BÖLÜM 10

ÖZEFAGUS KANSERİNDE RADYOTERAPİNİN ROLÜ

Hatice COŞKUN[1]

GİRİŞ

Özefagus kanseri 2020 yılında, yaklaşık 604.000 yeni vaka ve 544.000 ölümle önde gelen kanser türleri arasında 7. sırada yer almakta ve dünya genelinde önemli bir sağlık problemi oluşturmaktadır (1). Özofagus kanserleri, genellikle kötü prognoza sahip agresif tümörlerdir.

ANATOMİSİ

Özofagus beş bölgeye ayrılmaktadır.

Servikal özofagus: Krikoid kıkırdağın alt ucundan torasik girime kadar uzanır ve kesici dişlerden itibaren yaklaşık 20 cm'dir.

Üst torasik özofagus: Torasik girimden trakeal bifürkasyona kadar uzanır ve kesici dişlerden itibaren yaklaşık 20-25 cm'dir.

Orta torasik özofagus: İntratorasik kısımdır. Kesici dişlerden itibaren yaklaşık 25-30 cm'dir.

Alt torasik özofagus: Alt intratorasik özefagus kısmıdır ve kesici dişlerden itibaren yaklaşık 30-40 cm'dir.

Özofagogastrik bileşke: Batın içi özefagus, özefaaagogastrik bileşke ve midenin özefagogastrik bileşkeye uzanan 5cm proksimalindeki tümörleri içermektedir.

HİSTOLOJİSİ

Özofagus kanseri, skuamöz hücreli karsinom (SCC) ve adenokarsinom olmak üzere iki ana histolojik tipe ayrılır. SCC proksimal/yukarı özofagusta sık görülürken, distal özofagus veya gastroözofageal bileşkede adenokarsinom daha sık gö-

[1] Uzm. Dr., Adana Şehir Hastanesi, Radyasyon Onkolojisi Kliniği, drhaticecoskun@hotmail.com, ORCID iD: 0000-0003*0146-8185

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