

BÖLÜM 22

POSTMASTEKTOMİ RADYOTERAPİ UYGULAMALARI

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GİRİŞ

Meme kanseri kadınlarda en sık görülen kanserdir. İnvaziv meme karsinom tanımlı hastalarda, güncel cerrahi seçenekleri meme koruyucu cerrahi (MKC) veya mastektomidir. Mastektomi daha çok lokal ileri veya multifokal hastalıkta, MKC ile kozmetik sonucu kötü olabileceği düşünülen vakalarda ya da hastanın kişisel tercihi sonucunda uygulanabilmektedir. Postmastektomi radyoterapiyi (PMRT) araştıran faz III randomize çalışmalar otuz yıl önce başlatılmıştır. Ancak modern radyoterapi tekniklerinin gelişimi, çeşitli doz fraksiyon şemalarının kullanılabilirliği ve hastaların sistemik tedavi almaları bakımından önemini korumaktadır. Mastektomi sonrasında cerrahi sınır pozitifliği, rezidüsü bulunanlar, T3 veya T4, >3'den fazla aksiler lenf nodu pozitifliği, deri ve fasya tutulumu, aksilla lenf nodlarında ekstrakapsüler invazyonu olan vakalarda adjuvan radyoterapi (RT) endikasyonu bulunmaktadır (1). Ancak T1-T2 olup 1-3 lenf nodu pozitifliği olan olgularda PMRT tartışmalıdır. Danimarka 82b ve 82c ve Kanada çalışmalarında PMRT'nin lokal kontrolde ve genel sağkalımda artış sağlaması üzerine, mastektomi sonrası adjuvan RT endikasyonu artmıştır (2-4). NCCN, 4 ve daha üzeri lenf nodu pozitifliğinde PMRT'yi kategori 1, 1-3 lenf nodu pozitifliğinde PMRT'yi kategori 2A kanıt düzeyi olarak belirlemiştir (5). EBCTCG (Early Breast Cancer Trialists' Collaborative Group) metaanalizinde, 1-3 lenf nodu pozitif vakalarda, PMRT hem rekürrens olasılığını hem de mortaliteyi azaltılmıştır (6). Bu durum, RT endikasyonunun biraz daha genişletilmesine neden olmuştur.

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SONUÇ

Meme kanserinde mastektomi sonrası adjuvan radyoterapi, lokal kontrolü ve sağkalımı arttırmak amacı ile uygulanmaktadır. Lokal bölgesel yineleme riski yüksek olgularda adjuvan radyoterapi eklenmesi yineleme oranlarını belirgin olarak azaltmaktadır. Mastektomi sonrası tek başına kemoterapi uygulamalarının lokal bölgesel hastalıkta yetersiz kaldığı pek çok çalışmada gösterilmiştir. Postmastektomi adjuvan radyoterapi uygulanan olgularda risk gruplarının belirlenmesi gerekmektedir. Bu nedenle, multidisipliner yaklaşım ile belirlenmiş hastaya özgün yaklaşımların oluşturulabilmesi önem taşımaktadır.

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