

32.

BÖLÜM

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KANSER KÖK HÜCRE HİPOTEZİ

GİRİŞ

Kanser hücreleri, kaynak dokularının anormal versiyonları olarak kabul edilir. Kanser kök hücreleri (KKH), kendini yenileme ve pluripotency için belirsiz bir yeteneğe sahip olan ve kanserin büyük bir kısmının başlatılması ve sürdürülmesinden sorumlu olan küçük bir kanser hücresi fraksiyonu olarak karakterize edilir. Klonal evrim modeline ve tümör hücrelerinin büyük çoğunluğunun tümör büyümeyi ilerletip sürdürübildiği varsayıma dayanarak, kanser tedavisinin amacı geleneksel olarak tüm kanserli hücreleri öldürmek olmuştur. Bu teori, kök hücre özelliklerine sahip nadir bir tümör hücresi popülasyonunun tümör büyümesinden, direncinden ve nüksünden sorumlu olduğu şeklindeki kanser kök hücresi hipotezi tarafından sorgulanmıştır. Akut miyeloid lösemide (AML) ilk olarak 1997 yılında Bonnet ve Dick tarafından tanımlanan kanser kök hücrelerinin, kendi kendini yenileme ve diğer hücre tiplerine farklılaşma yeteneğine sahip normal kök hücreler açısından benzer olduğu gösterilmiştir.^{1,2} Çalışma, tümör popülasyonunun yaklaşık % 0,1-1'ini oluşturan CD34 + CD38 fenotipine sahip AML KKH'lerin farelerde AML oluşturabildiğini göstermiştir.¹ KKH hipotezi, malign glioma dahil olmak üzere birçok agresif kanserin kötü sonuçlarından sorumlu olabilecek yeni bir hedefin tanımlanması nedeniyle büyük ilgi gördü. Varsayılan KKH' ler için kanıtlar kan, meme, akciğer, prostat, kolon, karaciğer, pankreas ve beyinde tanımlanmıştır. Bu yeni hipotez, kanser hücrele-

rinin gelişigüzel öldürülmesinin uzun vadeli büyümeyi sağlayan hücrelerin (yani KKH' ler) seçici hedeflenmesi kadar etkili olmayacağı ve tedavi başarısızlığının genellikle KKH' lerin geleneksel terapilerden kaçmasının bir sonucu olduğunu ileeri sürer.

Kanser kök hücreleri, tümör yiğininin alt popülasyonunu oluşturan ve geleneksel tedavilere direnç kazanan ve birincil tümör başlatıcı hücreler olarak kabul edilir. Günümüzde, tümör heterojenliği KKH' lerden kaynaklanmaktadır ve progenitorleri, kanser tedavilerinin önünde ölümcül bir dezavantaj olarak kabul edilmektedir. Bununla birlikte, KKH' lerin biyolojisini araştıran çalışmalarдан elde edilen artan bilgi, hedeflenen tedaviler için yeni çerçeveler açacak ve hastalığın tekrarlaması şansını azaltacaktır. KKH' lerin çalışmalarından toplanan en son verileri göz önünde bulundurarak, tümör heterojenliğini ve tümör mikro ortamını kapsamlı bir şekilde tanımlamak, kanser araştırmalarını hızlandırmak için çok önemli olacaktır. Daha ileri çalışmalar, KKH' lerin kemoterapi ve radyasyon tedavisi gibi kanser tedavilerine dirence öncü bir role sahip olduğunu ve buna ek olarak, ele alınması önemli bir sorun olan artmış bir metastatik potansiyele sahip olduklarını kanıtlamıştır.³

Çeşitli belirteçler, tümör popülasyonları arasında kök hücre benzeri özelliklerine göre KKH' lerini ayırt etmektedir. Bazı belirteçler bunları kanser türleri arasında daha spesifik bir şekilde tanımlarken, diğerleri tümör başlatan hücrelerin daha

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vantaj olarak kabul edilmektedir. Bununla birlikte, KKH'lerin biyolojisini araştıran çalışmalarдан elde edilen artan bilgi, hedeflenen tedaviler için yeni çerçeveler açacaktır ve hastalığın tekrarlama olasılığını azaltacaktır.

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