

Gastroözofageal Bileşkede Küçük Hücreli Karsinom ve Plorokardiyak Karsinom İle İlişkisi

Association With Small Cell Carcinoma and Pylorocardiac Carcinoma of the Gastroesophageal Junction

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Giriş

Özofagus ve mide kanserleri, dünya çapında önemli sağlık problemleridir. Bunlar genellikle ölümcül hastalıklardır. Mortalite oranı özofagus kanserlerinde % 84, gastrik kanserlerde % 75 oranındadır [1]. Özofagogastrik bileşke (GEJ) ve gastrik kardiya adenokarsinomun belirgin şekilde yüksek ve hızla yükselen insidansa sahip anatomik bölgeleri temsil eder [1].

Gastroözofageal kanserler (özofagus, gastrik ve gastroözofageal bileşke lezyonları) dünya genelinde ölümcül olma potansiyeli yüksek, nispeten nadir olup, oldukça agresiftir [2]. Mide karsinomu, dünya genelinde kansere bağlı ölümlerin ikinci sebebi özofagus kanseri ise altıncı olarak bildirilmiştir [3,4]. Geçtiğimiz yıllarda, üst gastrointestinal (GI) trakt tümörlerinin sık görülen yerlerinin belirgin bir değişimi, hem bilimsel araştırmayı hem de modern klinik pratiği etkilemektedir [1,5].

Son yıllarda mide kanserlerinin anatomik lokalizasyonlarında sıklık açısından farklılık olduğu dikkati çekmiştir [6]. Distal yerleşimin azaldığı, buna karşın proksimal yerleşimin arttığı görülmüştür. Kardiya ve GEJ kanserlerinin insidans hızında hızlı bir artışa neden olmuştur [6,7].

Özofagus kanserinin ise distalde sık görüldüğü ve sıklıkla gastroözofageal bileşke yerleşimini de tercih ettiği görülmüştür (GEJ) [2]. Gelişmiş ülkelerde, kardiya kökenli mide kanseri insidansı, özofagus kanserine benzer davranış gösterdiği izlenmiştir [8,9].

