

Bölüm 9

Malign Parotis Tümörleri

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GİRİŞ

Tükürük bezi kaynaklı tümörler oldukça çeşitlidir. Her birinin kendine özgü klinik, patolojik özellikleri vardır. Benign, malign karakterde olabilir, başka bir malignitenin metastazları da görülebilir. Tükürük bezi tümörleri oldukça nadir tümörlerdir, tüm baş boyun tümörleri içerisindeki oranı %3-10 arası değişmektedir. Tükürük bezlerinin malign tümörlerinin görülme insidansı ise popülasyonda 100,000'de 0.4-2.6 olarak hesaplanmaktadır¹. Tüm baş boyun kanserleri içerisinde tükrük bezi maligniteleri %3'ten daha az bir oranda görülmektedir². Tükürük bezleri histolojik olarak epitelial ve non-epitelial dokulardan oluşur ve bunların herhangi birinden tümörler kaynaklanabilir. Tükürük bezi maligniteleri hem çok çeşitli hem de nadir görülen tümörler olduğundan sınıflandırmak, her sınıfa uygun yönetimsel yaklaşım geliştirmek oldukça zordur.

Malign tükrük bezi tümörleri genelde hayatın 6.dekadında görülür, benign lezyonlar 4-5.dekadda görülebilir. Tükürük bezi tümörlerinin görülme sıklığı erkeklerde kadınlara oranla 1.5 kat daha fazladır (E:K; 1.5:1) ve daha çok ileri yaşta görülür³.

Bir, 3 ve 5 yıllık sağ kalım oranları sırasıyla %83, %69 ve %63'tür. Sağ kalım kadınlarda erkeklere oranla daha yüksektir (K: %72 ve E: %55). 5 yıllık sağ kalım 25 yaşından gençlerde %95 ile en yüksekken yaş ilerledikçe bu oran düşer. 25-64 yaş arası %70, 65 yaş ve üstünde ise %50 civarındadır³.

Yapılan büyük retrospektif serilerde tükrük bezi tümörlerinin %77'si benign iken bunların %23ü malign tespit edilmiştir. Malign tümörlerin %27,9'u mucoepidermoid karsinom, %20,9'u adenoid kistik karsinom, %14,6'sı asinik hücreli karsinom ve %2,8'i polimorfov adenokarsinom olarak raporlanmıştır. Mucoepidermoid karsinomlar daha sıklıkla primer olarak parotis bez kaynaklı iken adenoid kistik

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