

GİRİŞ

Barrett Özofagus (BÖ), özefagusun distal kısmındaki skuamöz epitelin, intestinal metaplazi içeren kolumnar epitel ile yer değiştirmesiyle karakterize edilen bir durumdur. Bu durum ilk olarak, alt özefagusta kolumnar epitel hattını tanımlayan Tilleston tarafından belirtilmiştir. 1950 yılında Norman Barrett, bu lezyonu “intratorasik midenin eşlik ettiği doğuştan kısa özefagus” olarak tanımlamış; ancak ilerleyen yıllarda bu lezyonun distal özefagusta anormal kolumnar epitel dizilimi olduğu anlaşılmıştır (1).

Barrett metaplazisi genellikle kronik inflamasyonun bir sonucu olarak ortaya çıkar. Asit, safra ve diğer zararlı maddelerin neden olduğu kronik reflü özefajiti, bu metaplaziyi tetikler. Çoğu hastada reflüye bağlı mukozal hasar, skuamöz hücrelerin yeniden oluşmasıyla tamir edilirken; bazı hastalarda ise bu tamir süreci, kolumnar hücrelerin skuamöz hücrelerin yerini almasıyla sonuçlanır.

Barret özofagus, kronik GÖRH'nün ciddi bir komplikasyonu olarak kabul edilir ve özofagus adenokanseri (ÖAK) için öncül bir lezyon olması nedeniyle klinik olarak büyük önem taşımaktadır. GÖRH sonucunda BÖ gelişimi nadir değildir; ge-

nel popülasyonda BÖ prevalansı %1-2 iken, gastroözofageal reflü hastalarında bu oran %10-15'e kadar çıkabilir (2, 3).

Barret özofagus tanısı, endoskopik ve histolojik kriterlerin bir kombinasyonu ile konulmaktadır. American Gastroenterological Association ve American College of Gastroenterologists kılavuzlarına göre, BÖ tanısı için intestinal metaplazi (İM) bulunması gereklidir (4). The British Society of Gastroenterology (BSG) kılavuzunda ise, özefagogastrik bileşkenin yukarısına uzanan en az 1 cm somon-pembe görünümlü mukozanın varlığı BÖ tanısı için yeterli olup İM şartı aranmaz (5). European Society of Gastroenterology (ESGE) kılavuzuna göre, gastroözofageal bileşkenin 1 cm yukarısında kolumnar epitelin endoskopik olarak görülmesi ve İM'nin patolojik olarak doğrulanması gereklidir (6). Barret özofagus, uzun segment (özefagusta görülen kolumnar mukoza uzunluğunun >3 cm olması) ve kısa segment (özefagusta görülen kolumnar mukoza uzunluğunun <3 cm olması) olarak sınıflandırılmaktadır.

Barret özofagus, premalign bir hastalık olup, metaplazi, düşük dereceli displazi (LGD), yüksek dereceli displazi (HGD) ve invazif karsinoma evrelerinden geçerek özofagus adenokanserine

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yacaktır. BÖ'un patofizyolojisinin daha iyi anlaşılması ve tedavi yaklaşımlarının optimize edilmesi, gelecekteki araştırmalar için önemli bir odak noktası olmaya devam etmektedir.

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