



## BÖLÜM 47

# TÜKRÜK BEZİ HASTALIKLARI

Tuba DOĞAN KARATAŞ<sup>1</sup>  
Emrah GÜNDÜZ<sup>2</sup>

### GİRİŞ

- İnsanda 3 çift majör ve yüzden fazla minor tükürük bezı mevcuttur.
- Major tükürük bezleri: Parotid, submandibuler, sublingual bezler—oral kaviteye kendilerine ait duktusları ile tükürük salgısı yaparlar.
- Tükürük bezleri seröz, seromüköz ve muköz salgı yapabilirler.
- Yetişkin bir insanda tükürük salgısı/gün 1-1.5 lt (l).

### ANATOMİ

#### Parotis bezi

- En büyük tükürük bezı
- Ortalama ağırlığı 15-40 gr
- Parankimine sıkıca yapışık bir kapsülle çevrili ve normalde non-palpable
- Fasyası, derin servikal fasyanın yüzeyel tabakasından oluşur.
- Masseter kası ve sternokleidomastoid kasın üzerinde uzanır.
- Sınırları: Anterior—Mandibula ramusu  
Posterior—Mastoid tip ve dış kulak kanali

Superior—Zigoma

Inferior—Angulus mandibula

Medial—Parafaringeal bölgeye kadar uzanır.

- Fasiyal sinir (FS) parotis bezini cerrahi anatomide süperfisiyal ve derin iki loba ayırır.
- FS, kafatasını stile mastoid foramenden terkederek bezin posteriorundan giriş yapar.
- FS—2 ana dala ayrılır: Servikofasiyal ve Temporafasiyal—Terminal Dallar (diğer adı Pes Anserinus)—5 dalı oluşturur:
  - Temporal dal
  - Zigomatik dal
  - Bukkal dal
  - Marjinal mandibuler dal
  - Servikal dallar
- Stenon (Stensen) kanalı: Buksinatör kasın yüzeyinde seyreder ve bu kası delerek 2. Molar diş seviyesine açılır.
- Intraglandüler lenf bezlerinin bulunduğu tek majör tükürük bezi
- Venöz drenajı: Retromandibuler ven
- Arteryel beslenme: Eksternal karotid arter terminal dalları (2).

<sup>1</sup> Uzm. Dr. Malatya Eğitim ve Araştırma Hastanesi, KBB Hastalıkları Kliniği, tuba44dogan@gmail.com

<sup>2</sup> Uzm. Dr. Malatya Eğitim ve Araştırma Hastanesi, KBB Hastalıkları Kliniği emrah.gunduz.ctf@gmail.com

