

BÖLÜM 3

EPİTELYAL OVER KANSERİ SAPTANAN HASTALARDA YÖNETİM

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GİRİŞ

Over kanseri gelişmiş ülkelerde ikinci en yaygın, gelişmekte olan ülkelerde ise üçüncü en yaygın jinekolojik malignitedir.¹ Ovaryan malignitelerin %95'i epitelyal kaynaklı iken, %5'i ise farklı hücre tiplerinden (germ hücreli, seks kord stromal) köken almaktadır (Tablo 1).

Epitelyal over kanserinin en yaygın histolojik alt tipi olan yüksek dereceli seröz karsinom, histoloji ve klinik davranıştaki benzerliklerinden ötürü, tuba uterina ve periton seröz karsinomu ile yakından ilişkili olarak kabul edilir. Bazı uzmanlar bu kanserlerin hepsinin tuba uterinadan kaynaklandığını öne sürer. Bu bölümde epitelyal over kanseri üzerinde durulacak ve over kanseri tanısı, evrelemesi ve yönetiminden bahsedilecektir.

TANI

Epitelyal over kanserleri, histolojik olarak teşhis edilmektedir. Bu değerlendirme, over, tuba veya periton biyopsilerinin, cerrahi olarak çıkarılmasından sonra gerçekleştirilir. Ancak ileri evre hastalığı olanların yaklaşık %20'sini oluşturan grupta tanı; görüntüleme eşliğinde biyopsi, parasentez veya torasentez ile elde edilen doku veya sıvıya dayanarak konmaktadır.

Yüksek dereceli seröz epitelyal over kanseri, tubal ve peritoneal karsinomlar, benzer davranış karakterleri ve tedavileri nedeniyle tek bir klinik olarak kabul edildiği gibi, ortak bir patogenez olduğuna dair kanıtlar vardır. Geleneksel ola-

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