

Bölüm 26

ENDOMETRİOZİSİN NON-İNVAZİV TANISI

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ÜNİTE 3

Hem primer hastalığın tanısı hem de rekürrenslerin tanı ve takibinde serum, plazma, idrar örneklerinin yanı sıra spekulum muayenesi sırasında serviks veya vajinal forniksten elde edilecek örnekler ile endometriozisin non-invaziv tanısına olan ihtiyaç prenatal tanı testleri ya da kanser taramaları kadar elzemdir. Başta CA-125, sitokinler, anjiojenik faktörler ve büyüme faktörleri olmak üzere birçok marker endometriozisli kadınların periferik kanlarında kontrol gruplarına göre değişik seviyelerde farklı bulunmasına rağmen şu ana kadar ne tek bir biyo-belirteç ne de biyo-belirteç paneli endometriozis tanısında kullanılmamaktadır. Sintigrafi, proteomik, genomik ve miRNA'ların klinik kullanıma girebilmesi için çalışmaların hızlandığı şu dönemde ülkemizden de bu konuda çalışmalar yapılması önem arz etmektedir. **Editorial**

Giriş

Endometriozis; peritoneal lezyonlar, yüzeysel overyan implantlar, endometriotik kistler ve/veya üretere, mesaneye, bağırsağa yayılım yapan derin infiltratif hastalık şeklinde görülebilir. Sıklıkla pelvik adezyonlarla ilişkilidir. Bugüne kadar endometriozis varlığını semptomlar, fizik muayene, görüntüleme teknikleri veya kan testlerine dayanarak öngörmek mümkün olmamıştır (1).

Endometriozis tanısında altın standart tanı yönteminin laparoskopi olduğu ile ilgili genel bir konsensus bulunmaktadır. Laparoskopi lezyonların

direkt izlenmesini ve histolojik olarak doğrulanmasını sağlamaktadır (2,3). Maalesef laparoskopi, genel anestezi gerektiren, maliyeti yüksek ve nadir de olsa ciddi komplikasyonları olabilen bir yöntemdir. Bu nedenle endometriozis tanısı için non-invaziv tanısal testlerin tespiti amaçlanmaktadır (4-6). Hastada bu sayede kolay tanı konulabilecek ve daha az invaziv yöntem kullanarak, özellikle de biyobelirteçler, tedavinin etkinliğini değerlendirebilmemizi de sağlayacaktır (7).

Geniş araştırmalara rağmen endometriozis tanısı için şu anda hiçbir güvenilir kan testi bulunmamaktadır. Biyo-belirteçler hastalığın spesifik durumu veya sonucuyla korele olan ölçülebilir bir biyolojik işaretlerdir (8). Biyo-belirteç hipotezi hastalığın durumuna göre analitlerin, proteinlerin, mikroRNA'ların, genlerin veya diğer belirteçlerin seviyelerindeki değişiklikleri açıklar. Kanser anti-jen-125 (CA-125), sitokinler, anjiojenik faktörler ve büyüme faktörleri endometriozisli kadınların periferik kanlarında kontrol gruplarına göre değişik seviyelerde bulunmasına rağmen şu ana kadar ne tek bir biyo-belirteç ne de biyo-belirteç paneli endometriozisli kadınların tanısında geçerlilik kazanmıştır (9). Non-invaziv bir tanı testinin geliştirilmesi, bir biyo-belirtecin keşfinden klinik olarak kanıtlanmış biyo-belirteç ölçümlerine kadar uzun, zor ve kesin olmayan bir süreçtir (10-12). Bu populasyon için non-invaziv veya yarı invaziv tanı testleri, endometriozisi olmayan (cerrahi

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