SUPRAHYOİD BOYUN

DR. MURAT UÇAR

GAZİ ÜNİVERSİTESİ TIP FAKÜLTESİ

RADYOLOJİ ANABİLİM DALI

ANA HAT

- Boyun alanları
- Anatomik komşuluklar
- İçeriğindeki yapılar
- Patolojiler

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Lezyon Yerleşiminin Tanımlanması

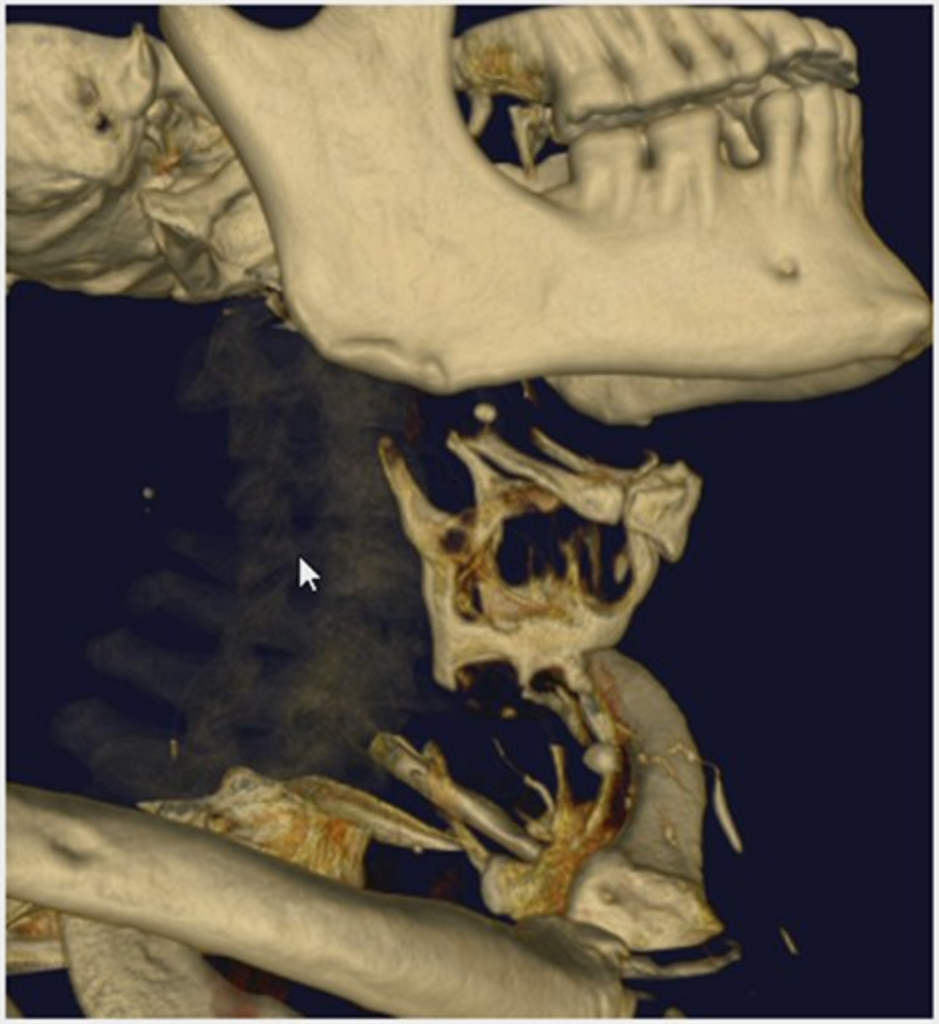
- Kaynaklandığı doku yada organ
- Tümör veya enflamasyonun yayılımı
- Olası tanıların sınırlandırılmasında

- **Suprahyoid (SH)**

Kafa tabanı –hyoid

(orbita, sinüsler ve oral kavite hariç)

- **İnfrahyoid (İH)**



Servikal Fasyalar

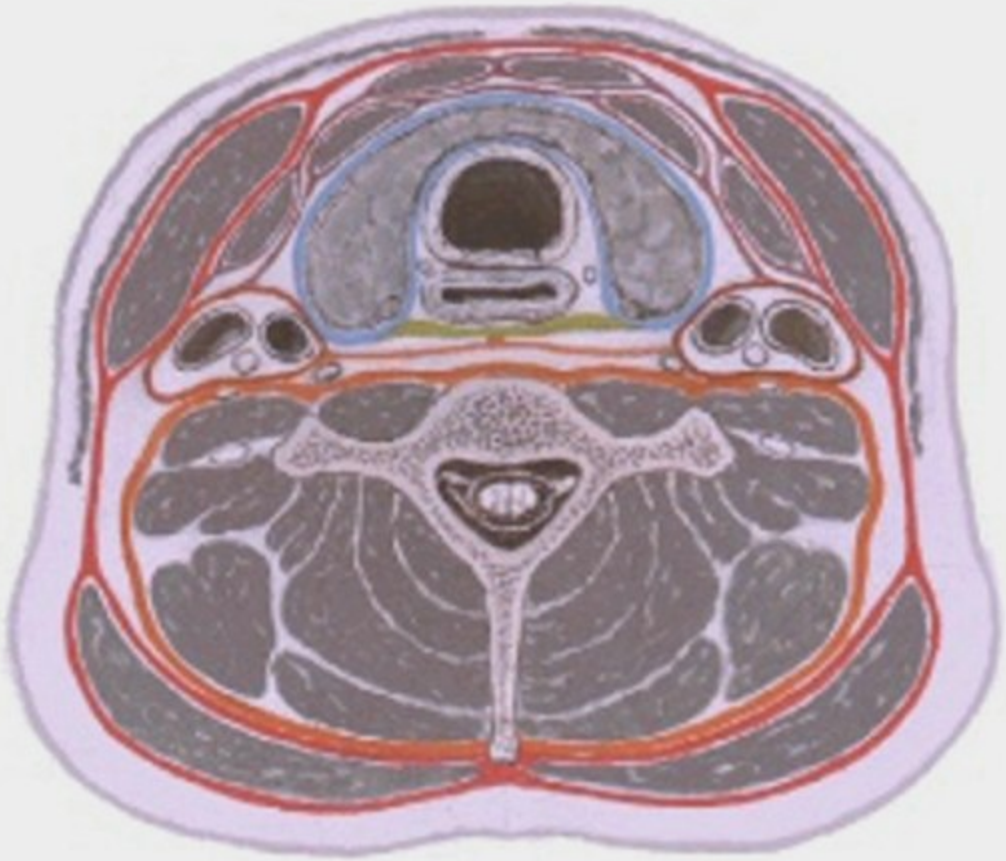
- **Fasya :**
  - Anatomik dokuların etrafını sarar
  - Dokuların birlikteliğini sağlar
  - Bağ dokudur

- **Boyunda alanları oluşturur**

Servikal Fasyalar

Yüzeysel ve derin

- Yüzeysel fasya
- Derin fasya:
  - Yüzeysel (kuşatan)
  - Orta (visseral)
  - Derin (prevertebral)



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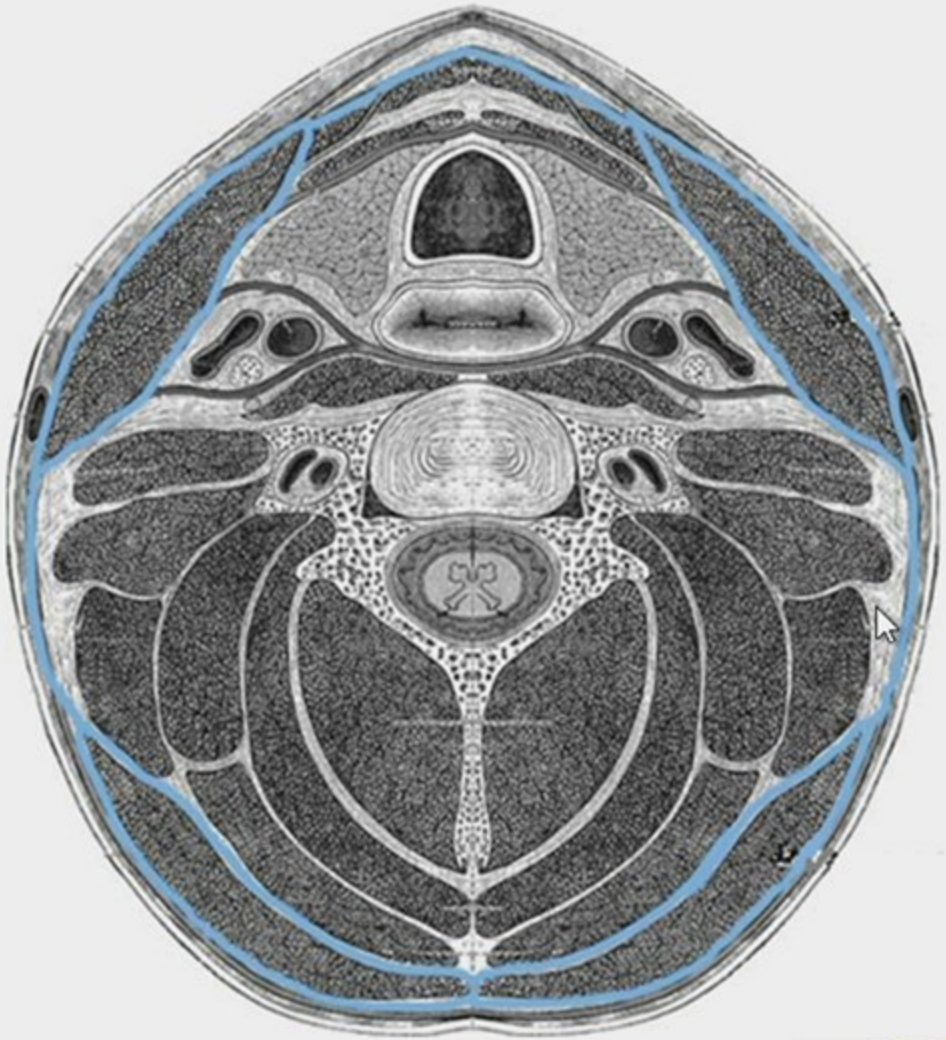

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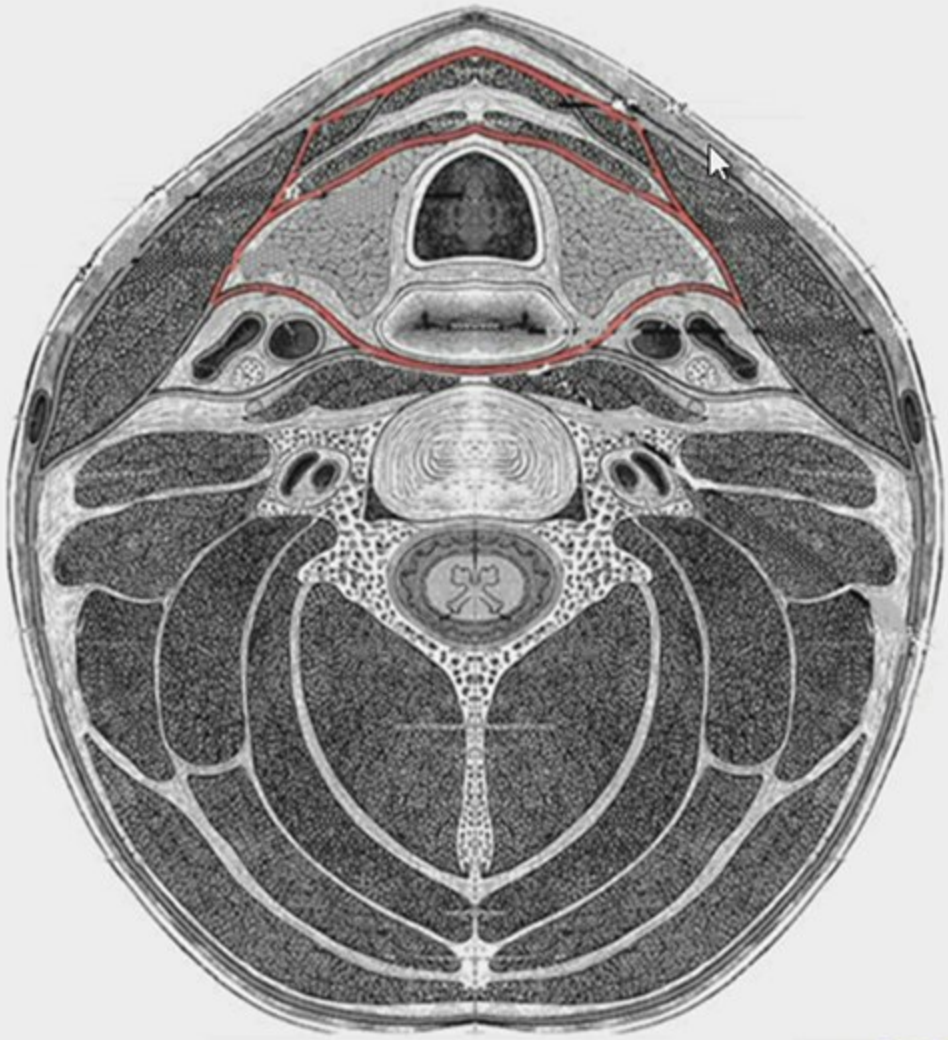

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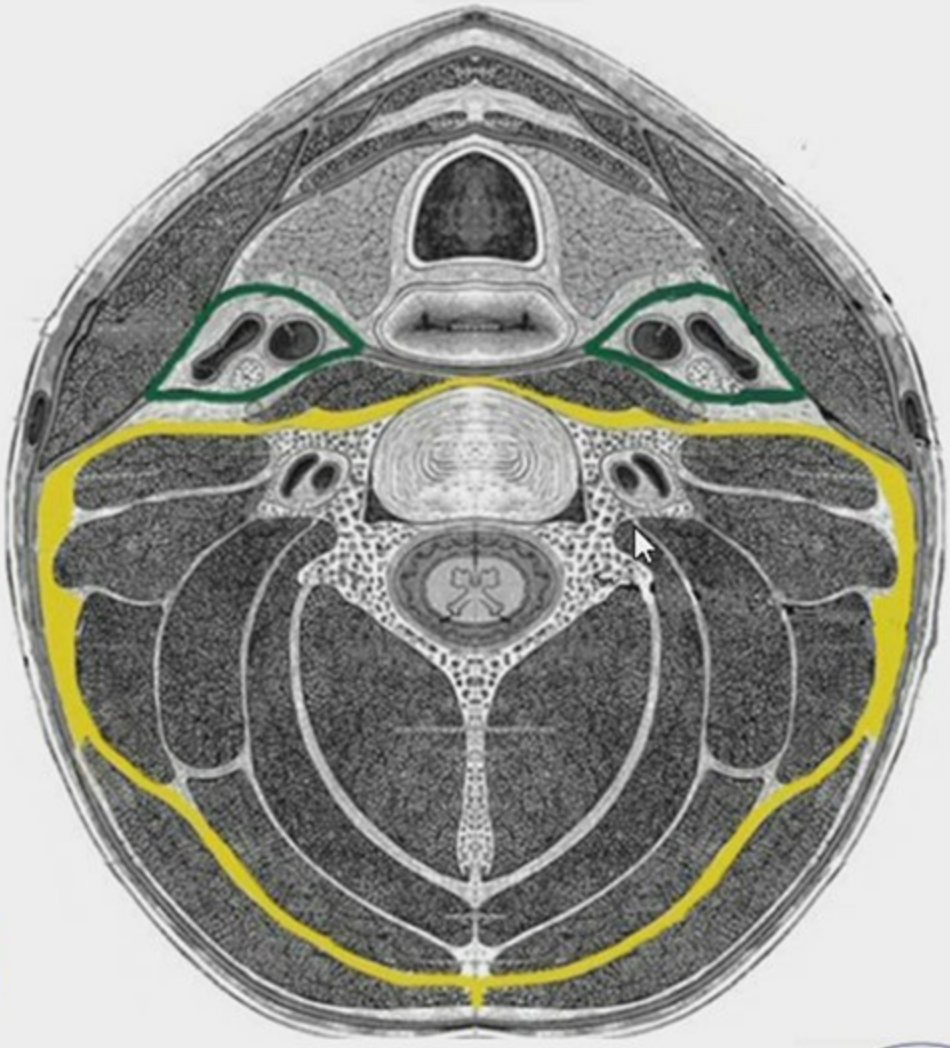

İnfrahyoid uzanımı olmayan alan hangisidir?

