

Bölüm **16**

MEME KANSERİ PATOLOJİSİ

Giray AKGÜL¹

1. GİRİŞ

Meme kanseri, dünya çapında kadınlarda tüm kancerlerin yaklaşık dörtte birini ve Batı yaşam tarzına sahip gelişmiş ülkelerdeki kancerlerin %27'sini oluşturan en yaygın insan kancerlerinden biridir. Meme kanseri erkeklerde de ortaya çıkabilir, ancak kadınlarda erkeklerden 100 kat daha yaygındır ve tanıdaki gecikmeler nedeniyle genellikle kötü prognoza sahiptir.

Meme kanseri, meme bezinin hücrelerinin herhangi birinde meydana gelebilir ve çok çeşitli morfolojik özellikler, farklı immünohistokimyasal profiller ve spesifik klinik seyri ve sonucu olan benzersiz histopatolojik alt tipleri sergileyebilir. Meme karsinomları en sık görülen malign lezyonlardır (1), ancak farklı sarkom ve lenfoma tipleri de görülebilir.

1.1 Tanı ve patoloji/moleküler biyoloji

Günümüzde mamografinin bir tarama aracı olarak geniş bir şekilde kullanımı ile daha fazla preinvaziv meme lezyonu vakası tespit edilmektedir. Dünya Sağlık Örgütü (WHO) Çalışma Grubu, bu lezyonların doğasının daha iyi anlaşılması için daha fazla klinik takip ve genetik verinin gerekliliği konusunda fikir birliğine varmıştır.

Meme kanseri tanısı klinik muayeneye, görüntüleme ve patolojik değerlendirme ile teyit edilir. Klinik muayene göğüslerin ve lokorejyonel lenf nodlarının bimanual palpasyonu içerir. Klinik olarak uzak metastaz (kemikler, karaciğer ve akciğerler) şüphesi olduğunda ilgili organın değerlendirilmesi gereklidir. Görüntülemede, bilateral mamografi ve beraberinde meme ve bölgesel lenf düğümlerinin ultrasonografisini içermelidir (2).

¹

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