# Bölüm 5

# WİLMS TÜMÖRÜ (NEFROBLASTOM)

**Demet AKDENİZ ÖDEMİŞ**[1]
**Hülya YAZICI**[2]

## 1.EPİDEMİYOLOJİSİ

Wilms tümörü (Nefroblastom), tüm pediyatrik tümörlerin yaklaşık %90'ını oluşturan, çocukluk çağında 1/10.000 oranında en yaygın olarak görülen embriyonal böbrek tümörüdür [(1)]. Wilms tümörlerinin çoğu tek bir böbreğin etkilendiği unilateral özellikte tümörlerdir. Tümör çoğunlukla tek bir odakta bulunmakla beraber Wilms tümörlü çocukların yaklaşık %5-10'unda aynı böbrekte birden fazla noktada yani multifokal tümörler de görülebilir. Wilms tümörü olan çocukların yaklaşık %5-7'si her iki böbreğin de tutulduğu bilateral özellik gösterir [(2)].

Amerika'da her yıl yaklaşık 650 yeni Wilms tümörü vakası görülmektedir [(3)]. Wilms tümörünün diğer ülkelerdeki insidansı Amerika'daki ile benzerdir. Türkiye'de ise 2002-2008 yılları arasındaki pediatrik kanser kayıtlarında yapılan döküme göre böbrek tümörleri %5,5 oranında olup (655 olgu), çocukluk çağı kanser sıralamasında 7. sıradadır. Olguların 616'sı Wilms tümörü olup böbrek tümörlerinin %94.1'ini oluşturmaktadır [(4)]. Wilms tümörü çoğunlukla 5 yaş altı çocuklarda oluşur ve tanı sırasında ortalama yaş sporadik vakalar için 3.5 yaş, kalıtsal vakalar için 2 yaştır [(5, 6)]. Yetişkinlerde nadir bulunmasına rağmen rapor edilmiş vakalar da mevcuttur [(7-10)]. Amerika'da Wilms tümörü riski Afrikan-Amerikan çocuklarda beyaz çocuklara göre daha yüksek, Asya-Amerikan çocuklarda ise daha düşük düzeydedir. Kız çocuklarındaki risk erkek çocuklara göre daha yüksektir. ABD'de genel olarak 5 yıllık sağkalım %92 düzeyindeyken, dünyanın az gelişmiş bölgelerinde sağkalım oranının %78 civarında olduğu bildirilmektedir [(3)]. Türkiye'deki 5 yıllık olaysız sağkalım (EFS) oranları I, II ve III evreler için sırasıyla %100, %90 ve %51 şeklinde verilmektedir [(11)].

[1] Dr., İstanbul Üniversitesi, Onkoloji Enstitüsü, Temel Onkoloji Anabilim Dalı, Kanser Genetiği Bilim Dalı, akdenizdemet@gmail.com

[2] Prof. Dr., İstanbul Üniversitesi, Onkoloji Enstitüsü, Temel Onkoloji Anabilim Dalı, Kanser Genetiği Bilim Dalı, hulyayazici67@gmail.com

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