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Malign Biliyer Darlıklar

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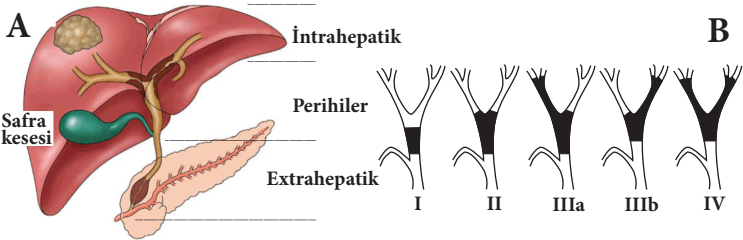
GİRİŞ

Biliyer maligniteler üç kategoriye ayrılmıştır: (i) intra ve ekstrahepatik safra yolu karsinomları (kolanjiyokarsinomlar), (ii) safra kesesi karsinomları ve (iii) ampulla vateri karsinomları. Biliyer kanserler yüksek derecede agresif seyirli olup tanı sonrası ortalama yaşam süresi 24 aydır (1).

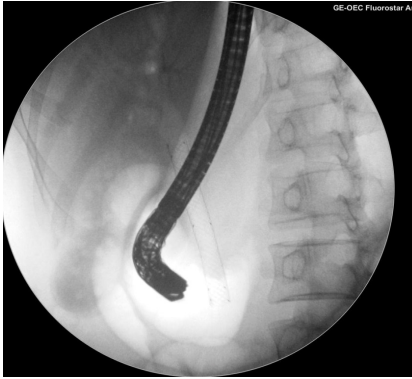
KOLANJİOKARSİNOMLAR

■ Giriş ve Sınıflama

Kolanjiyokarsinomlar, en sık safra yolu malignitesi ve hepatosellüler karsinom (HCC)'den sonra en sık ikinci primer hepatik malignitedir. Kolanjiyokarsinomlar biliyer ağaçtaki anatomik lokalizasyonuna göre intrahepatik, perihiler ve distal kolanjiyokarsinom olarak sınıflandırılır. İntrahepatik kolanjiyokarsinomlar karaciğer parankiminden kaynaklanır ve ikinci sıra safra yollarının üstünde görülür. Perihiler veya hiler kolanjiyokarsinomlar ikinci sıra safra yolları ile sistik kanalın birleşim yeri arasında kalan bölgedeki malignitelerdir. Distal kolanjiyokarsinomlar sistik kanal birleşim yerinden sonraki bölgede görülen malignitelerdir (Şekil 1-A). Perihiler kolanjiyokarsinomlar "Klatskin tümörleri" olarak da adlandırılır ve Bismuth-Corlette sınıflamasına göre 4 tipe ayrılır (Şekil 1-B). Kolanjiyokarsinomların %50-60'ı perihiler, %20-30'u distal ve yaklaşık %20'si intrahepatik tiptedir (2).



Şekil 1. Kolanjiyokarsinomların sınıflandırılması: A, İntrahepatik, perihiler ve distal kolanjiyokarsinom; B, Bismuth-Corlette hiler kolanjiyokarsinomlarının tip 1-4 olarak sınıflandırılması (3)



Resim 3. Pankreas karsinomu olan hastada metalik stentleme

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