

34. BÖLÜM

TRANSANAL ENDOSKOPIK MİKROCERRAHİ (TEM)

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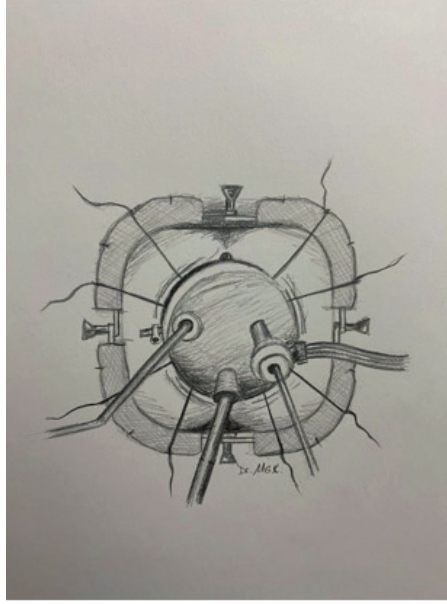
Giriş

Transanal endoskopik mikrocerrahi (TEM) 1980'lerde Almanya da ilk olarak Profesör Gerhard Buess tarafından geliştirilmiştir.¹ Dr. Buess, Almanya'daki Richard Wolf Company ile işbirliği yaparak transanal endoskopik cerrahi için gerekli özel aletleri geliştirdi. TEM ilk olarak 1983'te rutin klinik uygulamaya sokulmuştur.² Daha sonra dünya çapında birçok merkezde eğitim kursları açılarak, pek çok ülkeye tanıtılmış ve tekniğin yaygınlaşması sağlanmıştır. Ayrıca, klinik faydalarını ve avantajlarını desteklemek için kendi klinik deneyimlerini paylaşmışlardır.³

Rektal tümörlerin transanal eksizyonu geleneksel aletlerin erişim güçlükleri nedeniyle sınırlıdır. TEM üst rektumdaki lezyonları daha iyi ortaya koyar, lezyonun kaliteli görüntülemesi ve kolay erişim sağlar.⁴ TEM ile orta ve üst rektumdaki hemen hemen her adenom çıkarılabilir. TEM karsinoid, rektal prolapsus, rektal divertiküler hastalık, erken evre (pT1) karsinomlar ve rektal kanserlerin palyatif rezeksiyonunda deneysel olarak kullanılmaktadır.⁵ Ameliyat öncesi hastalara yapılacak olan Bilgisayarlı Tomografi (BT), Manyetik Rezonans Görüntüleme (MRG) ve Endorektal Ultrasonografi (USG) ile yapılacak evreleme sonrası uygun vakalara lokal eksizyon kararı verilir.^{6,7} Radikal cerrahiyi savunanlar, rektumun çevresindeki lenfatik drenaj ile birlikte eksizyonunun en iyi tedavi şansı

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Resim 1. Anal rektoskop takılan hastanın operasyon görüntüsü

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