1.
BÖLÜM

KARDİYOONKOLOJİYE GENEL BAKIŞ

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Günümüzde kanser hastalığının tedavisinde ilerlemeler bu hastaların yaşam sürelerini uzatmıştır. Eş zamanlı olarak kanser tedavisine bağlı komplikasyonlar da bu hastalarda morbidite ve mortalitenin önemli nedenleri olarak gözükmektedir. Kanser tedavisine bağlı yan etkilerden en sık görüleni ise kardiyovasküler hastalıklar (KVH)'dır. Kanseri yenen hastalarda tedavi yan etkilerine bağlı kardiyovasküler nedenli erken morbidite ve mortalitedeki artış endişe verici boyutlardadır. Bu artış kemoteröpatiklere bağlı kardiyotoksisiteyle ve yüksek kardiyovasküler hastalık riskine sahip bireylerde; kardiyovasküler hastalık progresyon hızının artmasıyla ilişkilendirilebilir.

Kardiyo-onkoloji kavramı ilk olarak antrasiklinin doz bağımlı kardiyotoksik etkilerinin gözlemlenmesi sonucu tanımlanmıştır. (1)

O dönemde antrasikline bağlı kardiyomiyopati gelişiminin önlenmesi için doz modifikasyonlarının yapıldığı tedavi rejimleri önerilmiştir. Erken dönemde yapılan bu çalışmalar aynı zamanda kardiyotoksisite mekanizmalarını daha iyi anlamayı ,daha erken tanı koyup kardiyotoksisiteyi engellemeyi ve tedavi yöntemleri geliştirmeyi hedeflemişlerdir. İlk gözlemlerden günümüze kadar kardiyotoksisite mekanizmaları, serum kardiyak biyobelirteçleri, kardiyak görüntüleme teknikleri ve kanser hastalarında kalp koruyucu stratejiler ile ilgili pekçok araştırma yapılmış ve pekçok yeni veri elde edilmiştir.(2-6)

Son dönemde kardiyoonkoloji; kanser hastalarının bakımını iyileştirmek için; bu hastalardaki kardiyovasküler sistem hastalıklarının tanı ve tedavisiyle multidisipliner yaklaşımlarla ilgilenen bir uzmanlık dalı olarak tanımlanmaktadır. (7)

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tedir. Ancak kanser hastalarının yarısından fazlasında perikardiyal hastalıklar kanser hastalığının kendisiyle değil KT, RT ve fırsatçı enfeksiyonlar gibi başka nedenlere bağlı olarak izlenmektedir (41,7,42).Perikardit tanısında perikardiyal kalınlaşma ve inflamasyon en iyi kardiyak MR ile görüntülenebilir. Ancak klinik pratikte ucuz ve kolay ulaşılabilir olması nedeniyle tanı aracı olarak en sık ekokardiyografi kullanılır. Ayrıca BT görüntüleme kalsifikasyonların eşlik ettiği perikarditlerde yardımcı tanı testi olarak kullanılabilir (7,43,44).

Bu bölümde kısaca bahsedilen kanser tedavisine bağlı kardiyovasküler komplikasyonlar ve bu komplikasyonlarla ilgili tanısal yaklaşımlar bu kitabın sonraki bölümlerinde ayrıntılı olarak ele alınacaktır.

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