Bölüm 4

KANSER VE FERTİLİTEYE ETKİLERİ

Merve ÖZTÜRK[1]

GİRİŞ

Kansere karşı sağ kalımın artmasıyla, yaşam kalitesinin olabildiğince normale yakın olması talebi de artmaktadır. Birçok genç kadın ve erkek için, yüksek yaşam kalitesi, üreme fonksiyonunun yeniden kazanılmasını ve bir aileye sahip olma seçeneğinin korunmasını içerir. Kanser tanılı hastaların sağ kalımını sağlayan tedavilerin sonucu, hem erkek hem de dişi üreme fonksiyonları tehlikeye girebilir. Kadınlarda, hipotalamo-pituiter gonadal (HPG) aks, over, over folikülleri ve uterus, kanser tedavilerinden doğrudan etkilenir; erkeklerde testisler, özellikle germinal epitel ve leydig hücreleri risk altındadır.

Kanser tedavisi alan kadınlar sıklıkla öykü veya tedavilerinin, sonraki gebelikleri üzerine, konjenital anomali veya bozulmuş fetal büyüme ve gelişme riski gibi olumsuz etkilere neden olabileceğinden korkmaktadır. Ayrıca hastalar kanser nüksü, infertilite, abortus ve başarılı bir gebelik elde edememe gibi riskler hakkında endişe etmektedir.

KANSER TEDAVİSİ VE FERTİLİTE DANIŞMANLIĞI

İdeal olarak, kanser tedavisi gören hastalar, gonadotoksik tedaviye başlamadan önce, fertilite koruma danışmanlığı ve tedavisi alabilirler. Gelecek nesillerin sağlığı ve fertiliteleri konusundaki endişelere rağmen, Kaliforniya ve İsveç'teki kanserden sağkalan kadın anketleri, hastaların yalnızca yüzde 50'sinin üreme sağlığı danışmanlığı aldığını bildirmiştir (1, 2); kanserden sağkalan erkeklerde bu oran daha yüksektir (2, 3). Gelecekteki üreme fonksiyonu ile ilgili hasta eğitimi, kanser tanılı bireylerin bakımının önemli bir bileşenidir. Yapılan çalışmalar, kanser tedavisi alan kadınlar arasında elektif gebelik terminasyonu oranının, tedavilerinin çocuklarını etkileyeceği korkusuyla kardeşlerinden oluşan kontrol grubuna kıyasla daha yüksek olduğunu belirtmektedir(4).

[1] Uzman Doktor, Dr. Zekai Tahir Burak Kadın Sağlığı Eğitim ve Araştırma Hastanesi, drmerveozturk@hotmail.com

Çok düşük risk / risk yok

- Radyoaktif iyot
- Metotreksat / 5-FU
- Vinkristine
- İnterferon-α

Risk bilinmeyenler

- Monoklonal antikorlar, örneğin, bevacizumab (Avastin), setuksimab (Erbitux)
- Tirozin kinaz inhibitörleri, örneğin erlotinib (Tarceva), imatinib (Gleevec)

Verilere 'safemyfertility.com' adresinden ulaşılabilinir.[2]

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[2] (ABVD, Adriamisin / bleomisin / vinblastin / dakarbazin; AC, adriamisin / siklofosfamid; BEACOPP, bleomisin / etoposid / adriamisin / siklofosfamid / onkovin / prokarbazin / prednizon; BEP, bleomisin / etoposid / sisplatin; CAF, siklofosfamid / adriamisin (doksorubisin) / fluorourasil; CEF, siklofosfamid / epirubisin / fluorourasil; CHOP, siklofosfamid / hidroksidaunomisin / onkovin / prednizon; ChlVPP, klorambusil / vinblastin / prokarbazin / prednisolon; CMF, siklofosfamid / metotreksat / fluorourasil; COP, siklofosfamid / onkovin / prednizon; KOAH, siklofosfamid / onkovin / prokarbazin / prednizon; EVA, etoposit / vinblastin / adriamisin; MF, metotreksat / 5-florourasil; MOPP, mechlorethamine / oncovin (vincristine) / procarbazine / prednisone; MVPP, mechlorethamine / vinblastine / procarbazine / prednisolon; NOVP, novantron (mitoksantron) / onkovin / vinblastin / prednizon; OEPA, onkovin / etoposit / prednison / adriamisin (doksorubisin)

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