

Bölüm 1

ÖZOFAGUS KANSERİNDE EPİDEMİYOLOJİ, TANI VE EVRELEME

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GİRİŞ

Özofagus ve özofagogastrik bileşkeden kaynaklanan üst gastrointestinal sistem kanserleri, özellikle düşük gelirli ülkelerde önemli bir sağlık sorunudur. Genellikle tanı anında hastalık ileri evreye ulaşmıştır. Hastaların %90'ı bu hastalığa bağlı olmaktadır.

EPİDEMİYOLOJİ

Dünya genelinde yılda yaklaşık 572 bin yeni vaka bildirilmektedir.[1] Özofagus kanserinin erkekler görülmeye oranı kadınlara göre dört kat fazladır ve mortalitesi daha yüksektir. Cancer.gov'a göre 2018 yılında Kuzey Amerika'da 18052 erkek, 4637 kadın yeni tanı almıştır. Aynı verilere göre 14564 erkek ve 3658 kadın özofagus kanserinden ölmüştür. Dünya genelinde özofagus kanseri; en sık tanı alan kanserler arasında yedinci sıradadır. Bunun tam tersine Amerika'da kanserler arasındaki görülmeye oranı %4'tür ve yeni teşhis edilen kanser vakalar arasında 20. sıradadır.[2, 3] Buradan anlaşılabileceği gibi farklı bölgelerde özofagus kanseri görülmeye oranı değişkenlik göstermektedir. En yüksek oranlar Afrika ve Doğu Asya'da bulunmaktadır.[4] Yüksek ınsidanslı bölgelerde kesin olarak belirlenmemiş olsa bile beslenme alışkanlıkları (tütsülenmiş ve salamura yapılmış et) ve mineral eksiklikleri (özellikle çinko) gibi çevresel faktörlerin rolü olduğu düşünülmektedir. Özofagus kanseri temel olarak iki hücre tipinden köken almaktadır. Bunlar skuamoz hücreli karsinom (SCC) ve adenokarsinomdur. 1960'larda SCC tüm özofagus kanserlerinin %90'ından fazlasını oluşturuyordu. Bununla birlikte, zamanla, özofagus adenokarsinomu (ağırlıklı olarak distal özofagus ve özofagogastrik bileşke tümörleri) Amerika Birleşik Devletleri'ndeki tüm özofagus kan-

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