

BÖLÜM 14

SUBGLOTTİK LARENKS KANSERLERİ VE TEDAVİ YAKLAŞIMLARI



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GİRİŞ

Larenks kanseri tüm vücut kanserlerinin %2- 5'ni ve baş-boyun kanserlerinin ise %25'ini oluşturmaktadır. En sık 5-7. dekadlar arasında ve erkek cinsiyette daha sık görülmektedir. Larenks kanserleri en sık glottik bölgede görülmektedir. Glottik bölgeden subglottik bölgeye uzanım gösteren kanserler nispeten sık gözlenirken, primer subglottik bölge kanserleri oldukça nadir izlenmektedir. Subglottik bölgenin primer kanserleri ile subglottik uzanımlı glottik kanserlerin klinik olarak ayırımı yakın zamanda kadar yetersiz endoskopik ve radyolojik görüntüleme nedeniyle zordu. Bu nedenle bu bölge tümörleri ile ilgili literatürde çok fazla bilgi yoktur. Larenks kanserlerin sadece %1.0-8.7'si subglottik bölgede oluştur (1,2,3). Potansiyel kanserojenlerin üst solunum yolu mukozası tarafından tutulumu nedeniyle kanserojenlerin subglottik bölgeyle minimum temasından dolayı primer subglottik bölge kanserlerinin nadir olduğu düşünülmektedir. Subglottis bölgesinin en sık görülen primer malignitesi skuamöz hücreli karsinom (SCCa) olup, tüm tümörlerinin %55 ila %66'sını oluşturur. İkinci sıklıkta adenoid kistik karsinom gözlenir (Şekil 1) (4,5,6). Ayrıca kondrosarkom, atipik karsinoid, küçük hücreli nöroendokrin karsinom, lenfoma ve plazmasitom vakaları da bildirilmiştir. Lezyonların %75 olarak en sık çıkış yeri krikoid kıkırdağın arka laminasıdır (7).

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