BÖLÜM

6

Tiroid Nodüllerinde Tanısal Yaklaşım: Ultrasonografi ve Konvansiyonel Görüntüleme

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Özet

Ultrasonografi (US), tiroid bezinin ve nodüllerinin değerlendirilmesinde kullanılan en önemli görüntüleme yöntemidir. Nodüllerin saptanmasını ve özelliklerinin belirlenmesini sağlar ve hangi nodüllerin ince iğne aspirasyon biyopsisi (İİAB) ile değerlendirilmesi gerektiğine karar vermede rol oynar. Ayrıca İİAB ve lokal tedaviler US eşliğinde yapılmalıdır. US ile nodüllerin boyutu, ekojenitesi, yapısı, mikro ve makrokalsifikasyon varlığı, kenar düzeni, periferik halo varlığı, biçimi ve kanlanması belirlenebilir. Bu özelliklerden hipoekojenite, mikrokalsifikasyon varlığı ve kenar düzensizliği malignite ile en çok ilişkilendirilmiş özelliklerdir. Tiroid US sırasında sadece tiroid bezinin değil, boyundaki diğer yapıların da görüntülenmesi nodüllerin ayırıcı tanısında önemlidir. Ultrasonografik olarak şüpheli bir nodül varlığında boyunda patolojik görünümlü lenf nodu saptanması veya boyundaki diğer dokularda invazyon lehine görünüm olması nodülün malign olduğunu düşündürür. US bulgularının hiçbiri tek başına malign tiroid nodülünü saptamada yeterli değildir. Bu nedenle günümüze kadar birçok yazar ve kuruluş tarafından US bulgularının kullanıldığı farklı risk sınıflama sistemleri geliştirilmiştir. Bu risk sınıflamaları ile bir nodülün malign olma riskinin ve hangi nodüllerin İİAB ile değerlendirilmesi gerektiğinin belirlenmesi amaçlanmıştır. Son yıllarda geliştirilen elastosonografi (ESG), dokuların sertliğinin kalitatif ve kantitatif değerlendirilmesini sağlayan ultrasonografik bir yöntemdir. Malign lezyonların benign lezyonlara göre palpasyonla daha sert olması esasının ultrasonografik olarak yansıtılmasını sağlar. Tiroid nodüllerinin ayırıcı tanısında son 15 yıldır kullanılan bu yöntem diğer gri-skala US bulguları ile birleştirildiğinde yüksek sensitivite ve spesifiteye sahiptir. Bilgisayarlı tomografi ve manyetik rezonans görüntülemenin tiroid nodüllerin rutin tanı ve takibinde yeri yoktur. Bununla birlikte preoperatif dönemde tiroid kanserine bağlı lenf nodu metastazlarının belirlenmesi, cerrahi öncesi invaziv hastalık değerlendirilmesi ve postoperatif dönemde boyunda rekürrenslerin saptanmasında US'ye yardımcı olarak kullanılabilirler.

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