

BÖLÜM 2

RETROPERİTONEAL SARKOMLAR VE TEDAVİ YAKLAŞIMI

Turan Eray SEVEN¹

GİRİŞ

Retroperitoneal Sarkomların Tanımı

Retroperitoneal sarkomlar (RPS), mezankimal hücre kökenli, retroperitoneal boşlukta gelişen nadir ve biyolojik olarak heterojen tümörlerdir. Retroperitoneal bölge; böbrekler, büyük damar yapıları, pankreasın bir kısmı, duodenumun üçüncü ve dördüncü kısımları, adrenal bezler ve lenfatik dokular gibi birçok hayati organ ve yapıyı içerir. Bu anatomik yerleşim, RPS'lerin semptom vermeden uzun süre büyümesine imkân tanır. Erken dönemde hastalar sıklıkla asemptomatiktir; tanı çoğunlukla tesadüfi görüntüleme sırasında ya da kitle boyutunun artarak komşu organlara bası semptomları oluşturmasıyla konur. Ağrı, karında dolgunluk, palpe edilebilen kitle ve gastrointestinal semptomlar en sık başvuru nedenleridir(1-5).

Tüm Sarkomlar İçindeki Oranı ve Epidemiyoloji

Yumuşak doku sarkomları, tüm malignitelerin yalnızca %1'ini oluşturur. RPS'ler, bu sarkomların %15-20'sini temsil eden nadir bir alt gruptur. RPS'ler, yılda 100.000 kişi başına 0,5 ila 1 yeni vaka görülmesi beklenen nadir tümörlerdir(1,4).

Histolojik Alt Tipler

RPS'lerin histolojik dağılımı heterojendir ve biyolojik davranış alt tipe göre değişir. En sık görülen alt tipler şunlardır:

Liposarkom

RPS'lerin en yaygın histolojik tipidir ve büyük serilerde tüm olguların yaklaşık %63'ünü oluşturur(6). Histolojik alt tipleri şunlardır:

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şemaları da araştırılıyor). CDK4 amplifikasyonu DDLPS/WDLPS'te yaygın; pal-bosiklib gibi CDK4/6 inhibitörleriyle faz II sinyal verileri mevcut. MDM2 hedef-lemesinde ise faz III MANTRA (milademetan) beklenen eşiği karşılayamadı; bu alan biyobelirteç zenginleştirme ve kombinasyon tasarımlarına kayıyor(58-62).

Teknoloji ve Planlama: Daha İyi Görüntüleme, Daha İsaletli Cerrahi/RT

Gelişmiş görüntüleme ve RT planlama tekniklerine (IMRT, dikkatli hedef hacim tanımı) ilişkin sistematik derlemeler; özellikle liposarkomda lokal kontrol için hassas hedefleme ve multidisipliner planlama gereğini destekliyor(63).

Ağlar ve Veri Paylaşımı

TARPSWG/EORTC gibi platformlar; ortak protokoller, kalite metrikleri ve prospektif veri paylaşımıyla kanıt kalitesini artırıyor. Gelecek dönem, nadir histoloji alt gruplarında çok-merkezli, histoloji-spesifik çalışmalara yaslanacak(1).

Özet Mesaj

Yakın gelecekte RPS yönetimi; merkezileşmiş bakım + kalite güvencesi, histoloji-odaklı kişiselleştirme, seçilmiş olguda RT'nin rafine kullanımı, perioperatif KT'nin rolünü netleştirecek STRASS-2 ve moleküler hedeflere yönelen (CDK4, MDM2 vb.) denemeler etrafında şekillenecek(55,57).

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