

Bölüm 5

HODGKİN LENFOMA

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GİRİŞ

Hodgkin Lenfoma (HL) ilk defa 1832 yılında Sir Thomas Hodgkin tarafından tanımlanan, genç erişkinlerde sık görülen, çoğunlukla supradiafragmatik lenf nodlarından (LN) başlayan lenfoid dokunun malign bir hastalığıdır. HL günümüzde mevcut tedavi yöntemleri ile %80'lerin üzerinde kür elde edilebilen bir hastalıktır.

EPİDEMİYOLOJİ

Hodgkin Lenfoma (HL) insidansı yaklaşık 2-3/100.000/yıldır .Tüm lenfomaların yaklaşık olarak %10'nunu ve tüm kanser vakalarının yaklaşık %0,6'sını oluşturmaktadır.

Amerika, Kanada ve Avrupa'da her yıl yaklaşık olarak 20.000 yeni HL vakası teşhis edilmektedir. Bunların da yaklaşık 6.000-7.000'i erken evre Hodgkin lenfomadır.Ülkemizde bu konuyla alakalı yapılmış bir çalışma yoktur.

Gelişmiş ülkelerde bimodal yaş dağılımı gösterir, birinci pik genç erişkinlik döneminde (yaklaşık 20'li yaşlar) diğer pik ise daha ileri yaşlarda(yaklaşık 60'lı yaşlar) görülmektedir.Gelişmekte olan ülkelerde ise HL'nın görülme sıklığı azalır, çocuklukta ve ikinci dekatta iki pik tanımlanmıştır.

Histolojik alt tiplerin görülme sıklığı ve dağılımı , coğrafi lokalizasyona ve ekonomik gelişmişlik durumuna göre değişkenlik gösterir. Gelişmekte olan ülkelerde, prognozu kötü olan histopatolojik tipler ve ileri evre olgular daha sık görülmektedir. Gelişmiş ülkelerde Nodüler Sklerozan(NS) HL sık görülürken gelişmekte olan ülkelerde ise Mikst sellüler (MS) HL daha sık görülmektedir.

Hodgkin lenfoma tüm yaş gruplarında erkeklerde kadınlara göre daha sık görülmekle birlikte nodüler sklerozan (NS) tip kadınlarda daha sık görülür. Yaş gruplarına göre histolojik alt tiplerin görülme sıklığı değişmektedir. Genç erişkinlerde Nodüler sklerozan tip, pediatrik ve ileri yaşta mikst sellüler (MS) tip daha sık görülmektedir.

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