A – Karotid alan

B – Visseral alan

C – Retrofaringeal alan

D – Perivertebral alan

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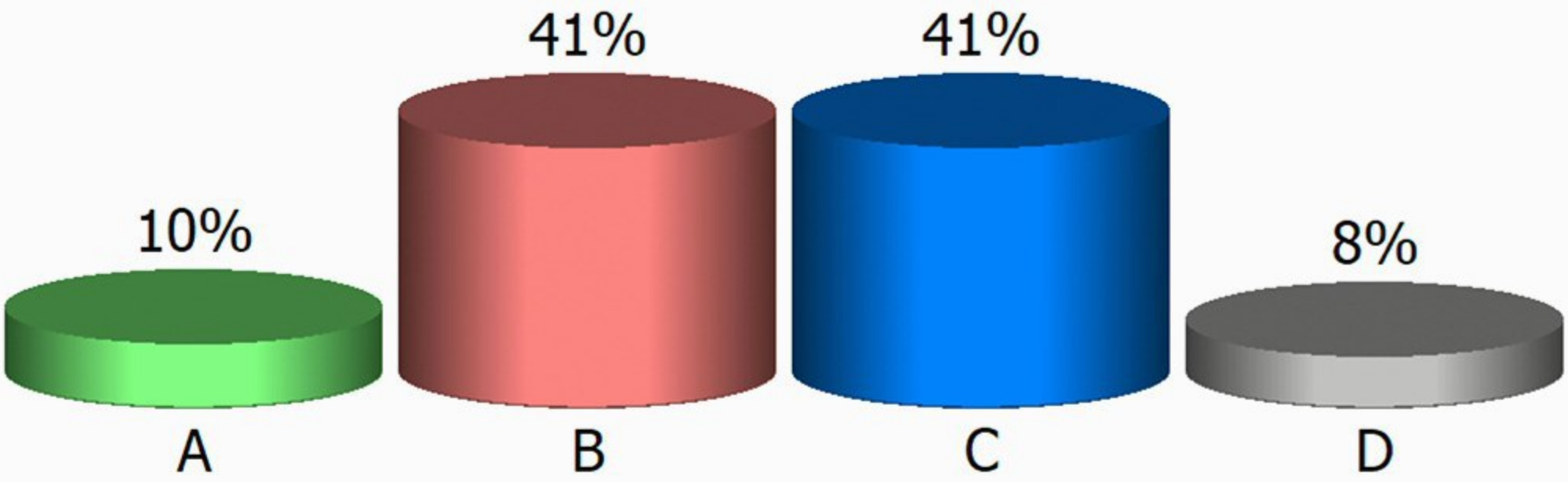

Soru: 1

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Suprahyoid Alanlar

- Parafaringeal alan
- Faringeal mukozal alan
- Mastikatör alan
- Bukkal alan
- Parotid alan
- Karotid alan
- Retrofaringeal alan
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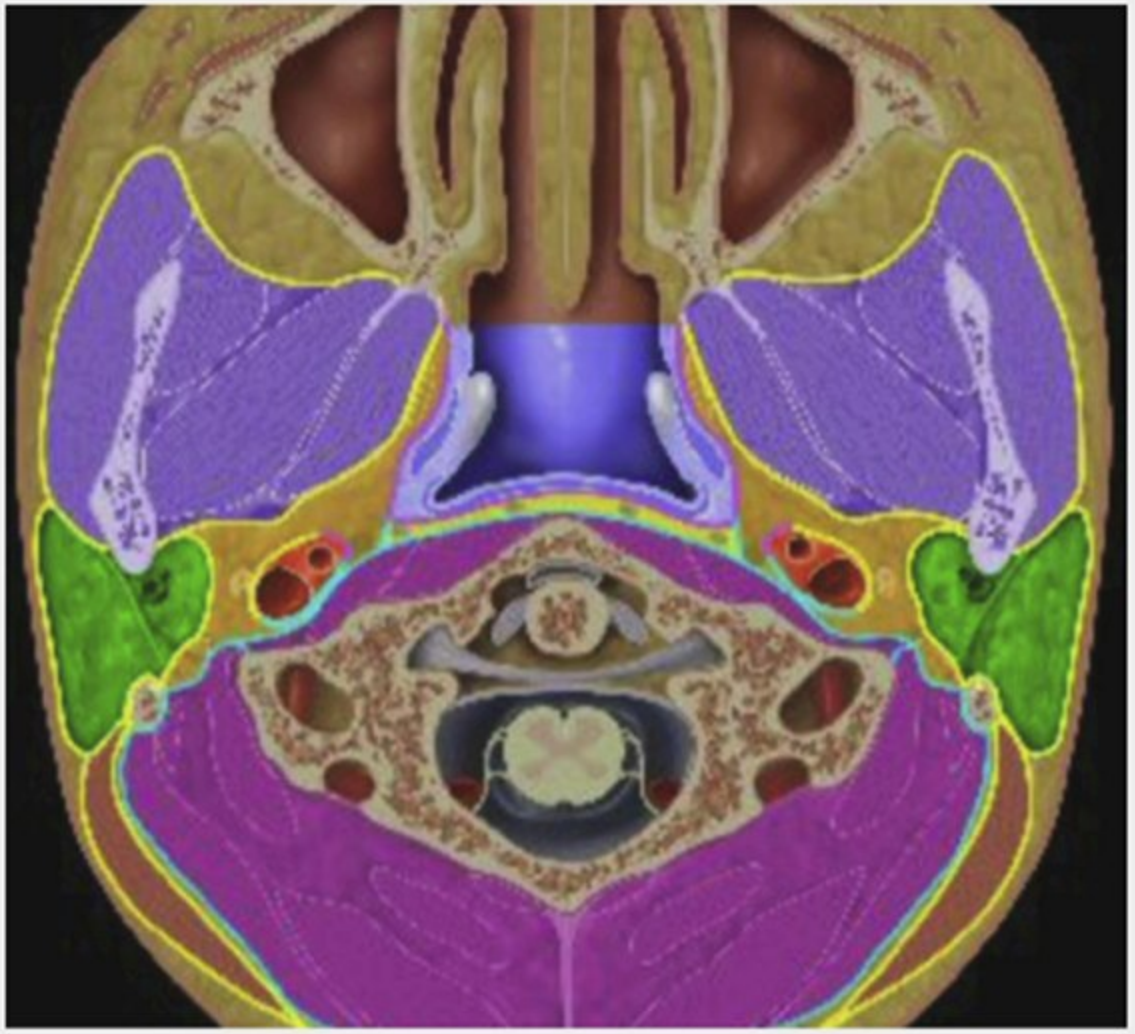
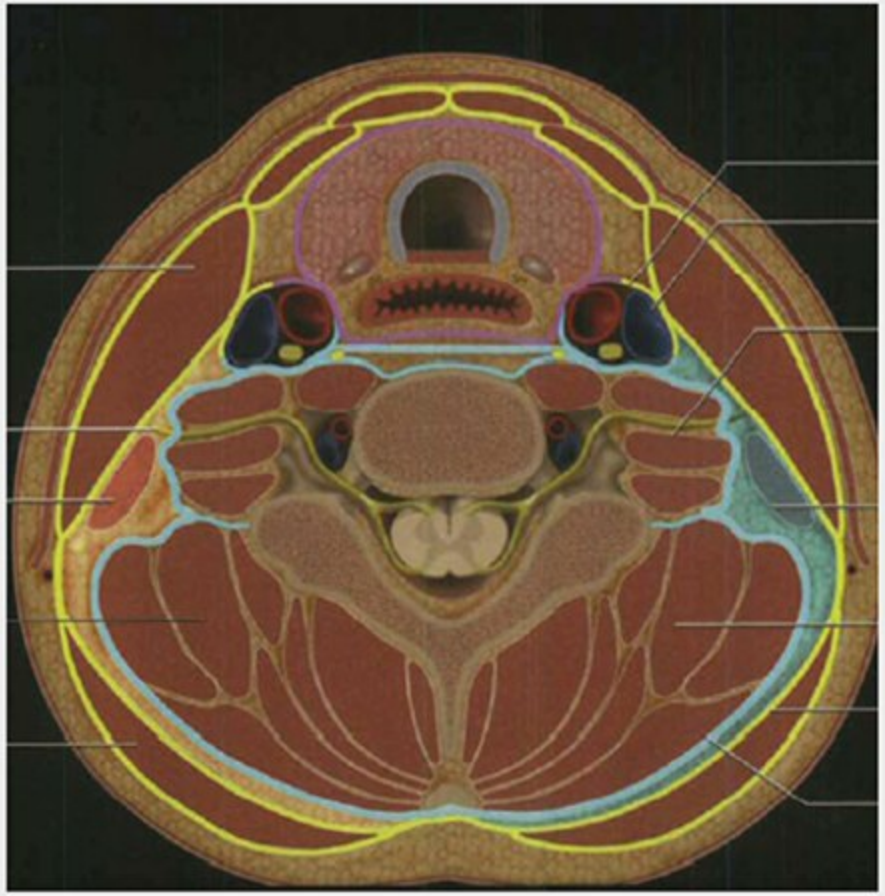


İnfrahyoid Alanlar

- **Karotid alan**
- **Retrofaringeal alan**
- **Perivertebral alan**
- Visseral alan
- Posterior servikal alan



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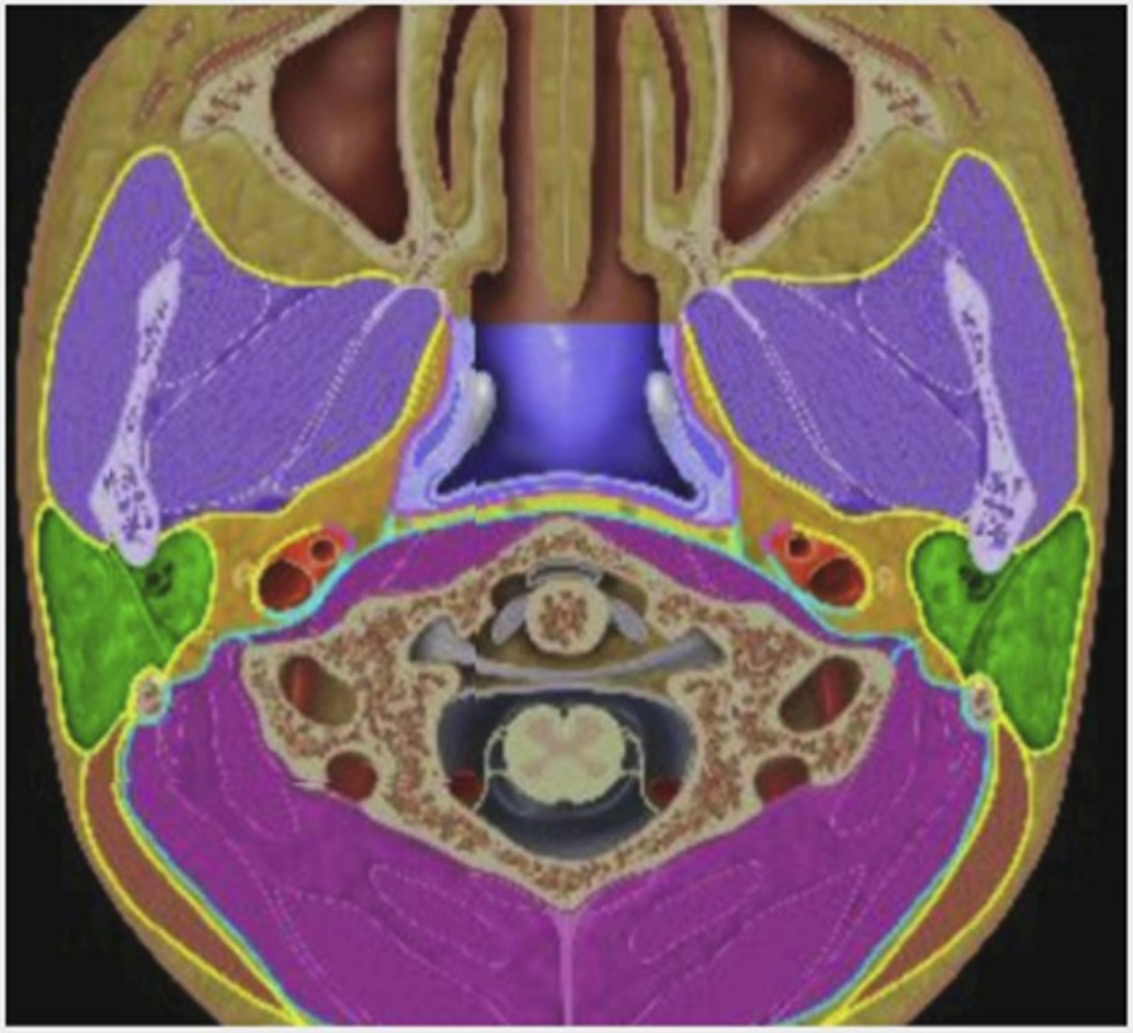

