Bölüm 2

SERÖZ TÜMÖRLER

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SERÖZ KİSTADENOM, ADENOFİBROM VE OVERİN YÜZEY PAPİLLOMU

Tanım

Seröz kistadenom, adenofibrom ve yüzey papillomu, tuba epiteline benzeyen overin benign seröz tümörleridir (1).

Epidemiyoloji ve Etiyoloji

Bu tümörler overin en sık görülen seröz tümörleridir. Benign over epitelyal tümörlerinin 2/3'ünü oluştururlar. Herhangi bir yaş grubunda görülebilmekle birlikte hastaların ortalama yaşının 40 ile 60 arasında değiştiği bildirilmiştir. Etyolojisi bilinmemektedir (2).

Patogenez

Patogenezinde stromal fibromatöz hücrelerde ve nadiren epitelyal hücrelerde DNA kopya sayısındaki değişikliklerin rol alabildiği gösterilmiştir (3-4).

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Ayırıcı tanı

Yüksek dereceli seröz karsinomlar, belirgin nükleer atipi (nükleer boyutta >3 kat artış), belirgin nükleollerin varlığı ve artmış mitoz (>12 mitoz/10 BBA, ancak genellikle çok daha yüksek) ile düşük dereceli seröz karsinomlardan ayrılır. Düşük dereceli seröz karsinomlar genellikle mikropapilla ve küçük yuvalarla daha düzenli bir yapıya sahiptir; solid alanlar nadirdir. Tipik olarak p53 mutasyonlarından ve dolayısıyla yüksek dereceli seröz karsinomlarin p53 boyama paterninden yoksundur (2).

Overin yüksek dereceli endometrioid karsinomları seröz karsinomlar ile morfolojik olarak benzeyebilir. Bu olgularda immunhistokimyasal incelemede güçlü ve yaygın östrojen ve progesteron reseptörü ekspresyonu, wild tip p53 boyanması, WT-1 ve p16 negatifliği endometrioid karsinom lehine değerlendirilmelidir (2).

Overin berrak hücreli karsinomu seröz karsinomlardan farklı olarak tanı anında daha düşük evrelerdedir ve genellikle unilateraldir. Tübulokistik patern, papiller yapılarda hiyerarşik dallanma veya belirgin hücresel tomurcuklanma/stratifikasyon olmaması, berrak hücreler, hobnail hücreler ve stromal hyalinizasyon berrak hücreli karsinom lehine bulgulardır. Ayrıca bu tümörler yaygın olarak yüksek dereceli nükleusların yokluğu; düşük mitotik oran, Napsin A ve HNF1p pozitifliği, östrojen reseptörü ve WT1 negatifliği; wild tip p53 boyaması sergilerler (5, 62).

Overe metastaz yapan tümörler, özellikle kolorektal karsinomlar sıklıkla müsinöz veya endometrioid tip over karsinomlarını taklit etmelerine rağmen, nadiren seröz karsinoma benzer morfoloji sergileyebilirler. CK7/CK20 boyanma paterni bu olguların ayırımında yardımcı olur (2).

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