

Bölüm 3

PROSTAT KANSERİ TANISINDA MULTİPARAMETRİK MANYETİK REZONANS GÖRÜNTÜLEME EŞLİĞİNDE PROSTAT FÜZYON BİYOPSİSİ

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GİRİŞ

Prostat kanseri, erkeklerde cilt kanserleri haricinde en sık bulunan kanserdir ve akciğer kanseri sonrası en sık kansere bağlı ölüm nedenidir (1) (2) (3). Prostat kanseri teşhisi, yüksek prostat spesifik antijen (PSA) düzeyleri ve parmakla rektal muayene (PRM) sonrası şüpheli görülen olgularda transrektal ultrason (TRUS) eşliğinde alınan standart 12 kor biyopsinin patolojik incelemesi ile konulur. Biyopsi sonrası bazı patolojik ve klinik sonuçlara göre tekrar biyopsi endikasyonu oluşmaktadır. Bunları maddeler halinde

1. Yükselen ve yüksek seviyede sebat eden PSA
 2. Atipik küçük asiner proliferasyon (ASAP)
 3. Multipl yüksek derece prostatik intraepitelyal neoplazi (HGPIÑ ≥ 3)
 4. Şüpheli PRM
 5. HGPIÑ'e bitişik gland yapılarının olması
 6. İzole bulgu olarak intraduktal karsinom
- şeklinde sıralayabiliriz (4).

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