

# BÖLÜM 16

## ERKEKTE MEME KANSERİ TEDAVİSİ

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### GİRİŞ

Erkek meme kanserinin (EMK) biyolojik durumu, kadın meme kanserinden (KMK) belirgin farklı olmasına rağmen çoğu tedavi protokolleri, KMK'leri için yapılan randomize kontrollü çalışmalar temelinde oluşturulmuştur ve tedavi stratejileri, KMK'lerindeki gibi; cerrahi tedavi, sistemik tedavi, endokrin tedavi ve radyoterapiyi içermekle birlikte esas tedavi yöntemi cerrahidir (1).

### Cerrahi Tedavi

Erkek meme kanseri, kadınlardaki meme kanserine (MK) benzer olarak TNM (tümör, nod, metastaz) evreleme sistemine göre sınıflandırılır. Tanıdaki gecikmeye bağlı olarak tüm EMK'lerinin %40'ı tanı esnasında 3. ve 4. evrededir (2).

Erkek meme kanseri nadir görüldüğünden, optimum tedaviyi tanımlayan prospektif klinik çalışmalar eksiktir. Erkeklerde tümörün durumuna bağlı olarak; basit mastektomi, modifiye radikal mastektomi ve radikal mastektomiler uygulanabilmektedir (3). Erkek meme kanserlerinin çoğunun daha invaziv bir cerrahi prosedür olan mastektomiye (M) gitmesinin nedeni; erkeklerde meme boyutunun küçük ve çoğu kanserin subareoler lokalizasyonda olması, ileri evrede ve ileri yaşlarda tanı konulması ve tümörün agresif biyolojide olmasından dolayıdır (4,5-7).

Erkek meme kanseri hastalarının çoğu mastektomi ile tedavi edilirken, kadın hastaların ise 2/3'ü meme koruyucu cerrahi (MKC) ile tedavi edilmektedir. Kadın

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