Kaynaklar

1. Jemal A, Bray F, Center MM, et al. Global cancer statistics. *CA Cancer J Clin* 2011; 61:69.
2. NCCN. NCCN guidelines - esophageal and esophagogastric cancers (excluding proximal 5 cm stomach) NCCN clinical practice guideline in oncology - version 2.2013. Available at: http://www.nccn.org/professionals/physician_gls/pdf/esophageal.pdf.
3. Moehler M, Gockel I, Roessler HP, Arnold D, Trarbach T, Thomaidis T, Klautke G, Rodel C, Brenner B, Lang H. et al. Prospective, open, multi-centre phase I/II trial to assess safety and efficacy of neoadjuvant radiochemotherapy with docetaxel and oxaliplatin in patients with adenocarcinoma of the esophagogastric junction. *BMC Cancer*. 2013;13:75.
4. Yang L, Wang LS, Chen XL, Gatalica Z, Qiu S, Liu Z, Stoner G, Zhang H, Weiss H, Xie J. Hedgehog signaling activation in the development of squamous cell carcinoma and adenocarcinoma of esophagus. *Int J Biochem Mol Biol*. 2012;3:46–57.
5. Cellini F, Valentini V. Targeted therapies in combination with radiotherapy in oesophageal and gastroesophageal carcinoma. *Curr Med Chem*. 2013.
6. Blot WJ, Devesa SS, Kneller RW, Fraumeni JF Jr. Rising incidence of adenocarcinoma of the esophagus and gastric cardia. *JAMA*. 1991;265:1287–1289.
7. PDQ. PDQ® Gastric cancer treatment. Bethesda, MD: National Cancer Institute. Date last modified 02/15/2013. Available at: <http://cancer.gov/cancer-topics/pdq/treatment/gastric/HealthProfessional>.
8. Crew KD, Neugut AI. Epidemiology of upper gastrointestinal malignancies. *Semin Oncol*. 2004;31:450–464.
9. Powell J, McConkey CC, Gillison EW, Spychal RT. Continuing rising trend in oesophageal adenocarcinoma. *Int J Cancer*. 2002;102:422–427.
10. Rusch VW. Are cancers of the esophagus, gastroesophageal junction, and cardia one disease, two, or several? *Semin Oncol*. 2004;31:444–449.
11. Buas MF, Vaughan TL. Epidemiology and risk factors for gastroesophageal junction tumors: understanding the rising incidence of this disease. *Semin Radiat Oncol*. 2013;23:3–9.
12. Devesa SS, Fraumeni JF Jr. the rising incidence of gastric cardia cancer. *J Natl Cancer Inst*. 1999;91:747–749.
13. Ku GY, Ilson DH. Chemotherapeutic options for gastroesophageal junction tumors. *Semin Radiat Oncol*. 2013;23:24–30.
14. Parfitt JR, Miladinovic Z, Driman DK. Increasing incidence of adenocarcinoma of the gastroesophageal junction and distal stomach in Canada -- an epidemiological study from 1964-2002. *Can J Gastroenterol = Journal canadien de gastroenterologie*. 2006;20:271–276.
15. Ozawa S, Ando N, Kitagawa Y, Kitajima M. [Does incidence of carcinoma of the esophagogastric junction increase?] *Nihon Geka Gakkai zasshi*. 1998;99:542–546.
16. Marsman WA, Tytgat GN, ten Kate FJ, van Lanschot JJ. Differences and similarities of adenocarcinomas of the esophagus and esophagogastric junction. *J Surg Oncol*. 2005;92:160–168.
17. Ronellenfitsch U, Schwarzbach M, Hofheinz R, Kienle P, Kieser M, Slinger TE, Burmeister B, Kelsen D, Niedzwiecki D, Schuhmacher C. et al. Preoperative chemo (radio) therapy versus primary surgery for gastroesophageal adenocarcinoma: systematic review with meta-analysis combining individual patient and aggregate data. *Eur J Cancer*. 2013;49(15):3149–3158.
18. Cellini F, Ramella S, Ciresa M, Porziella V, Meacci E, Fiore M, Trodella L, D'Angelillo RM. Role of induction therapy in esophageal cancer. *Rays*. 2005;30:329–333.
19. Brenner B, Tang L, Shia J, Klimstra D, Kelsen D. Small cell carcinomas of the gastrointestinal tract: clinicopathological features and treatment approach. *Semin Oncol*. 2007;34:43–50.
20. National Comprehensive Cancer Network. NCCN Practice Guidelines in Oncology Small Cell Lung Cancer. 2010.
21. Yun JP, Zhang MF, Hou JH, Tian QH, Fu J, Liang XM, Wu QL, Rong TH. Primary small cell carcinoma of the esophagus: clinicopathological and immunohistochemical features of 21 cases. *BMC Cancer*. 2007;7:38.
22. O'Kane AM, O'Donnell ME, Shah R, Carey DP, Lee J. Small cell carcinoma of the appendix. *Jan 15;2008 World J Surg Oncol*. 6:4.
23. Zhu W, Jian-Yang M, Jun-Jie Y, Yong-Fan Z, Shang-Fu Z. Primary small cell carcinoma of esophagus: Report of 9 cases and review of literature. *World J Gastroenterol*. 2004;10(24):3680–3682.
24. McKeown F. Oat cell carcinoma of the esophagus. *J Path Bact*. 1952;64:889–891. Sun K, He J, Cheng G, Chai L. Management of primary small cell carcinoma of the esophagus. *Chin Med J*. 2007;120(5):355–358.
25. Hudson E, Powell J, Mukherjee S, Crosby TDL, Brewster AE, Maughan TS, Bailey H, Lesser JF. Small cell oesophageal carcinoma: an institutional experience and review of the literature. *Br J*