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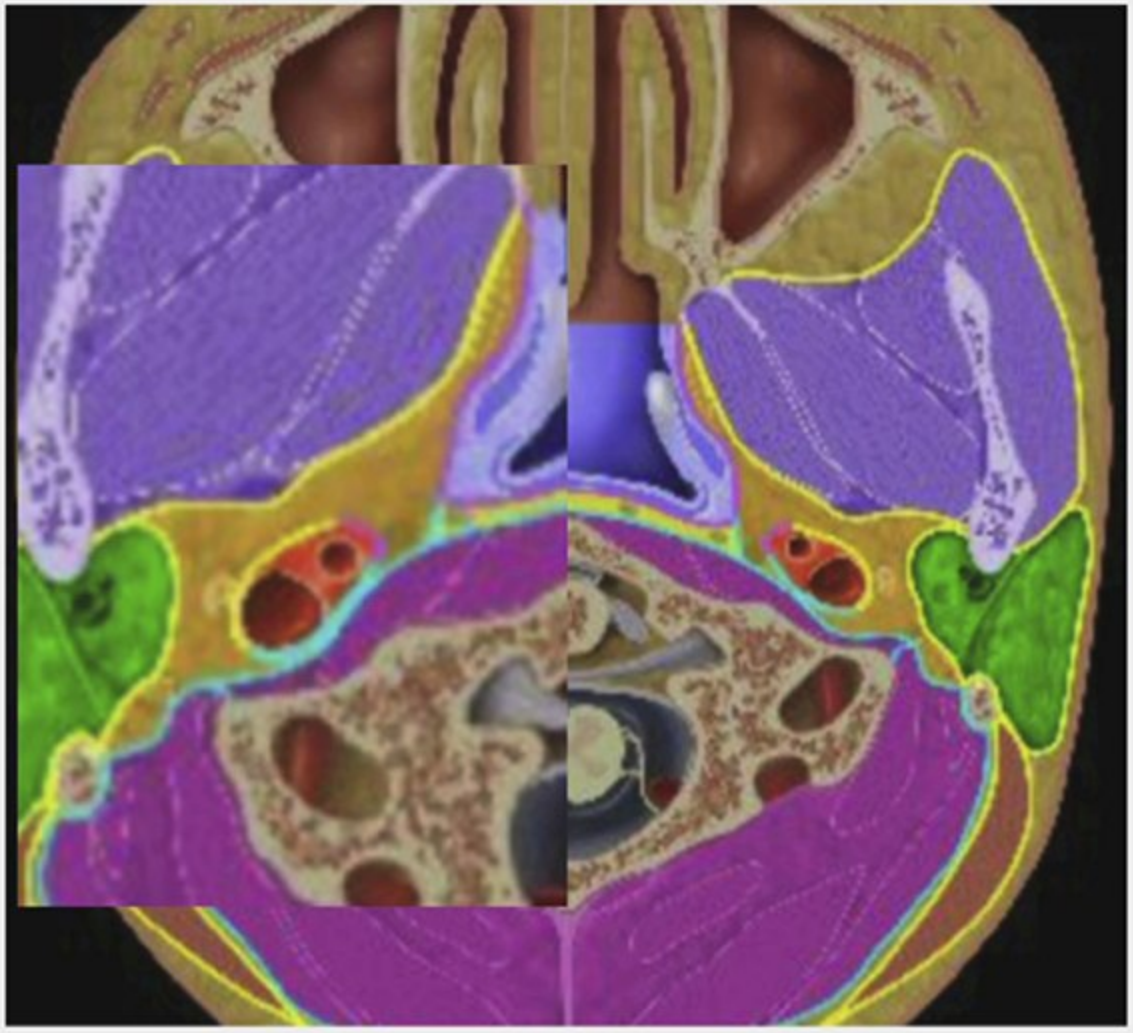
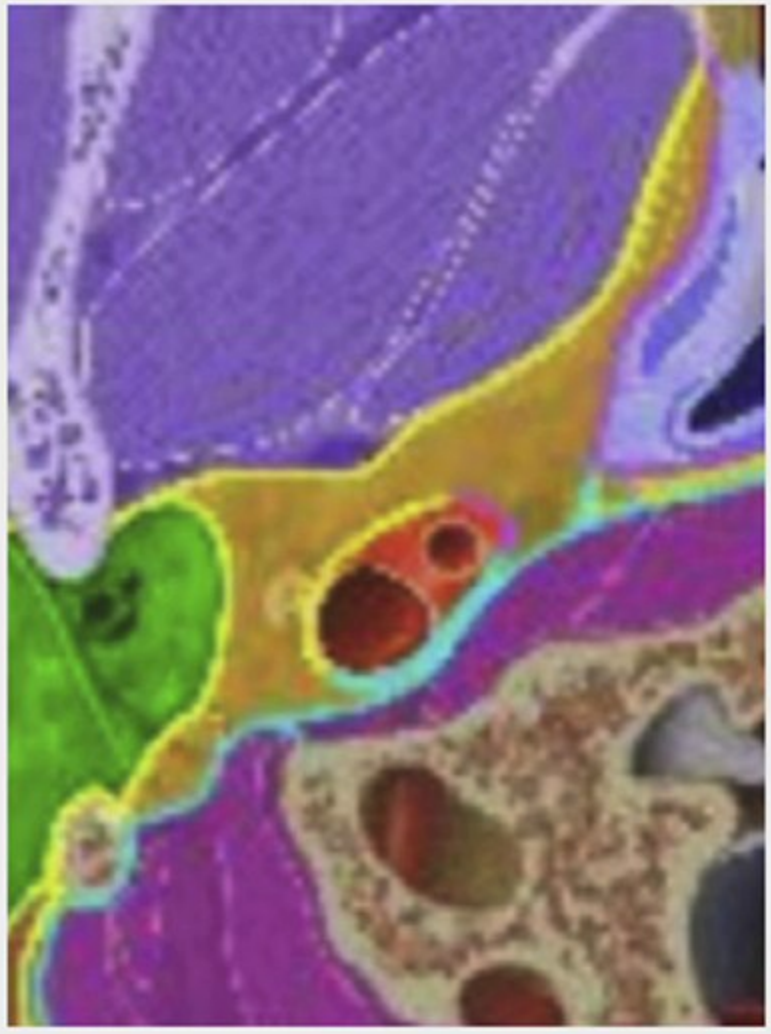


Parafaringeal Alan(PPS)

- Koordinat belirleyici
- Yağ dokusundan zengindir
- Asansör →komşu aralıklarda gelişen enfeksiyon veya tümörün taşınması



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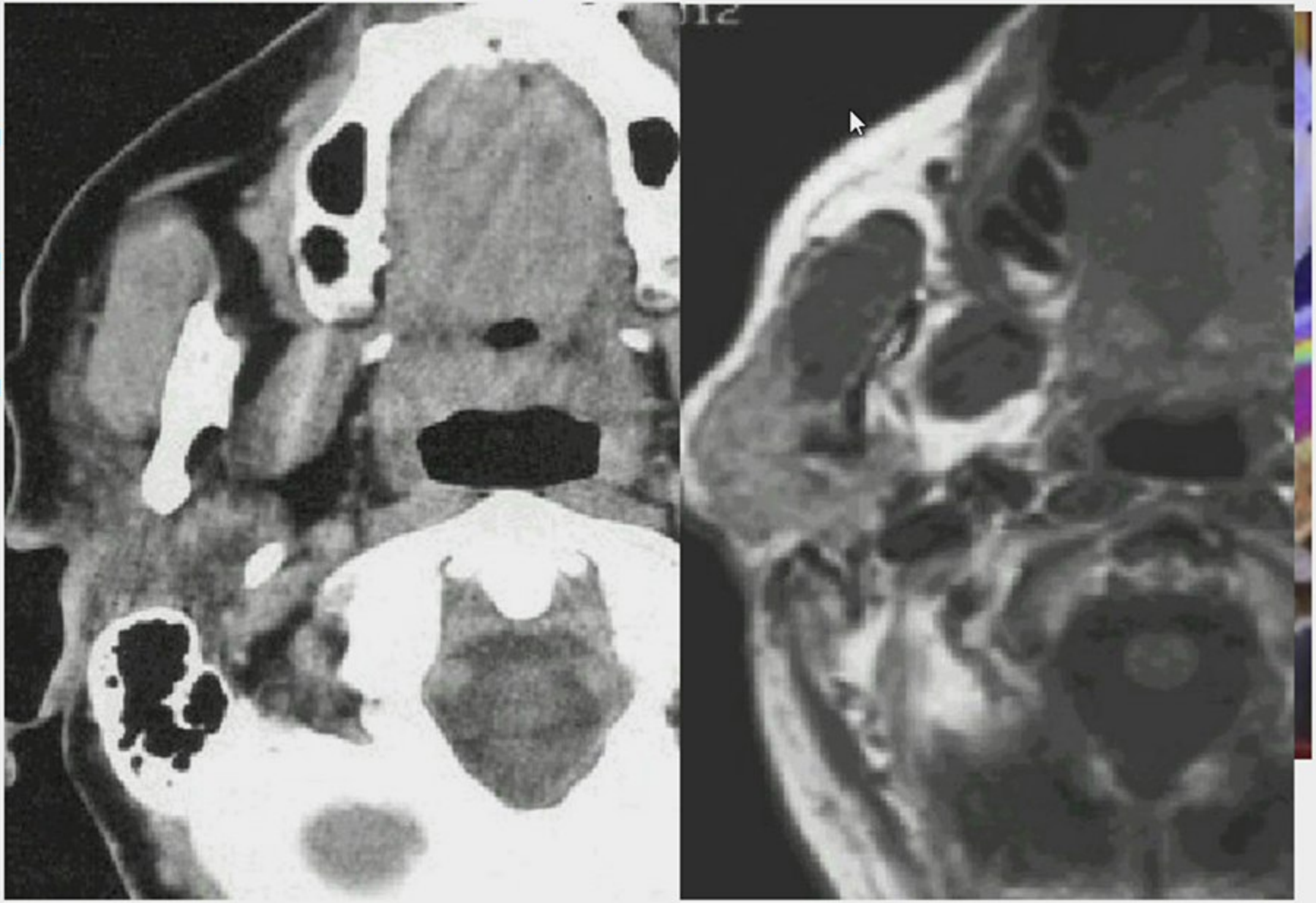

Doku İçeriği

- Yağ doku
- Minör tükrük bezleri (ektopik ,nadir)
- İnternal maksiller arter
- Assendan faringeal arter
- Pterigoid venöz pleksus küçük bir kısmı

Patolojiler

- İçeriği sınırlı olduğundan buradan gelişen lezyonlar nadir
- Görülen lezyonlar da çoğunlukla benign(>%80)
- Sıklıkla komşu alanlardan gelişen lezyonlar bu alana yayılım gösterir
- Primer demek için PPS yağ doku ile lezyon tamamen sarılmalı

Patolojiler

- Minör tükrük bezleri → benign mikst tümör
- Lipom , atipik 2.brankial yarık kistleri

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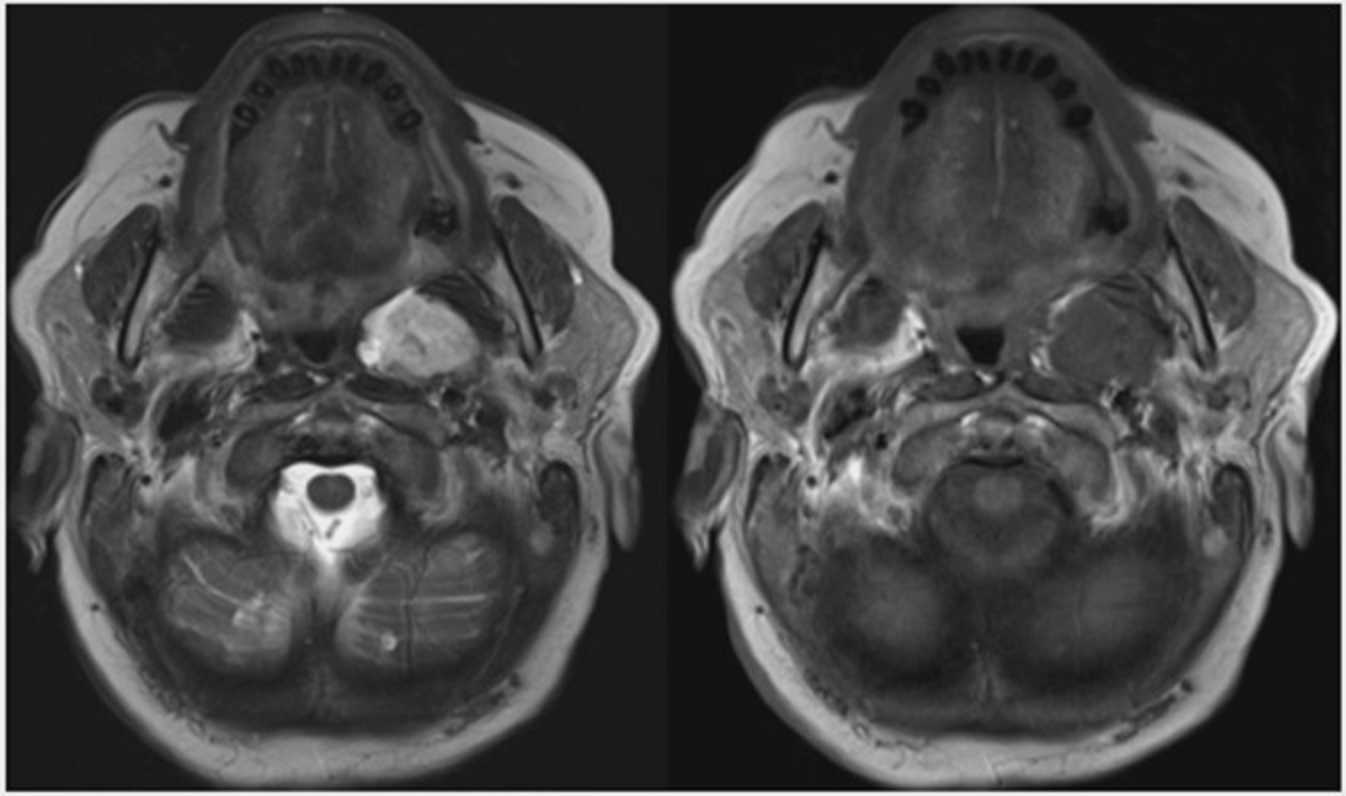