## KAYNAKLAR

1. Snow, J.B., Wackym, P.A. ( 2014 ).*Ballenger's Kulak Burun Boğaz Baş ve Boyun Cerrahisi*. ( Mustafa GEREK, Çev. Ed. ). Ankara: Palme Yayıncılık
2. Snell RS. (2004). *Clinical Anatomy for Medical Students*. (7<sup>th</sup> edition). Washington: SMHS
3. Lin YF, Patel MZ. (2014) *ENT Board Prep* (1<sup>th</sup> edition) NY: Springer. DOI: 10.1007/978-1-4614-8354-0
4. Pasha R, Golub SJ. (2017) *Otolaryngology-Head and Neck Surgery : Clinical Reference Guide* (5<sup>th</sup> edition). USA: Plural Publishing Inc.
5. Brill SJ, Gilfillan RF. Acute parotitis associated with influenza type A : A report of twelve cases. *N Engl J Med* 1977;296:1391-2.
6. Brook I. Diagnosis and management of parotitis. *Arch Otolaryngol Head Neck Surg* 1992;118:469-71.
7. Knee TS, Ohl CA. Salmonella parotitis with abscess formation in a patient with human immunodeficiency virus infection. *Clin Infect Dis* 1997;24:1009-10.
8. Hemenway WG, English GM. Surgical treatment of acute bacterial parotitis. *Postgrad Med* 1971;50:114-9.
9. Raad II, Sabbagh MF, Caranasos CJ. Acute bacterial sialadenitis: A study of 29 cases and review. *Rev Infect Dis* 1990;12:591-601.
10. Spiegel R, Miron D, Sakran W, Horovitz Y. Acute neonatal suppurative parotitis: Case reports and review. *Pediatr Infect Dis J* 2004;23:76-8.
11. Todoroki Y, Tsukahara H, Kawatani M, et al. Neonatal suppurative parotitis possibly associated with congenital cytomegalovirus infection and maternal methyldopa administration. *Pediatr Int* 2006;48:185-6.
12. Leerdam CM, Martin HC, Isacs D. Recurrent parotitis of childhood. *J Pediatr Child Health* 2005;41:631-4.
13. Fazekas T, Wiesbauer P, Schroth B, et al. Selective Ig A deficiency in children with recurrent parotitis of childhood. *Pediatr Infect Dis J* 2005;24:461-2.
14. Antoniades D, Harrison JD, Epivatianos A, Papanayotou P. Treatment of chronic sialadenitis by intraductal penicillin or saline. *J Oral Maxillofac Surg* 2004;62:431-4.
15. Nouraei SA, Ismail Y, MCLean NR, et al. Surgical treatment of chronic parotid sialadenitis. *J Laryngol Otol* 2006;14:1-5.
16. Brad W N, Douglas DD, Carl MA (2002). *Oral and Maxillofacial Pathology*. (2<sup>nd</sup> edition). Canada: Elsevier
17. Fowler CB, Brannon RB. Subacute necro-  
tizing sialadenitis: report of 7 cases and a review of the literature. *Oral Surg Oral Med Oral Pathol*. 2000;89:600-609.
18. Joseph AR, James JS, Richard CKJ. (2003). *Oral Pathology (Clinical Pathologic Correlation)* (4th edition). St. Louis: WB Saunders
19. Moutsopoulos HM. Sjögren's syndrome, sicca syndrome: current issues. *Ann Intern Med* 1980;92:212-226.
20. Larry J P, Edward E, James R. H. (2003). *Diagnosis and Management of Salivary Gland Disorders Contemporary Oral and Maxillofacial Surgery*. (4th edition): Mosby.
21. Grases F, Santiago C, Simonet BM. Sialolithiasis : Mechanism of calculi formation and etiologic factors. *Clin Chin Acta* 2003;334:131-6.
22. Suleiman SI, Hobsley M. Radiological appearances of parotid duct calculi. *Br J Surg* 1980;67:879-80.
23. Cuhruk Ç, Yılmaz O. Parotis bezi kitlelerinde tanı yöntemleri. *KBB ve Baş boyun cerrahisi derg*. 1993;1:155-198.
24. Marchal F, Dulguerov P, Lehmann W. Interventional sialoendoscopy. *N Engl J Med* 1999;341:1242-3.
25. Nahlieli O, Baruchin AM. Endoscopic technique for the diagnosis and treatment of obstructive salivary gland diseases. *J Oral Maxillofac Surg* 1999;57: 1394-401.
26. Seifert G, Miehlke A, Haubrich J. (1986). *Diseases of salivary glands*. NY: Thieme inc.
27. Hoşal N. On yılda parotis tümörleri ameliyatlarından aldığımız sonuçlar. *Hacettepe Tip Cerrahi Bülteni*. 1971;4:226-231.
28. Vories AA, Ramirez SG. Warthin's neoplasm and cigarette smoking. *South Med J* 1997;90:416-8.
29. Yoo GH, Eisele DW, Askin FB. Warthin's neoplasm: A 40-year experience at The Johns Hopkins Hospital. *Laryngoscope* 1994;104:799-803.
30. Batsakis JG, Luna MA. Low-grade and high-grade adenocarcinomas of the salivary duct system. *Ann Otol Rhinol Laryngol* 1989;98:162-3.
31. Ellis GB, Auclair PL. (2008). Mucoepidermoid carcinoma. *Tumors of the salivary glands*. Washington: in Silverberg SG
32. Garden AS, Weber RS, Morrison WH. The influence of positive margins and nerve invasion on adenoid cystic carcinoma of the head and neck treated with surgery and radiation. *Int J Radiat Oncol Biol Phys* 1995;32:619-26.
33. Spiro RH, Huvos AG, Strong EW. Adenoid cystic carcinoma: Factors influencing survival. *Am J Surg* 1979;138:579-83.
34. Fordice J, Kershaw C, El-Naggar A. Adenoid cystic carcinoma of the head and neck: Pre-

- dictors of morbidity and mortality. *Arc Otolaryngol Head Neck Surg* 1999;125:149-52.
- 35. Spiro RH, Huvos A. Stage means more than grade in adenoid cystic carcinoma. *Am J Surg* 1992;164:623-8.
  - 36. Colmenero C, Patron M, Sierra I. Acinic cell carcinoma of the salivary glands. A review of 20 cases. *J Craniomaxillofac Surg* 1991;19:260-6.
  - 37. Spiro RH, Huvos AG, Strong EW. Acinic cell carcinoma of salivary origin. A clinicopathologic study of 67 cases. *Cancer* 1978;41:924-35.
  - 38. Spiro RH, Armstrong J, Harrison L, Geller NL, Lin SY, Strong EW. Carcinoma of major salivary glands. *Arch. Otol. Head and Neck Surg.* 1989;115:316-320.