

Bölüm 8

ENDOMETRİOZİS VE OVARYAN KANSER GELİŞİM MEKANİZMALARI

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ÜNİTE 1

Endometrioma çapının 9 cm'den büyük olması ve yaş endometriozis ilişkili over kanseri (EAOC) gelişimi için bağımsız risk faktörleridir. Erken tanı alan ve uzun süren endometriozis varlığında bu risk daha da yüksektir. EAOC gelişimine karşı OKS kullanımı, gebelik, tubal ligasyon ve histerektomi koruyucudur. Overyan endometriomalarda % 10-40 arasında atipik endometriozis saptanırken EAOC vakalarının % 60-80'inde atipik lezyonlardan gelişmektedir. Endometriotik kistlerin monoklonal geliştiği kabul edilmekle birlikte bazı yazarlar parsiyel monoklonaliteye inanırlar. Endometriozisin, doğasında var olan neoplastik oluşum da göz önüne alınırsa başta PTEN mutasyonu ve LOH ile beraber, P-53, K-ras, c-erb-2 genleri endometriozisin malign transformasyonunda önemli rol oynayan indüktörler olarak yer alırlar. Okuyucu açısından çok faydalı moleküler ve genetik bilgiler taşıyan bu bölüm yeni bilimsel çalışmalara yol göstermesi açısından önem arz etmektedir. **Editorial**

Giriş

Endometriozis, uterus dışında endometrial dokunun varlığı ile karakterize sık görülen jinekolojik bir hastalıktır. Bu durum, sıklıkla pelvik ağrı ve infertiliteye sebep olmaktadır. Reprodüktif dönemdeki kadınlarda % 5-15 sıklığında görülmeyle birlikte; ABD'de yaklaşık 5,5 milyon kişide endometriozis varlığı belirlenmiştir. Son çalışmalar

endometriozisin aslında over kanseri ile ilişkili bir tümör olduğunu desteklemektedir. Endometriozis zemininde gelişen bu karsinomlar için endometriozis ilişkili over kanseri (EAOC) tanımı kullanılmıştır. Bu karsinomlar içerisinde subtipler oluşturulmuş olup, en sık clear cell karsinomu(CCC) (% 40-55), endometrioid karsinom (EAC) (%20-40) , % 10'dan daha az sıklıkla görülen seröz ve musinöz karsinom tanımlanmıştır (1).

Bu bölümde endometriozis ile EAOC arasındaki korelasyon ve hastalığın altında yatan mekanizma değerlendirilecektir.

EAOC Hakkında Neler Biliyoruz?

Risk Faktörleri

Endometriosis ve EAOC erken menarş, geç menopoz, polimenore, düşük parite, infertilite, hormonal faktörler, dirençli inflamatuvar durum, immüno-lojik bozukluk, genetik ve çevresel ajanlara maruziyet gibi bir çok ortak risk faktörüne sahiptir (2). Geçmiş yıllarda endometriozisli kadınlar overyan kanser gelişimi açısından değerlendirilmiştir. Endometrioma çapının 9 cm'den büyük olması ve yaş EAOC gelişimi için bağımsız risk faktörleridir (3). Erken tanı alan ve uzun süren endometriozis varlığında bu risk daha da yüksektir (4). EAOC gelişimine karşı oral kontrasepsiyon kullanımı, gebelik, tubal ligasyon ve histerektomi koruyucudur (5).

proteomik belirlemede geniş bir aralıkta tanımlanmıştır (99).

Sonuç

Endometriozisin over kanseri ile ilişkisi olabileceği ile ilgili güçlü kanıtlar vardır. Oksidatif stres ve inflamasyon gibi çevresel faktörler karsinogeneizde önemli rol oynar. EAOC'nin önlenmesinde hala etkili yönetim stratejilerine ihtiyacımız vardır. Tanısal, prognostik ve tedavi seçeneklerindeki ilerlemeler bize yardımcı olacaktır. Atipik endometrioziste özel ekspresyon testlerine ihtiyaç vardır. Cerrahi tedavi hala hastalığın tedavi seçeneklerindedir. Endometriozisli hastalara gelecekte oluşabilecek riskler konusunda danışmanlık verildiğinde hastalara profilaktik cerrahi önerilebilir.

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