Patolojiler

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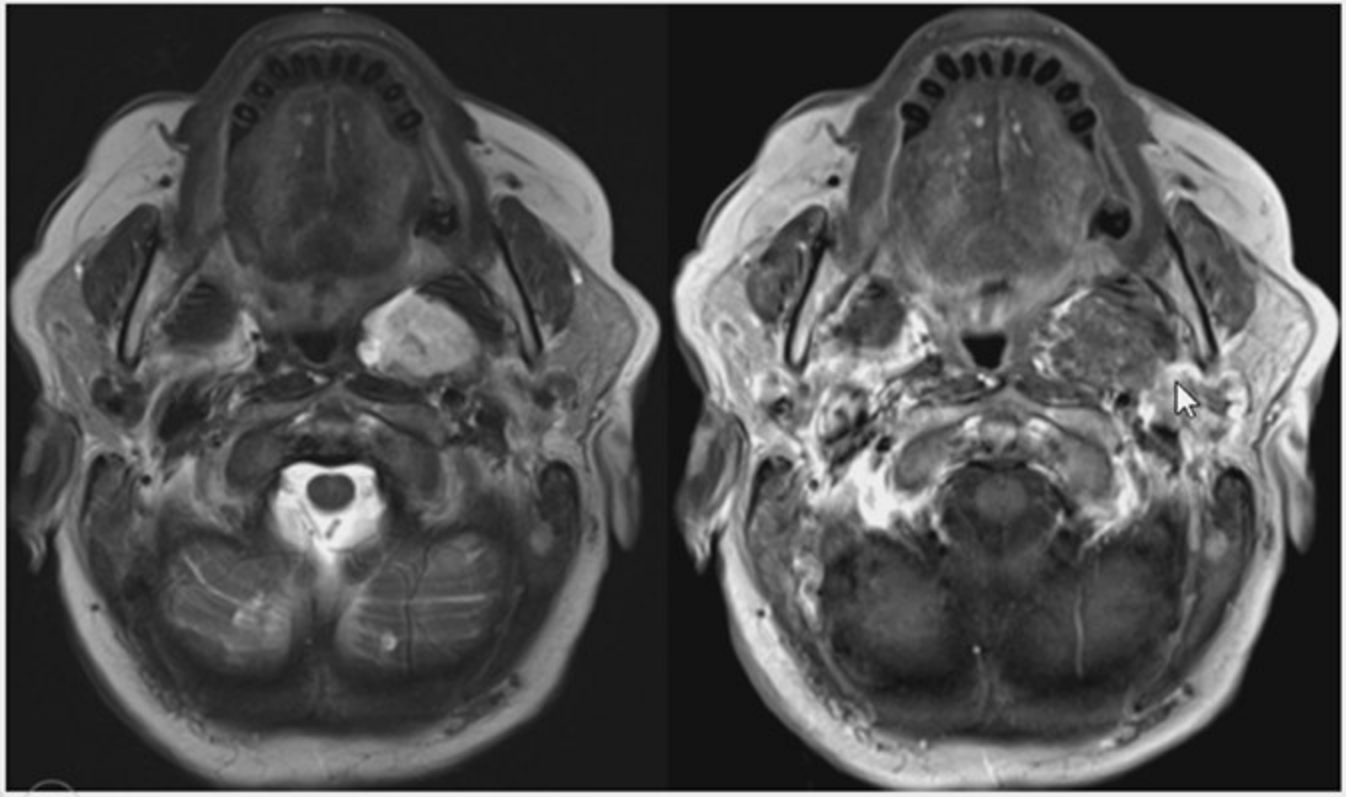

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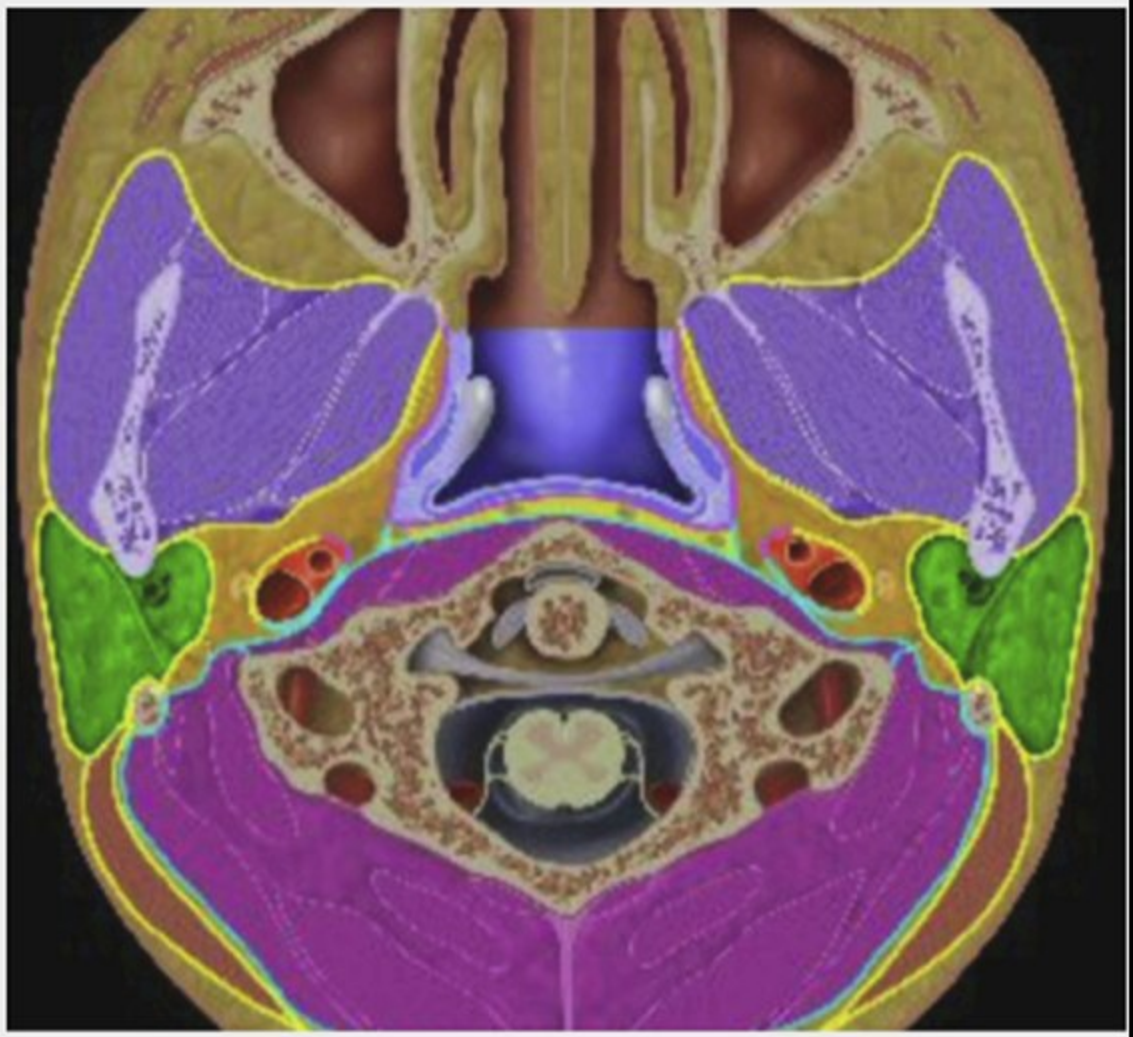

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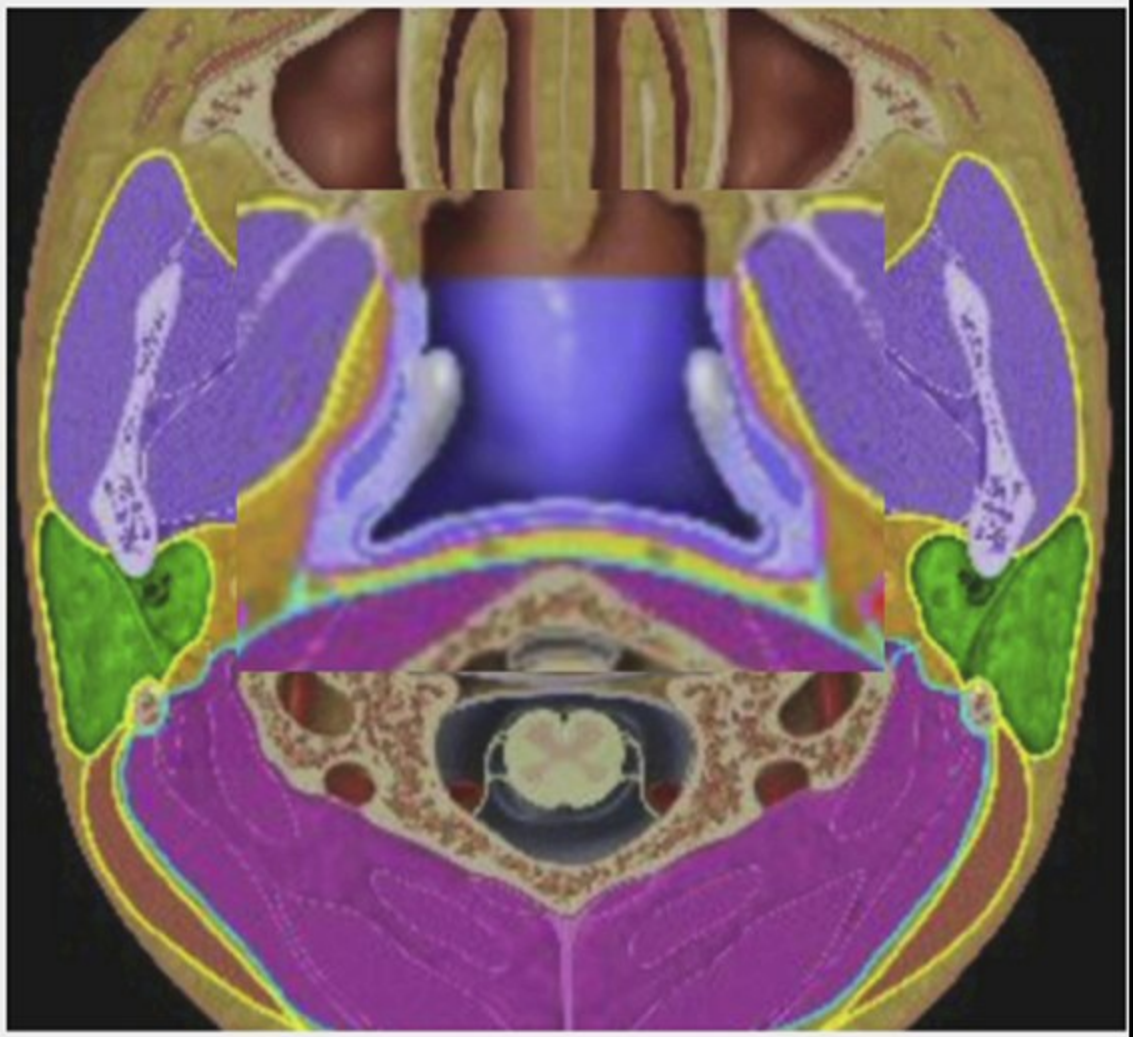
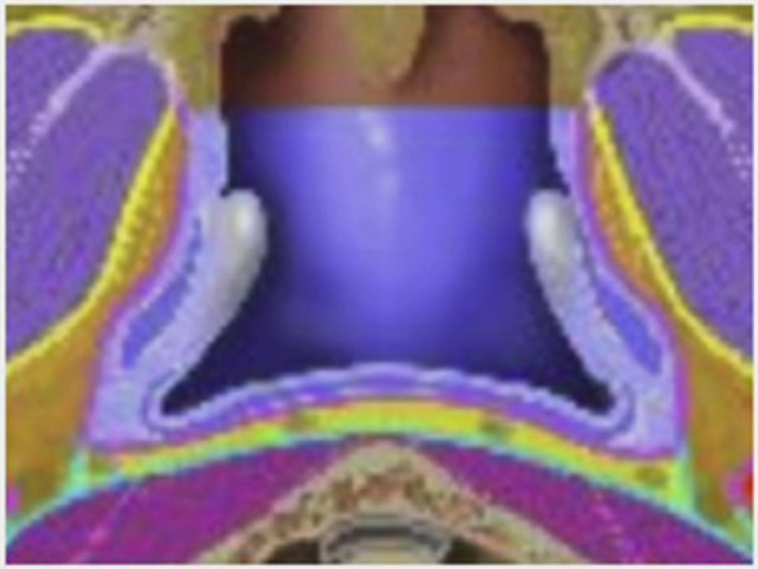


Faringeal mukozal alan(PMS)

- Nazofarinksten hipofarinkse uzanan yumuşak damağı içeren mukozal kılıf
- Yüzeyinde fasya olmadığından gerçek kapalı aralık değildir

