

BÖLÜM 88

BENİGN VE MALİGN KARACİĞER TÜMÖRLERİ

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Karaciğer arteriyel sistem, portal sistem ve hepatik venöz sistem ile ilişkisi nedeni ile vasküler bakımdan oldukça zengin bir organdır. Bu özelliği nedeni ile hem benign hem de malign kitle lezyonlarına ev sahipliği yapmaktadır. Özellikle son yıllarda ultrasonografi (USG), bilgisayarlı tomografi (BT), manyetik rezonans görüntüleme (MRG) gibi radyolojik görüntüleme yöntemlerindeki gelişmeler ve bu tetkiklerin yaygın kullanımı ile beraber asemptomatik hastalarda insidental olarak da karaciğer kitlelerinin tanısında artış görülmüştür. Karaciğer tümörleri, primer benign, primer malign ve sekonder (metastatik) tümörler olarak incelenebilir. Benign lezyonların görülme sıklığı malign lezyonlardan daha fazladır ve altta yatan kronik karaciğer hastalığı olmaması durumunda genellikle karaciğerde saptanan solid yapılar benign karakterdedir.

BENİGN KARACİĞER KİTLELERİ

Karaciğer benign lezyonlarını epitelyal kökenli, non epitelyal kökenli ve diğerleri olarak köken aldıkları hücreye göre sınıflandırılabilir (Tablo 1).

Tablo 1. Köken aldığı hücreye göre karaciğer benign lezyonları

<i>Epitelyal</i>	
Hepatosellüler	Fokal nodüler hiperplazi Hepatosellüler adenom Nodüler rejeneratif hiperplazi Yağdan korunmuş alan
Kolanjiosellüler	Biliyer adenoma Biliyer hamartoma
<i>Non-epitelyal</i>	
Mezenkimal	Hemanjiom Anjiomyolipom Lipom
<i>Diğer</i>	Peliosis Hepatis İnflamatuvar Psödötümör

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