



Bölüm 29

Endometrium Kanseri

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Epidemiyoloji, Risk Faktörleri

Endometrium kanseri (EK) kadınlarda akciğer, meme ve kolorektal kanserlerden sonra dördüncü sırada görülmektedir. Gelişmiş ülkelerde en sık görülen jinekolojik kanserdir; gelişmekte olan ülkelerde ise serviks kanserinden sonra ikinci sırada yer almaktadır. Tipik olarak 55- 85 yaşları arasındaki postmenopozal kadınlarda görülür. 40 yaşın altında tanı alan hastaların oranı %5'in altındadır. Tanı anındaki ortanca yaş 62, ölüm yaşı ise 70'tir (1).

2018 yılında tüm dünyada 382,069 kadın EK tanısı almıştır. 5 yıllık % 34,7 prevelans (445805 vaka) ile Avrupa'da en yaygın görülen jinekolojik kanserdir (2). Ülkemiz 2016 yılı kanser verilerinde kadınlarda en sık görülen dördüncü kanser olmuştur (3).

EK için risk faktörleri Tablo 1'de özetlenmiştir (4,5).

Evreleme

Uterin karsinom ve karsinosarkom için evreleme tablo 2'de, uterin leiomyosarkom ve endo-

metriyal stromal sarkom için evreleme tablo 3'de gösterilmiştir. T kategorilerinin tanımları (TNM evreleme AJCC/UICC 8. Baskı), Fédération Internationale de Gynécologie et d'Obstétrique (FIGO) 2009 tarafından kabul edilen evrelere karşılık gelmektedir (6,7,8). 1988 yılından sonra daha detaylı bir derecelendirme sistemi kabul edilmiş, bu sistem özel histolojik varyantlar ve nükleer atipinin önemini ortaya koymuştur (Tablo 4). Evrelere göre sağ kalım oranları tablo 5'te gösterilmiştir.

Tanı (Histopatoloji) / Ayırıcı Tanı / Gerekli Tetkikler / Diğer Tedavi Seçenekleri

Endometrium kanserleri histomorfolojik özellikleri, patogenezleri ve prognozları bakımından iki farklı tipte tanımlanmıştır (9). Bu iki grup arasındaki farkların özeti tablo 6'da gösterilmiştir.

2013 yılında Kanser Genom Atlası (TCGA), endometrium kanserlerinin kapsamlı bir entegre moleküler genetik analizini yayınladı. Farklı prognostik sonuçlara ve klinikopatolojik özelliklere sahip tümör hücresi genomik mimari-

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