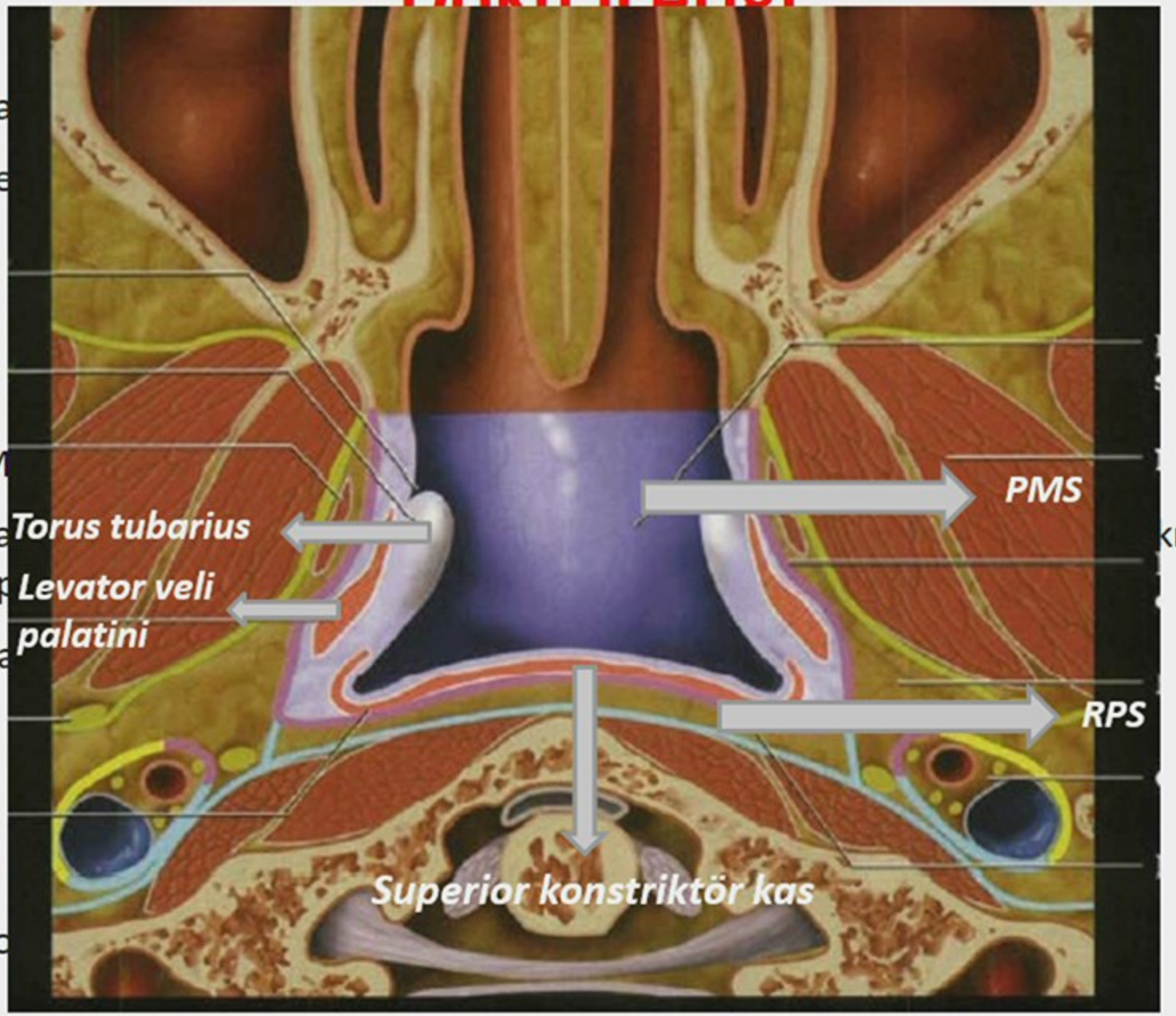


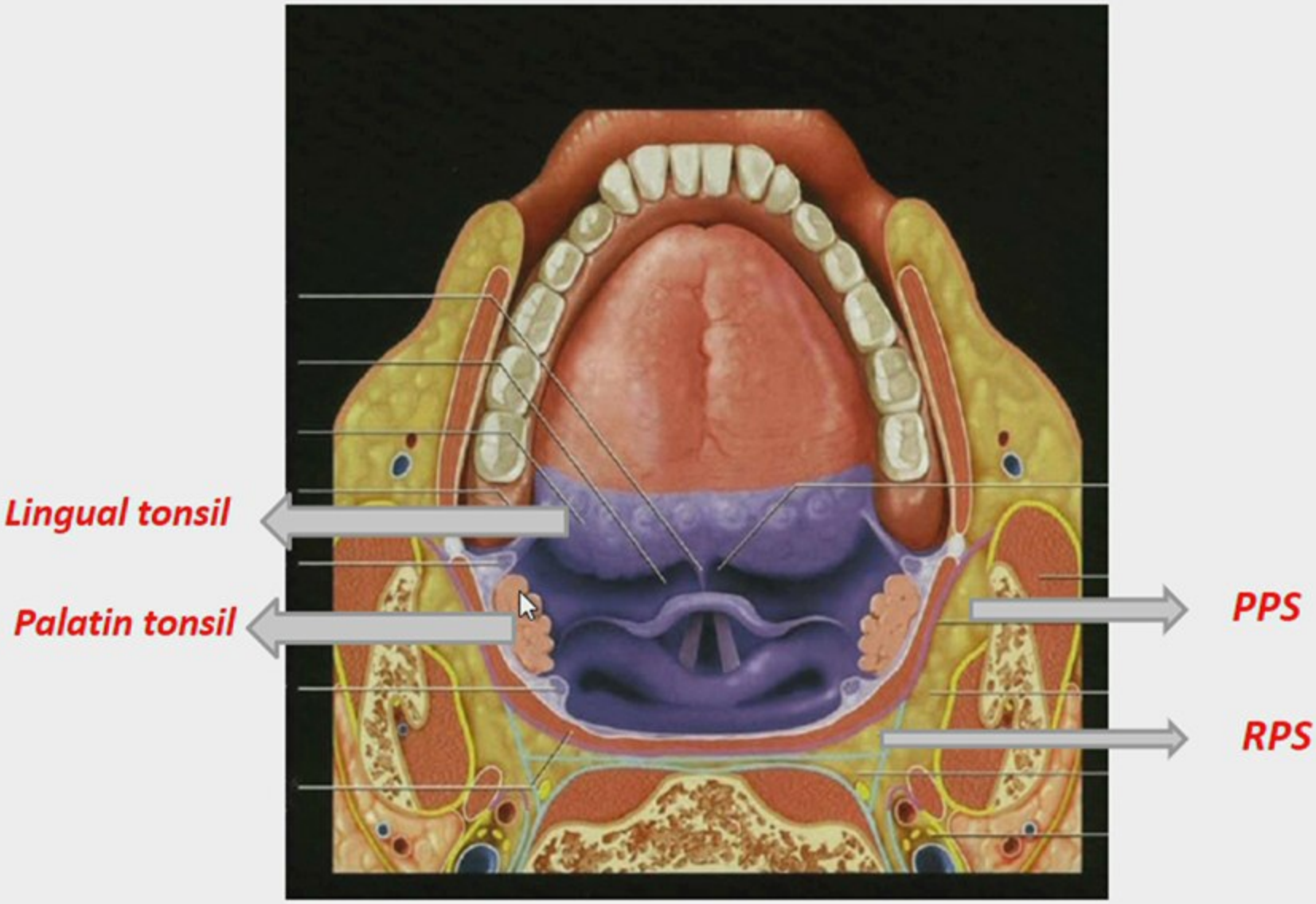
Doku İçeriği

- Farinks mukozası
- Lenfatik halka = Waldeyer halkası
  - nazofarinks → adenoid doku
  - orofarinks lateral duvarı → palatin tonsil
  - orofarinks dil tabanı → lingual tonsil
- Minör tükrük bezleri
- Faringobaziller fasya (süperior konstriktör kası kafa tabanına bağlayan sıkı apönevroz doku)
- Kaslar
  - konstriktör kaslar (superior,media,inferior)
  - salpingofaringeal kas
  - levator palatini distal uç
- Torus tubarius

Doku İçeriği

- Fa
- Le
- M
- Fa
- ap
- Ka
- To




Lingual tonsil
Palatin tonsil
PPS
RPS

Patolojiler

- Mukoza → Skuamöz hücreli karsinom(En sık)
- Lenfoid doku → Tonsiller Non-Hodgkin lenfoma
- Minör tükrük bezi → Benign mikst tümörler
- Konstrüktör ya da levator palatini kasları → Rabdomyosarkom (Nadir)
- Notokordal remnant → Kordoma(Çok nadir)
- ve metastazlar

Suprahyoid Alanlar

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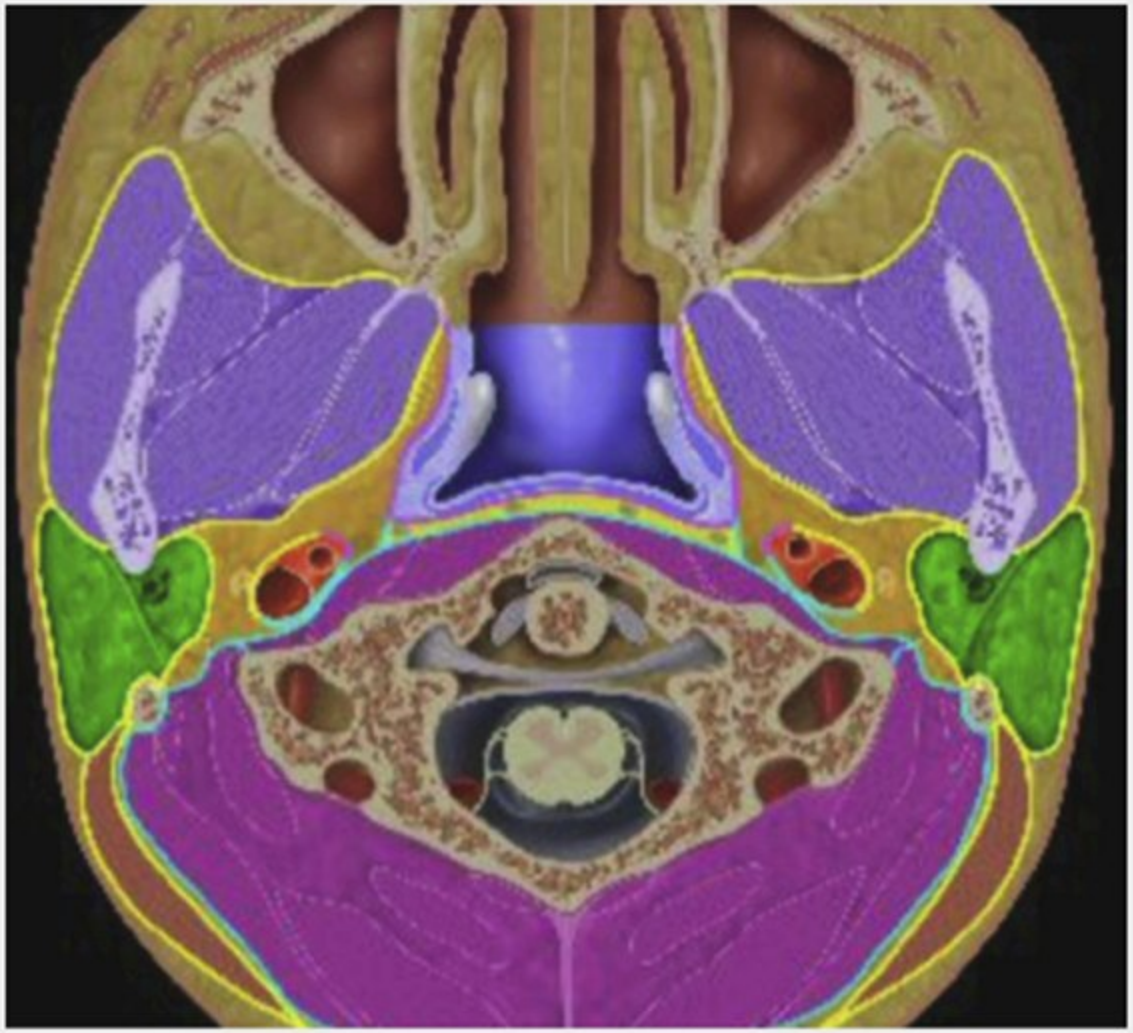

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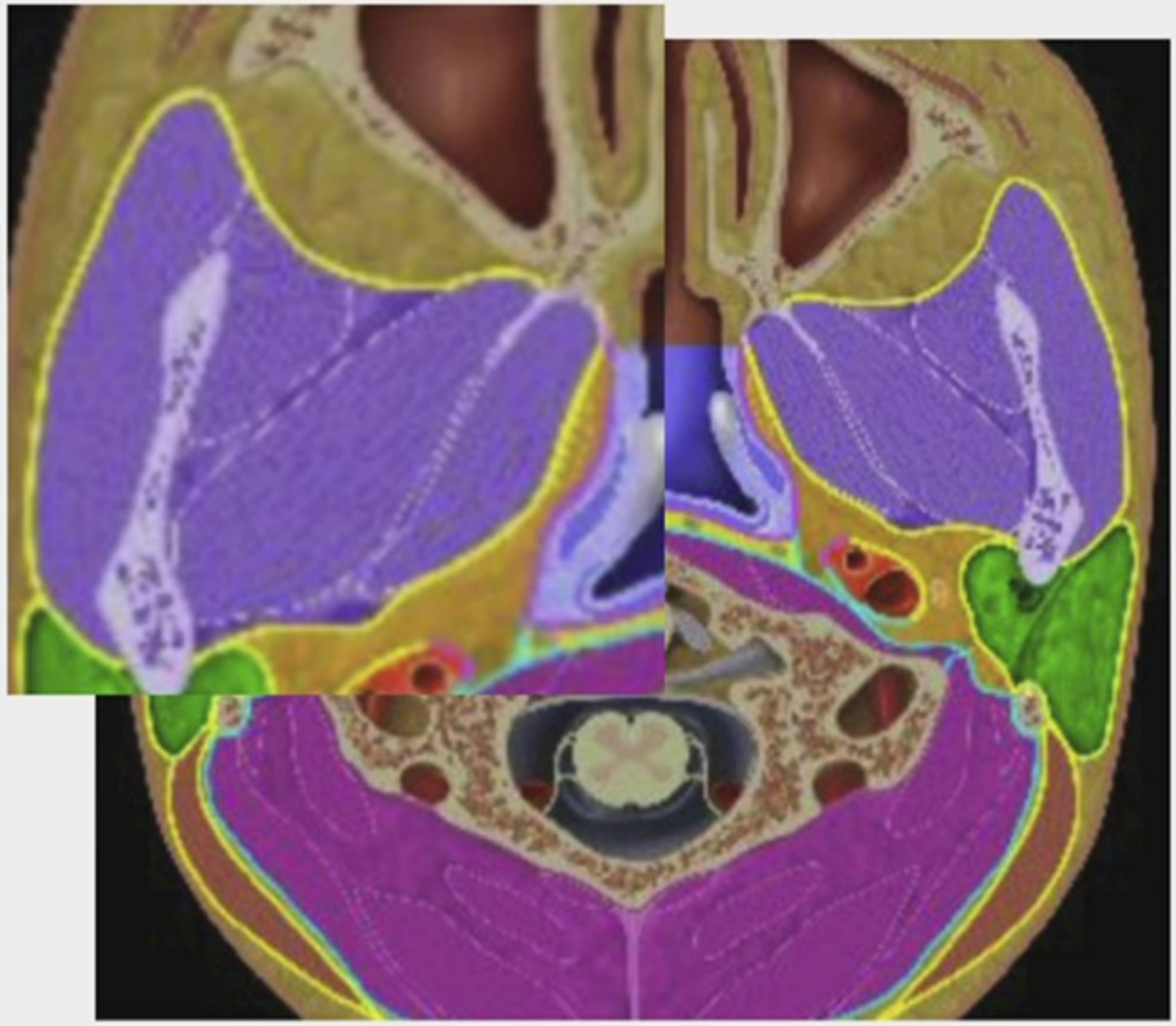

Mastikatör alan patolojileri ile ilgili olamayan hangisidir?

A – Bruxism

B – Trismus

C – Stensen

D – Wharton

Suprahyoid Alanlar

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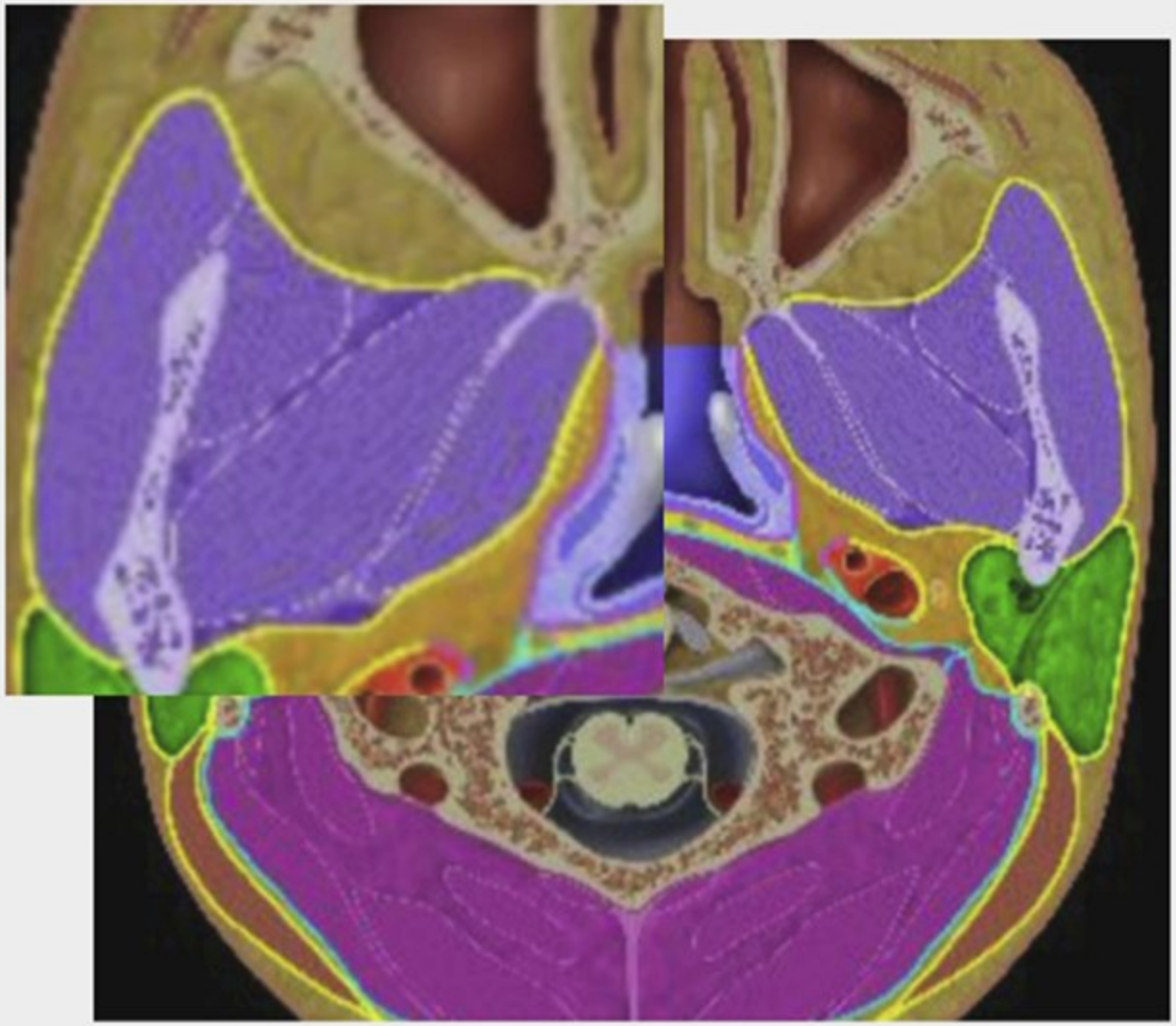

