

## Bölüm 17

# OKÜLER YÜZEY NEOPLASTİK HASTALIKLARI

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Kübra ARSLAN<sup>2</sup>

Oküler yüzeyin neoplastik hastalıkları kornea, konjonktiva ve karinkülde yer kaplayan tümörlerdir. Başlıca skuamöz epitel, melanositik tümörler ve konjonktival stromanın lenfositik hücrelerinden kaynaklanırlar.

### AJOKÜLER YÜZEY SKUAMÖZ NEOPLAZİ

Oküler yüzey skuamöz neoplazisi (OYSN) konjonktiva, karinkül ve korneanın hafif displazisinden intraepitelyal neoplazisine (yani karsinoma in situ) ve invaziv skuamöz hücreli karsinomuna kadar değişen çok çeşitli bir hastalık grubunu temsil eder.<sup>1</sup>

OYSN, epitelin displastik tutulum derecesinin patolojik incelenmelerine göre benign, preinvaziv ve invaziv OYSN olarak derecelendirilir:

Psödoepitelyomatöz hiperplazi, benign kalıtsal intraepitelyal diskeratoz ve papilloma; benign OYSN,

Konjonktival/korneal intraepitelyal neoplazm (grade I-III); preinvaziv OYSN,

Skuamöz karsinom, mukoepidermoid karsinom; invaziv OYSN. olarak değerlendirilir.

OYSN en sık olarak ekvatora yakın bölgelerde gözlenmektedir bu yüzden gelişimde ultraviyole ışınlarının önemli bir yeri olduğu düşünülmektedir. Sıklığı 0,02-3,5/100000 arasında değişir. OYSN'lerin ortaya çıkmasında suçlanan başlıca risk etkenleri<sup>2</sup> ultraviyole ışınları(UV-B), petrol ürünleri, sigara, yaş(erişkin ve ileri yaş), cinsiyet(erkek), HIV<sup>3-4</sup>, kseroderma pigmentosum<sup>5</sup>, kronik immünosupresif ajan kullanımı ve kesinliği kanıtlanmamış olmakla birlikte HPV'dir<sup>6-7</sup>. Olguların bazlarında p53 geninde mutasyona<sup>8</sup> rastlanmıştır, HPV gibi risk faktörü olması tartışımalıdır.

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