20.
BÖLÜM

ADRENAL BEZ TÜMÖRLERİNİN PATOLOJİK SINIFLANDIRILMASI VE EVRELENMESİ

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GİRİŞ

2017'de yayımlanan Dünya Sağlık Örgütü'nün (DSÖ) 4.basımında adrenal tümörler, tümörlerin klinik davranışları ve genetik özellikleri göz önünde bulundurularak iki ana gruba ayrılmıştır (1). (Tablo 1)

Tablo 1. Adrenal bez ve ekstraadrenal paraganglianın tümörlerinin DSÖ sınıflaması

I-Adrenal Korteks Tümörleri	II-Adrenal Medulla Tümörleri ve Ekstraadrenal Paraganglialar
Adrenal Korteks Karsinomu	Feokromositoma
Adrenal Korteks Adenomu	Ekstraadrenal Paragangliom
Seks Kord Stromal Tümörler	Nöroblastik Tümörler
Adenomatoid Tümör	Kompozit Feokromositoma
Mezenkimal ve Stromal Tümörler	Kompozit Paraganglioma
Hematolenfoid Tümörler	
Sekonder Tümörler	

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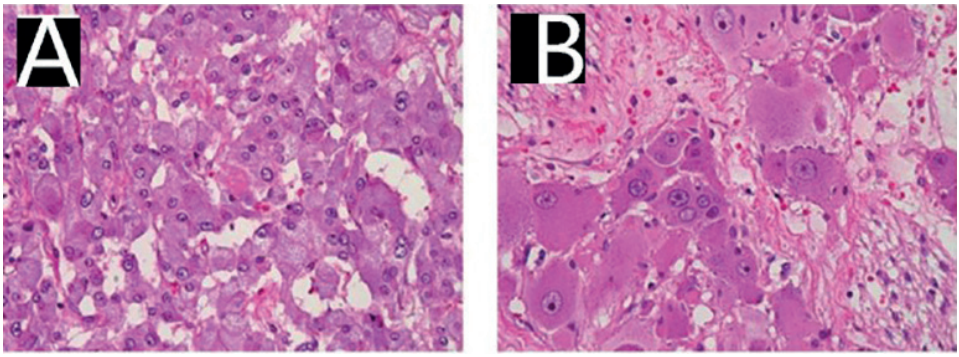
Çoğunlukla ganglionörom ile birliktelik görülmüştür (46). Kompozit feokromositomaların görülme sıklığı, kompozit paragangliomlardan yaklaşık 3 kat fazladır. Kompozit feokromositomalarda hafif bir kadın baskınlığı görülürken, kompozit paragangliomda her iki cinsiyette görülme sıklığı aynıdır (45). Histopatolojik ve immünohistokimyasal özellikleri kompozit tümörü oluşturan tümörlerle aynıdır (46). (Şekil 11) (47).



Şekil 11. A.Feokromositoma B.Ganglionöroma

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