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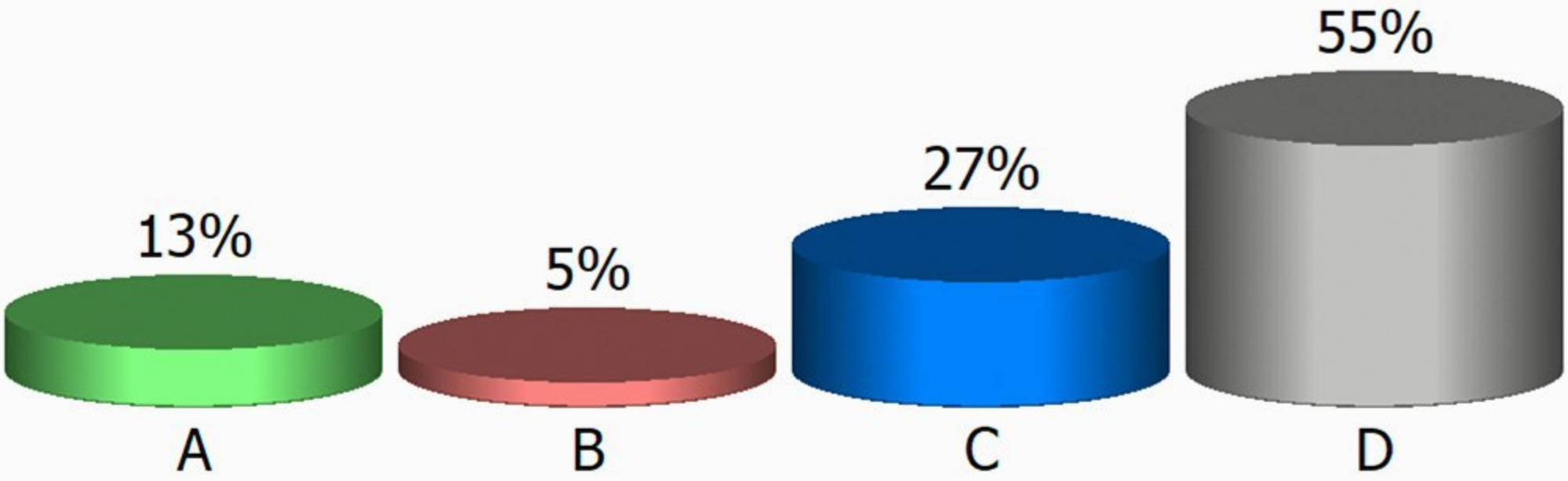

Soru: 2

Mastikatör alan patolojileri ile ilgili olamayan hangisidir?

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B – Trismus

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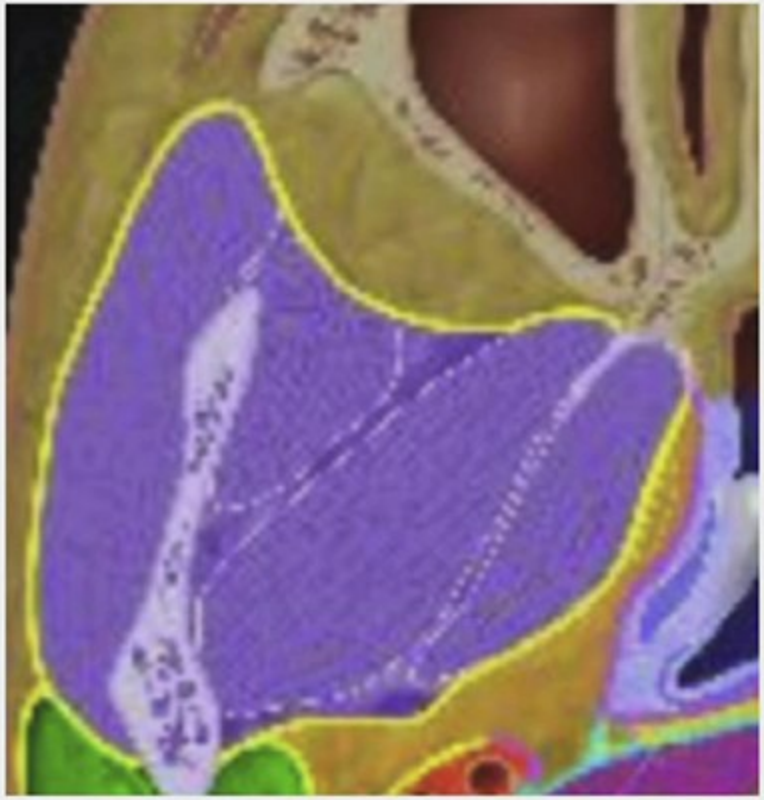
D – Wharton

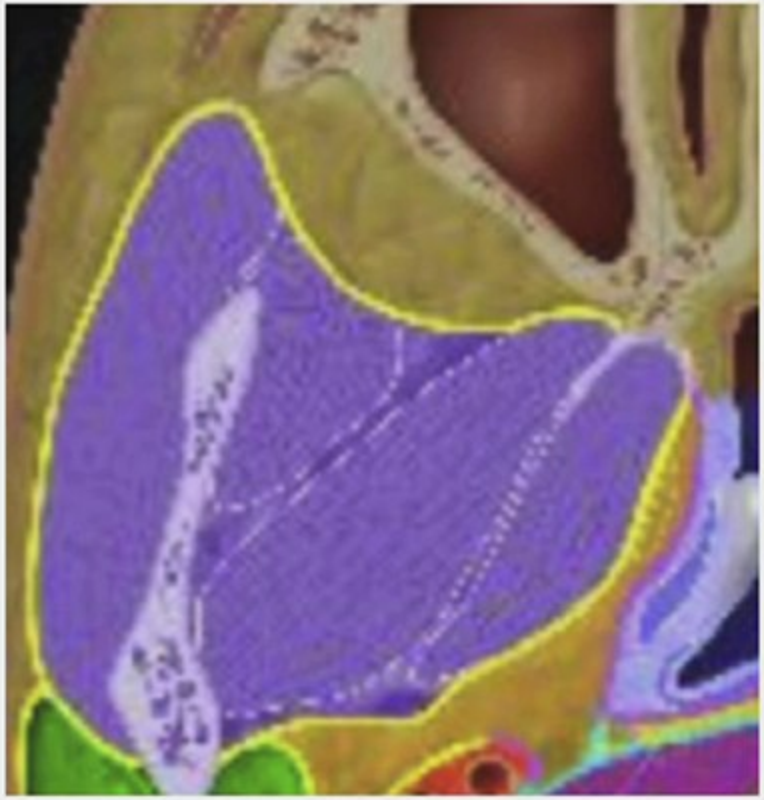
Mastikatör Alan(MS)

- Çiğneme kaslarının bulunduğu alan
  - İnfrazigomatik
  - Suprazigomatik



Bukkal Alan(BS)

- Mastikatör alanın önü
- Mastikatör alan ile arasında sınır yoktur
- Parotis duktusunun bir kısmı buradadır



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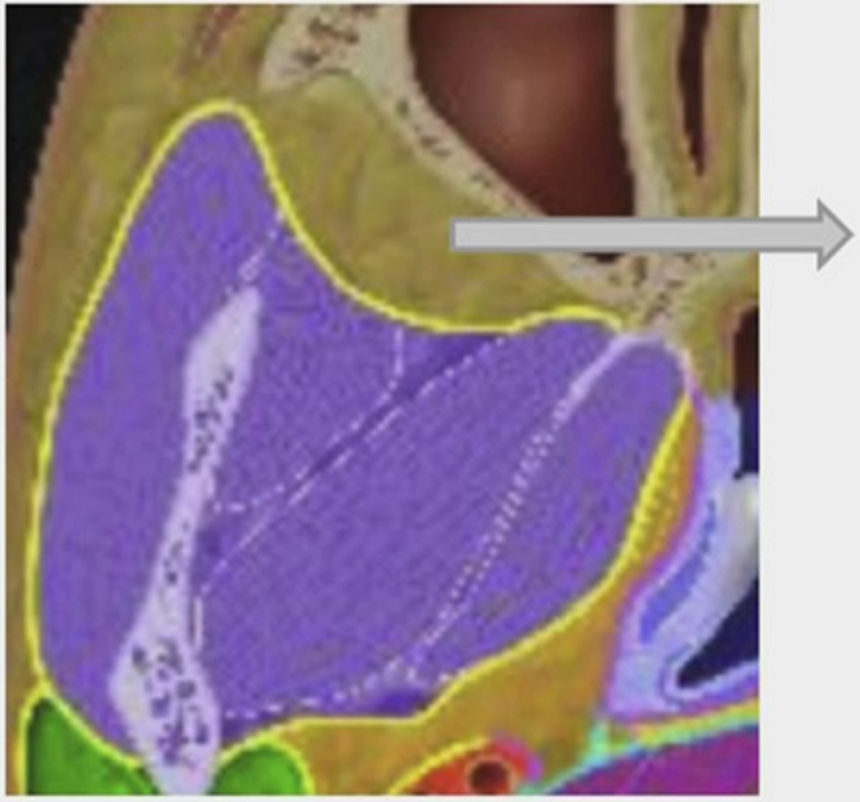
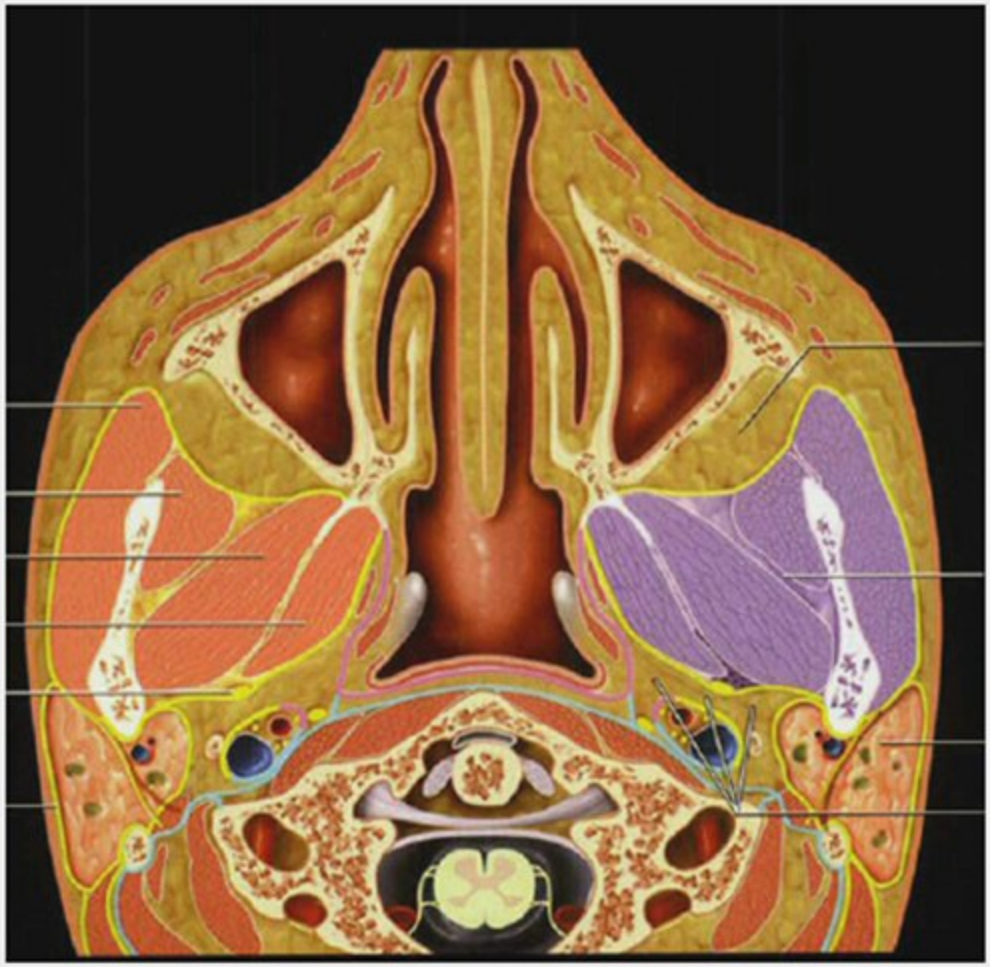
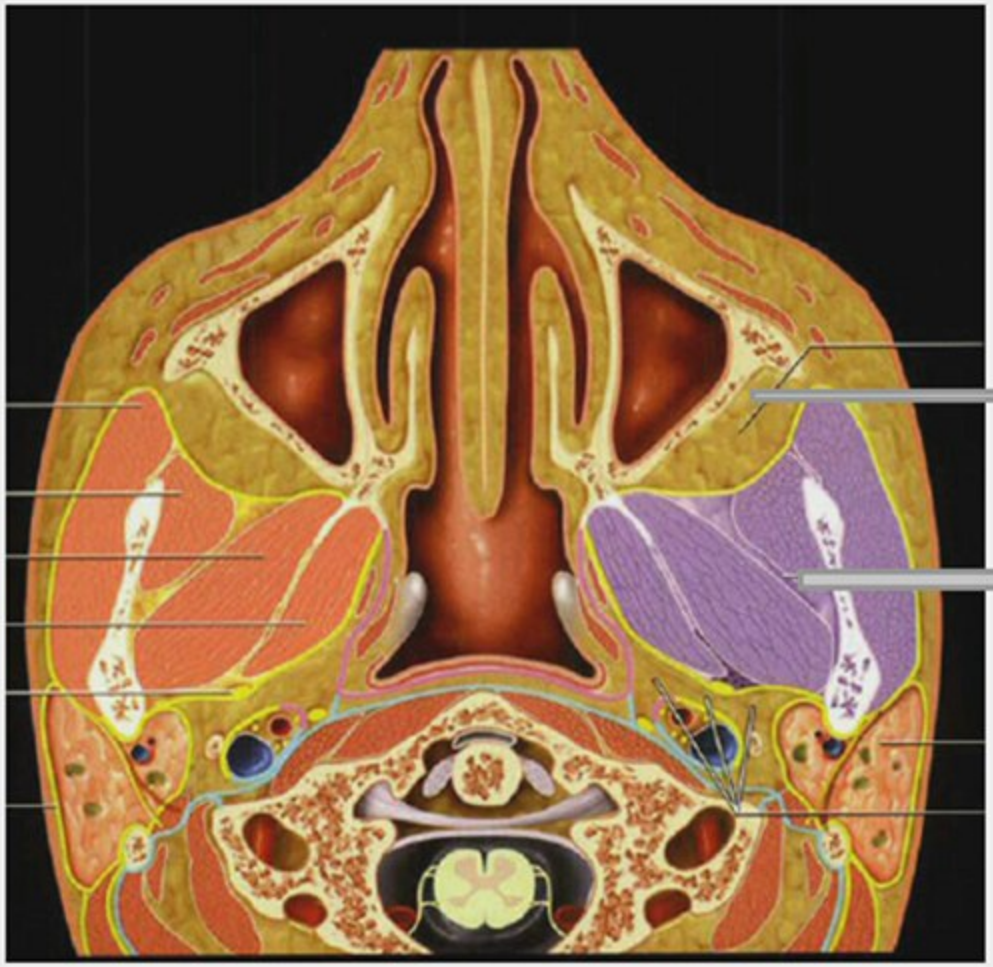
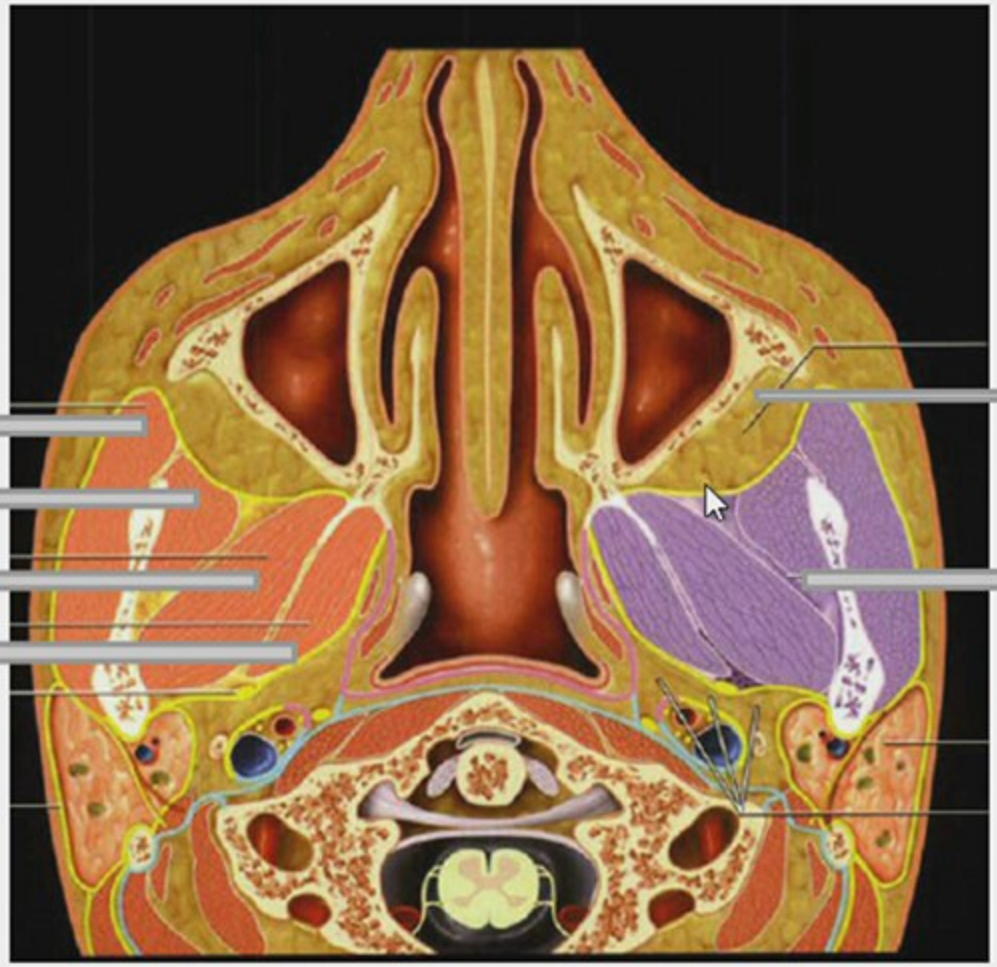