- Cancer. 2007;96:708–711.
26. Ku GY, Minsky BD, Rusch VW, Bains M, Kelsen DP, Ilson DH. Small-cell carcinoma of the esophagus and gastroesophageal junction: review of the Memorial Sloan-Kettering experience. *Ann Oncol.* 2008;19:533–537.
 27. Casas F, Ferrer F, Farrus B, Casals J, Biete A. Primary small cell carcinoma of the esophagus: a review of the literature with emphasis on therapy and prognosis. *Cancer.* 1997;80:1366–1372.
 28. Lv J, Linag J, Wang J, Wang L, He J, Xiao Z, Yin W. Primary Small Cell Carcinoma of the Esophagus. *J Thorac Oncol.* 2008 ;3(12):1460-5.
 29. Medgyesy CD, Wolff RA, Putnam JB Jr, Ajani JA. Small cell carcinoma of the esophagus: the University of Texas M.D. Anderson Cancer Center experience and literature review. *Cancer.* 2000;88:262–267.
 30. Pantvaidya GH, Pramesh CS, Deshpande MS, Jambhekar NA, Sharma S, Deshpande RK. Small cell carcinoma of the esophagus: the Tata Memorial Hospital experience. *Ann Yhorac Surg.* 2002;74:1924–1927.
 31. Yau KK, Siu TW, Wong DC, Chau H, Li CAN, Law BKB, Li MKW. Non-operative management of small cell carcinoma of the esophagus. *Dis Esophagus.* 2007;20(6):487–490.
 32. Bennouna J, Bardet E, Deguiral P, Douillard JY. Small cell carcinoma of the esophagus. Analysis of 10 cases and review of the published data. *Am J Clin Oncol.* 2000;23(5):455–459.
 33. Ho JK, Herrera GA, Jones JM, Alexander CB. Small cell carcinoma of the esophagus: evidence for a unified histogenesis. *Hum Pathol.* 1984;15:460–468
 34. Xu C, Zheng Y, Lian D, Ye S, Yang J, Zeng Z. Analysis of microRNA expression profile identifies novel biomarkers for non-small cell lung cancer. *Tumori.* 2015;101:104–10. <https://doi.org/10.5301/tj.5000224>.
 35. Shrestha S, Hsu SD, Huang WY, Huang HY, Chen W, Weng SL, Huang HD. A systematic review of microRNA expression profiling studies in human gastric cancer. *Cancer Med.* 2014;3:878–88.
 36. Zhu J, Zheng Z, Wang J, Sun J, Wang P, Cheng X, Fu L, Zhang L, Wang Z, Li Z. Different microRNA expression profiles between human breast cancer tumors and serum. *Front Genet.* 2014;5:149. Farazi TA, Hoell JI, Morozov P, Tuschl T. MicroRNAs in human cancer. *Adv Exp Med Biol.* 2013;774:1–20.
 37. Ribeiro-dos-Santos Â, Khayat AS, Khayat AS, Silva A, Alencar DO, Lobato J, Luz L, Pinheiro DG, Varuzza L, Assumpção M, Assumpção P, Santos S, Zanette DL, Silva WA, Jr, et al. Ultra-deep sequencing reveals the microRNA expression pattern of the human stomach. *PLoS One.* 2010;5:e13205.
 38. Chen J, Zhang K, Xu Y, Gao Y, Li C, Wang R, Chen L. the role of microRNA-26a in human cancer progression and clinical application. *Tumour Biol.* 2016;37:7095–108.
 39. Pritchard CC, Cheng HH, Tewari M. MicroRNA profiling: approaches and considerations. *Nat Rev Genet.* 2012;13:358–69.
 40. Lauwers GY, Carneiro F, Graham DY. Gastric carcinoma. In: Bowman FT, Carneiro F, Hruban RH, eds. *Classification of Tumours of the Digestive System.* Lyon:IARC;2010. in press.
 41. Hamabe Y, Ikuta H, Yanamoto M. Clinicopathological features of esophageal cancer with simultaneously associated with gastric cancer. *Jour Surg Oncol* 1998;68:179-182.
 42. Koide N, Adachi W, Koike S. Synchronous gastric tumor associated with esophageal cancer. A retrospective study of 24 patients. *Am Jour Gastr* 1998;93:758-762.
 43. Schirmer CC, Gurski R, Castro MA, Madruga GS, Brentano L. Neoplasias associadas ao carcinoma epidermóide do esôfago. *Rev Ass Med Brasil* 1997;43(4):335-9.
 44. Kato Y, Sugano H, Wada J, Nakamura K. Histogenesis of the cardiac carcinoma (adenocarcinoma) in comparison with that of the antral carcinoma (in Japanese). *Stomach Intestine* 1978;13: 1509–15.
 45. Mulligan RM, Rember RR. Histogenesis and biologic behaviour of gastric carcinoma. *Arch Pathol* 1954; 58: 1–25.
 46. Ghotli ZA, Serra S, Chetty R. Clear cell (glycogen rich) gastric adenocarcinoma: a distinct tubulopapillary variant with a predilection for the cardia/gastro-oesophageal region. *Pathology* 2007; 39: 466–9.