

## Bölüm 6

# GASTROİNTESTİNAL STROMAL TÜMÖRLERDE RADYOTERAPİ VE KEMOTERAPİ

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### GİRİŞ

Gastrointestinal stromal sarkom, gastrointestinal sistemin (GİS) en yaygın mezenterik tümörü olup tüm GİS tümörlerinin %1'inden azını oluşturmaktadır (1). Myenterik pleksusta bulunan pacemaker hücreleri olarak bilinen Cajal interstisyel hücrelerinden veya sindirim sisteminin düz kas hücrelerinden kaynaklanır (2).

GİS'te mide %60, jejunum ve ileum %30, duodenum %5, rektum %2-3 ve kolon %1-2, özofagusta < %1 görülür. Nadiren ekstraperitoneal olarak omentum, mezenter ve retroperitoniumda görülebilir (3,4). Metastaz alanı tipik olarak intra-abdominaldir ve sıklıkla periton ve karaciğeri tutar. Genelde tek lezyondur ancak bazen multiple lezyonlar ailesel veya neurofibromatozis GİST ve Carney triadında görülebilir (5,6).

GİS'te erken evrede semptom vermezler ve genelde başka amaçla yapılan işlemler sırasında tanı alırlar. İleri evrelerde en sık karın ağrısı, gis kanama ve karında palpable kitle ile başvurabilir (7).

Hastalığın lokasyon ve dağılımını saptamak için bilgisayarlı tomografi veya magnetik rezonans inceleme gerekir. Tanı biyopsi ile konur. Ancak lezyon tamamen çıkarılabilir şüpheli bir lezyon ise biyopsi şart değildir.

Immunohistokimyasal (İHK) olarak CD117 (c-kit) ve/veya DOG1 ekspresyonu GİST tanısını sağlar. İHK olarak CD117 pozitifliği KIT ve PDGFRA mutasyonel statustan bağımsızdır (8). KIT ve PDGFRA wild tip hastalar, İHK olarak suksinat dehidrogenaz protein yapabilir (9).

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Güncel tedavi kılavuzları radyoterapiyi terapötik bir seçenek olarak ele almaktadır veya sadece ağırlı kemik metastazlarında, ağrının hafifletilmesi için önerilmektedir (21,22). GIST tarihsel olarak radyoterapiye dirençli ya da minimal yanıt veren bir hastalık olarak kabul edilmiştir (44,45). Ancak seçilen hastalarda yarar sağlayabilir (46-48).

## **Sonuç**

GİST primer tedavisi cerrahidir. Cerrahi sonrası yüksek riskli hastalara 3 yıl adjuvan imatinib tedavisi verilmelidir. Metastatik hastalıkta imatinib , sunitinib , regarofenib gibi tirozin kinaz inhibitörleri ile belirgin sağkalım uzaması sağlanmıştır.

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