Doku İçeriği

- Çiğneme kasları
  - Masseter, temporalis, medial ve lateral pterigoid
- Trigeminal sinir mandibular dalı
  - Mastikatör dal (motor)
  - İnferior alveolar dal (duyusal)
  - Mylohyoid dal (motor)
- Mandibula ramus ve posterior korpus
- Pterigoid venöz pleksus




BS
MS


Masseter
Temporal
Lateral pterigoid
Medial pterigoid
BS
MS

Patolojiler(Yalancı)

- Asimetrik aksesuar parotid bezi (%21)
- Mastikatör kasların hipertrofisi
  - Bruxism(Diş gıcırdatma)
- Trigeminal sinir yaralanması

Patolojiler

- Trismus: MS tümörleri ve enfeksiyonlarında primer semptom
- Mandibula ramusu ve gövdesi → Sarkomatöz kemik tm(Osteosarkom vb.)
- 5. sinir mandibular dalı(V3) → Schwannoma, nörofibroma
- Konjenital → Hemanjiom, lenfanjiom, venöz vasküler malformasyon

Suprahyoid Alanlar

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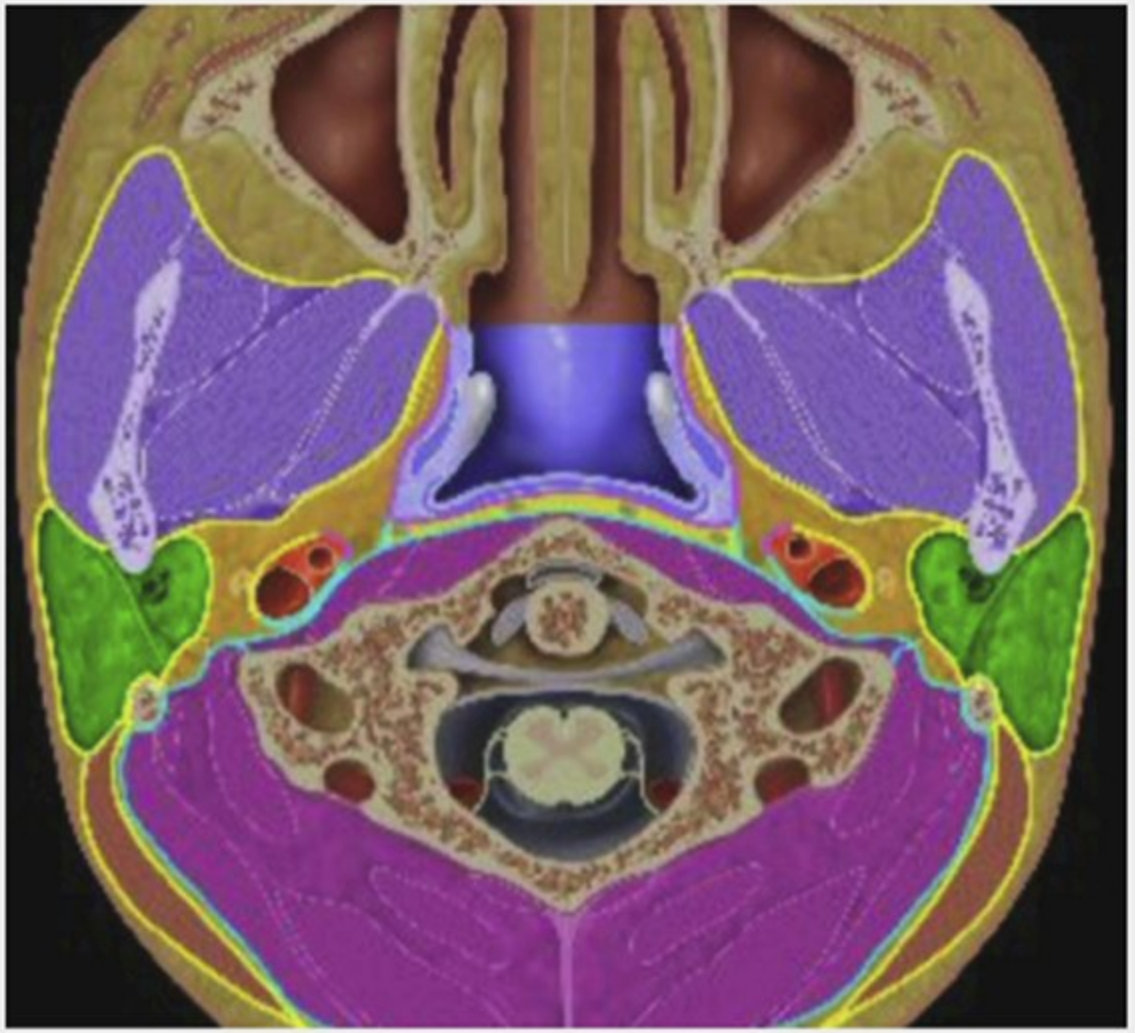

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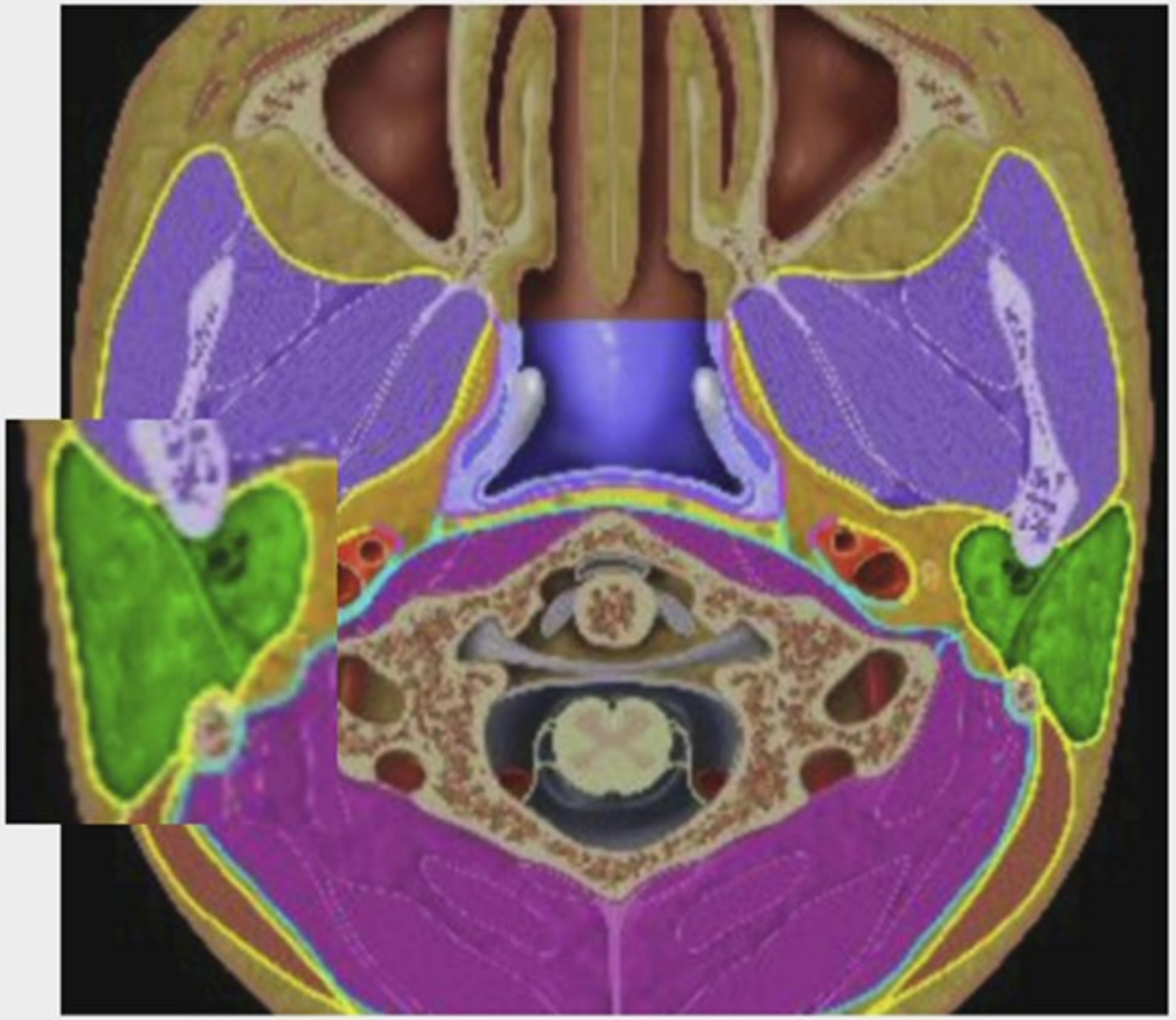
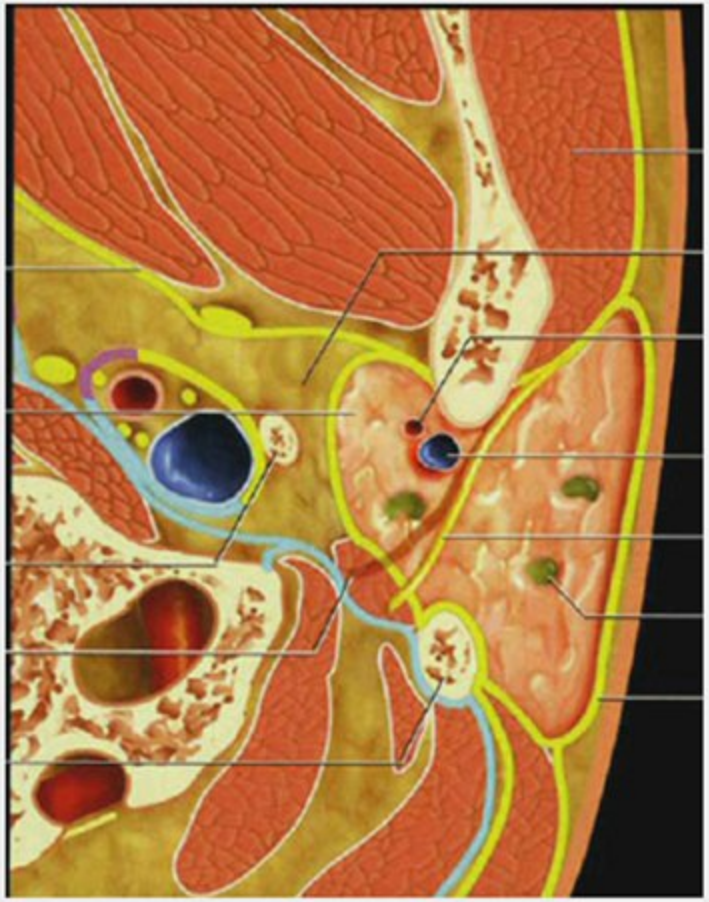


