

Bölüm 4a

Penis Kanserinde Lazer Ablasyon



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GİRİŞ

Penis kanserinin histolojik tipi genellikle skuamöz hücreli karsinom (SHK) ve alt tipleri olup, genellikle prepusyal dokunun iç kısmının ve glans penisin epitelinden kaynaklanmaktadır. Penis kanseri nadir görülen bir kanserdir, Avrupa ve Amerika'da görülme insidansı 1/100.000 olarak belirlenmiştir (1,2).

Penis kanserinin insidansı yaşla beraber artmakta olup tepe noktasına 6. dekat- ta ulaşmaktadır (2). Ayrıca Human Papilloma Virus (HPV) prevalansının yüksek olduğu toplumlarda penis kanseri de daha sık görülmektedir (1). Penis kanseri ile İnsan Bağışıklık Yetmezliği Virüsü (HIV) ve Kazanılmış Bağışıklık Yetersizliği Sendromu (AIDS) arasında ise bir bağlantı bulunmamaktadır.

Penis kanserinin risk faktörleri aşağıda olduğu gibi sıralanabilir.

1. Fimozis (3-5)
2. Kronik penil enflamasyon ve liken sklerozis (6)
3. Psöriazis ve benzeri dermatolojik hastalıkların tedavisinde kullanılan Ultraviyole-A (UVA) fototerapi (7)
4. HPV enfeksiyonu ve kondiloma aküminata (1,8)

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Sonuç olarak penis kanserinin tedavisinde lazer ablasyon fonksiyonel ve kozmetik açıdan etkili sonuçlar vermektedir. Tis, Ta ve T1 gibi erken evre hastalarda tedavi olarak lazer ablasyon seçildiğinde lenf nodu metastazı ve kansere özgü sağkalım açısından iyi onkolojik sonuçlar alınmasına karşı lokal nüks görülme oranı yüksektir. Bu sebeple hastaların klinik olarak yakın takipte olmaları ve kendi kendine muayene ile bu takipleri desteklemeleri önerilmektedir.

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