

41. BÖLÜM

TİROİD HASTALIKLARININ TANISINDA NÜKLEER TIP UYGULAMALARI

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TİROİD HASTALIKLARINDA RADYONÜKLİD TANI

Radyonüklidlerin, tiroid hücreleri tarafından uptake'i ve organifiye edilmesi ve bozunurken yaydıkları fotonların gama kamera veya gama sintilasyon probu ile tespiti sonucu, tiroid sintigrafisi ve radyoaktif iyot (RAİ) uptake testinden edinilen bilgiler sayesinde, Nükleer Tıp uzmanlık dalı tiroid hastalıklarının tanısında önemli bir rol üstlenmektedir. İyi bir görüntüleme ve oluşan görüntünün doğru yorumlanması için hastanın tıbbi öyküsü, fizik muayene bulguları, serum tiroid stimulan hormon (TSH), tiroksin (T4) ve triiyodotironin (T3) ölçümleri, ultrasonografi (USG) gibi görüntüleme sonuçları ve hastalığa dair ön tanıların, sintigrafik görüntüleme öncesi klinisyenler tarafından Nükleer Tıp uzmanına bildirilmesi önemlidir. Nükleer Tıp uzmanı tarafından bu bilgilerin tiroid sintigrafisi ve radyoaktif iyot (RAİ) uptake ölçümü sonuçları ile beraber değerlendirilmesi gerekmektedir (1). Mümkünse tiroid glandının USG ile anatomik korelasyonunun çekim öncesi veya çekim sonrası uygun bir zamanda Nükleer Tıp uzmanı tara-

findan gerçekleştirilmesi, tiroid glandının anatomik ve fonksiyonel tam bir bütünlük içerisinde değerlendirilmesini sağlayacaktır.

Tiroid sintigrafisi ve RAİ uptake ölçümü endikasyonları(2)

1. Tiroid glandının boyutunun ve lokalizasyonunun değerlendirilmesi.
2. Klinik veya subklinik hipertiroidi ile uyumlu anormal tiroid fonksiyonlarının değerlendirilmesi.
3. RAİ uptake' ine göre hipoekojen tiroid glandının değerlendirilmesi.
4. Şüpheli fokal kitle veya diffüz tiroid hastalıklarının değerlendirilmesi.
5. Tiroid ektopisi ve konjenital hipotiroidinin değerlendirilmesi.
6. Klinik muayene ve/veya görüntüleme ile saptanan tiroid nodüllerinin fonksiyonlarının değerlendirilmesi.
7. Multinodüler guatr'da ince iğne aspirasyon biyopsisi (İİAB) ile ileri inceleme gerektiren şüpheli hipofonksiyone 'soğuk' nodüllerin saptanması.

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