

31. BÖLÜM

GASTROENTEROPANKREATİK NÖROENDOKRİN TÜMÖRLERİN KARACİĞER METASTAZLARINDA CERRAHİ YAKLAŞIMLAR

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GİRİŞ

Nöroendokrin tümörler(NET) çeşitli anatomik bölgelerdeki nöroendokrin hücrelerden kaynaklanan çok çeşitli hücre yapısına sahip tümörlerdir. NET'in toplumda görülme oranı çok nadir olup 2/100000 iken tüm tümörlerin ancak %2'ni temsil etmektedir(1). Ancak otopsi esnasında yapılan muayenelerde bu oran çok daha yüksek olup %8-10 arasında bulunmuştur. Bu ise aslında toplumda bir çok kişide asemptomatik NET'lerin olabileceğini göstermektedir(2). Nispeten nadir tümörler olarak kabul edilirler; ancak, otopsi kaynaklı araştırmaları destekler şekilde NET epidemiyolojisi üzerine yapılan daha yakın tarihli çalışmalarında da NET'lerin son 30 yılda artan bir insidans ve yaygınlık gösterdiği tespit edilmiştir(3). Bu her geçen gün insidansının daha da artması NET'lerin aslında daha yaygın olduğu fikrini desteklemektedir. NET'ler vücutta nöroendokrin hücrelerin bulunduğu bütün dokulardan kaynaklanabilirken yaklaşık %67 oranında gastrointestinal sistem (GIS) kaynaklı iken ikinci en sık %22 oran ile akciğerde görülür. Hastaların tanısı konduğunda büyük oranda metastatik durumdadır(4). NET'in gastrointestinal tümörleri; mide, ince barsak, apendiks, kolon ve rektum tümörleri karsinoid tümörler olarak bilinirken pankreas kaynaklı NET'ler ise endokrin pankreas tümörleri olarak bilinir. Ancak bu iki tümör grubu birbirinden büyük klinik farklılıklarına rağmen hücre yapısındaki benzerlikler nedeniyle gastroenteropankreatik nöroendokrin tümörler (GEP-NET'ler) olarak aynı başlık altında gruplandırılmıştır(5). GEP-NET gastrointesinal sistemin 2. sıklıkta en sık rast-

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