

# 11.

## BÖLÜM

# İnvaziv Ürotelyal Karsinom

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## GİRİŞ

İnvaziv tümörler; bazal tabakayı aşmış tümörlerdir. Ürotelyal karsinomlarda invazyon; papiller bir neoplazinin tabanı (pTa) veya stromasında seçilebildiği gibi, karsinoma in-situ (KIS) ile birliktelik gösterebilir. Rutinde incelenen ürotelyal karsinomların yaklaşık %30 'u invazivdir; KIS ile karşımıza çıkabileceği gibi, bir kısmında öncül lezyon seçilmeyebilir. Bu konuda hipotezlerden biri; invaziv tümörlerin zaman içerisinde yüzeyi ülser etmesi sonucunda, in situ tümörlerin ortadan kalkmasıdır (1,2).

## İNVAZİV ÜROTELYAL KARSİNOMDA EVRELEME

### Genel Özellikler

Tümörlerin patolojik evrelemesi hem makroskobik hem de mikroskobik değerlendirme ile yapılmalıdır (3). Makroskobik incelemede pek çok tümör tek, solid ve polipoid kitle olarak karşımıza çıkmaktadır. Ülser bazı tümörlerde seçilebilmektedir (Şekil 1). Kimi tümör ise sesil olup, mesane duvarını belirgin bir şekilde infiltre etmektedir.

Mikroskobik incelemede, bazal membranı aşmış tümör hücreleri genellikle desmoplastik stroma içerisinde, tek tek veya gruplar halinde; yuvalar, kordonlar veya trabeküller oluşturarak mesane duvarını infiltre eder. Bazı tümörler daha diffüz ve tabakalar halinde çoğalır; bu tümörler içinde de kısmi yuva ve kümeler seçilebilmektedir.

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