

BÖLÜM 13

ELE GELMEYEN MEME LEZYONLARINDA RADYOKILAVUZLU KÜÇÜK LEZYON LOKALİZASYONU VE RADYOAKTİF ÇEKİRDEK İLE İŞARETLEME

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GİRİŞ

Ulusal meme tarama programının başlatılması ve daha sonra mamografi ve ultrasonografinin rutin kullanımı, ele gelmeyen meme lezyonlarının daha kesin bir şekilde tanımlanmasını sağlamıştır (1, 2).

Meme kanseri, kadınlarda en sık görülen malignitedir. Her yıl ultrason ve mamografi yoluyla saptanan meme lezyonlarının üçte biri ele gelmeyen meme lezyonlarıdır (3). Son on yılda, palpe edilemeyen lezyonların insidansı %17-58 aralığında artış göstermiştir (4). Ele gelmeyen asemptomatik tümörlerin saptanabilir olması, mortalite oranında önemli düşüşleri de beraberinde getirmiştir. Bu lezyonların ameliyat öncesi doğru lokalizasyonu da diğer önemli bir husustur (3).

Ele gelmeyen meme lezyonlarının yönetimindeki en önemli faktörler; doğruluğu yüksek lezyon lokalizasyonu, kanserli doku sınırlarının net bir şekilde belirlenmesi, temiz, sağlıklı bir sınır doku oluşturarak lezyonun tamamının çıkarılması, tedavi sürecinin kısaltılması, en uygun kozmetik görünümün sağlanması ve morbiditenin minimuma indirilmesidir (5, 6).

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Gerek RKLL, gerek RÇİ yöntemlerinden meme dışında USG eşliğinde görüntülenebilen ve işaretleme için uygun tiroid rezidüleri, paratiroid glandı ve şüpheli lenf bezlerinin eksizyonunda faydalanılabilir.

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