİRİŞ

Yapılan çalışmalar, kanserin küratif tedavisi sonrası bireylerin çoğunlukla onkolojik ve birinci basamak sağlık hizmetlerini yeterli düzeyde alamadıklarını bildirmektedir (1-10). Küratif tedavisini tamamlayan ve aktif tedavi almayan kanser hastalarının sağlık hizmeti ihtiyaçları; nüks için sürveyans, gelişebilecek sonraki birincil kanserler için tarama, kanserin uzun vadeli, geç fiziksel ve psikolojik etkileri için izlem, müdahale ve tedavilerini içerir (11). Bu kişilerin bakımlarının sağlanmasında onkoloji ve birinci basamak sağlık hizmetlerinin iletişim ve koordinasyonu kritik öneme sahiptir.

EPİDEMİYOLOJİ

Son yıllarda geliştirilen yeni tedaviler ve erken tanı koymada etkin tetkikler sonucunda kanser hastalarının küratif tedavisi her geçen gün artmaktadır. Amerika Birleşik Devletleri'nde kanser sebebi ile küratif tedavi edilen hasta sayısı 1970 yılında yaklaşık 3 milyon civarında iken, 2019 yılında bu sayının 17 milyona çıktığı tespit edilmiştir (12-14).

Hayatta kalan kadınlar arasında en yaygın kanserler (15):

- Meme kanseri (yüzde 44)

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Potansiyel bir ailesel kanser sendromu düşündüren olgular genetik değerlendirme ve test için sevk edilmelidir.

Genetik faktörler, nüksler ve sonraki birincil kanserlerin gelişimi ile de ilişkili olabilir.

KAYNAKLAR

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