Parotid Alan(PS)

- PPS lateralinde
- Kılıfını yüzeysel derin fasya oluşturur



Doku İçeriği

- Parotis bezi,
  - Yüzeysel lob (PS'nin 2/3 kaplar)
  - Derin lob (PPS lateraline uzanır)
- İnfraparotid fasyal sinir,
- Retromandibular ven, ECA ve bazı dalları
- Lenf nodları

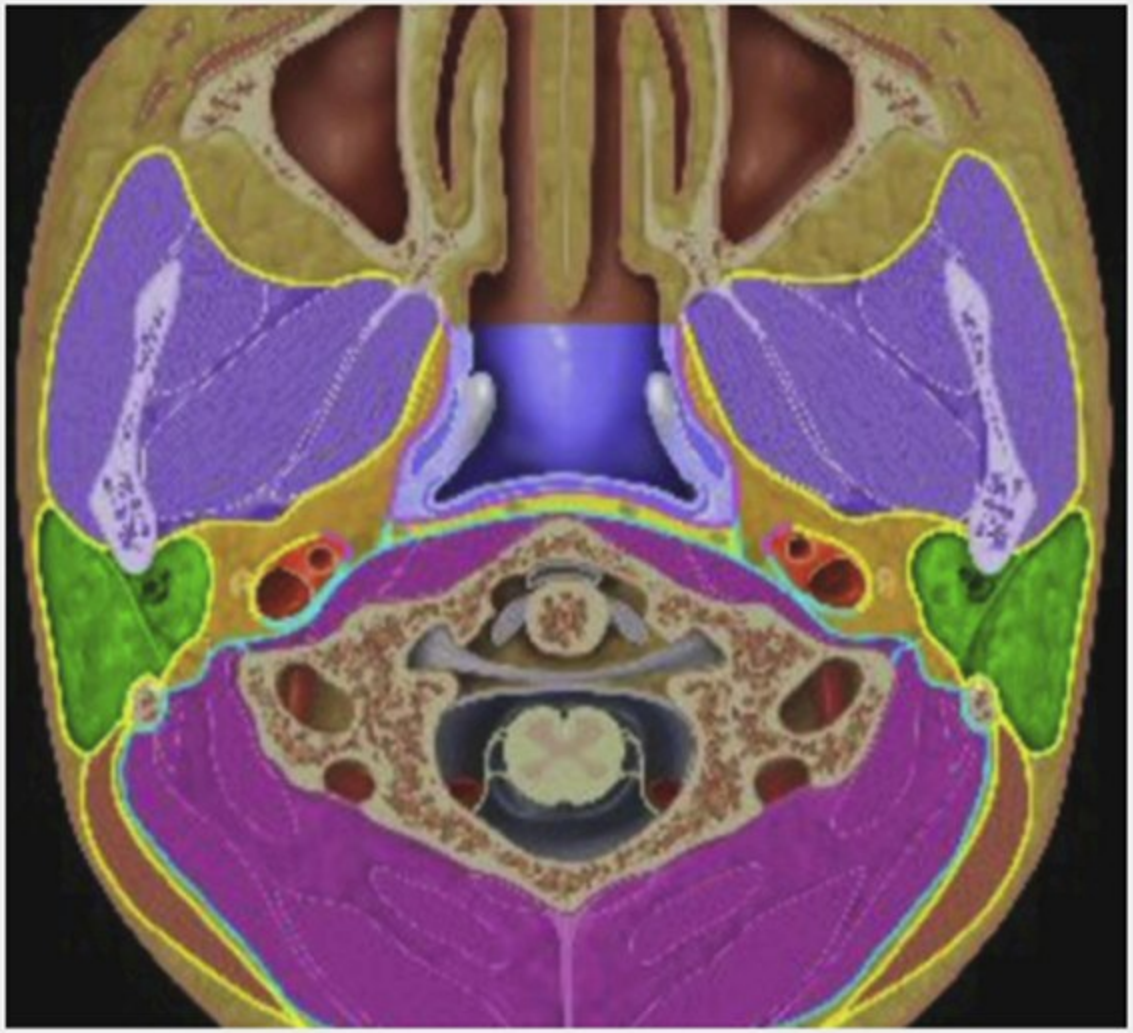
Patolojiler

- Parotis bezi → tükrük bezi kitleleri
- Konjenital → 1. brankial kleft kisti, hemanjiom, lenfanjiom
- Komşu skalp, ekternal akustik kanal ve derin yüz bölgesi

kitlelerinin lenfatik drenajı ilk parotid nodlarına olmaktadır

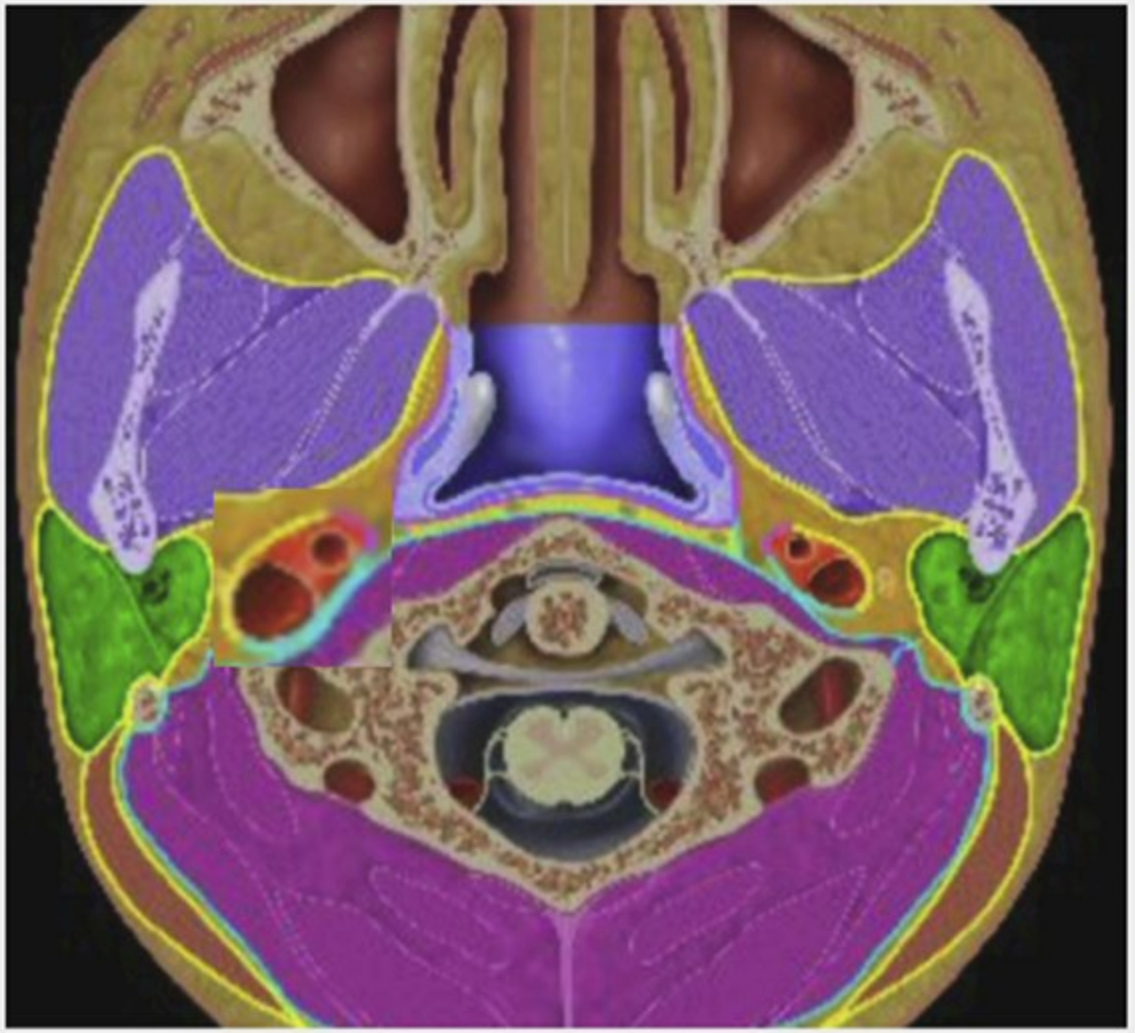
Suprahyoid Alanlar

- Parafaringeal alan
- Faringeal mukozal alan
- Mastikatör alan
- Bukkal alan
- Parotid alan
- Karotid alan
- Retrofaringeal alan
- Perivertebral alan



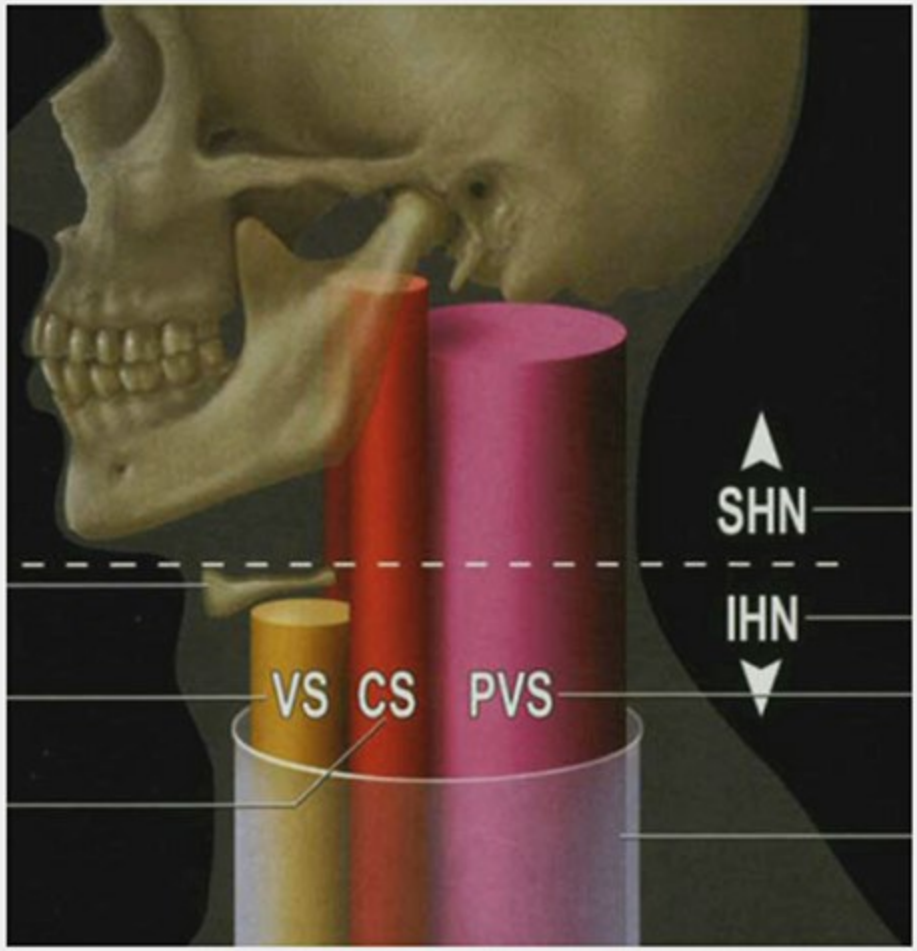
Suprahyoid Alanlar

- Parafaringeal alan
- Faringeal mukozal alan
- Mastikatör alan
- Bukkal alan
- Parotid alan
- Karotid alan
- Retrofaringeal alan
- Perivertebral alan



Karotid Alan(CS)

- ≅ retrostiloid alan
- Kafa kaidesinden arkus aorta düzeyine kadar uzanır
- SH ve IH kısımları var
- Kılıfı derin servikal fasyanın 3 tabakasını da içerir



Doku İçeriği

- SH→9-12.CN (Orafarengeal düzlemden itibaren 10.CN)

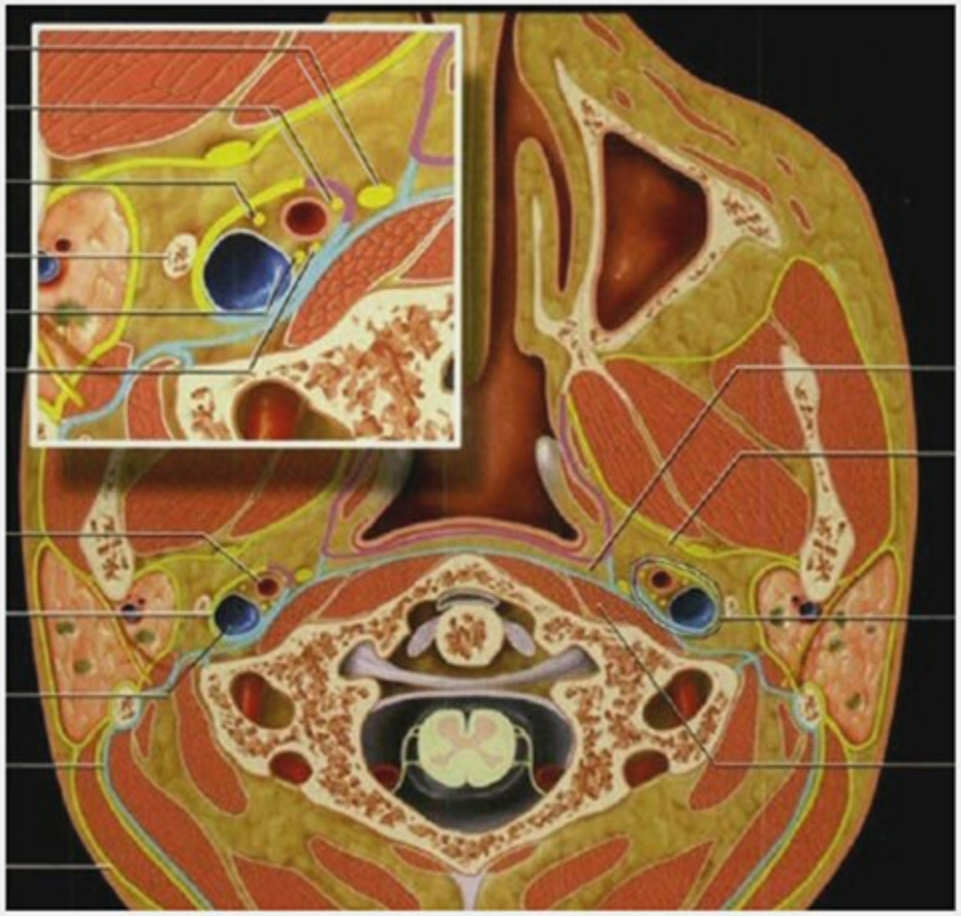
  ICA

  IJV

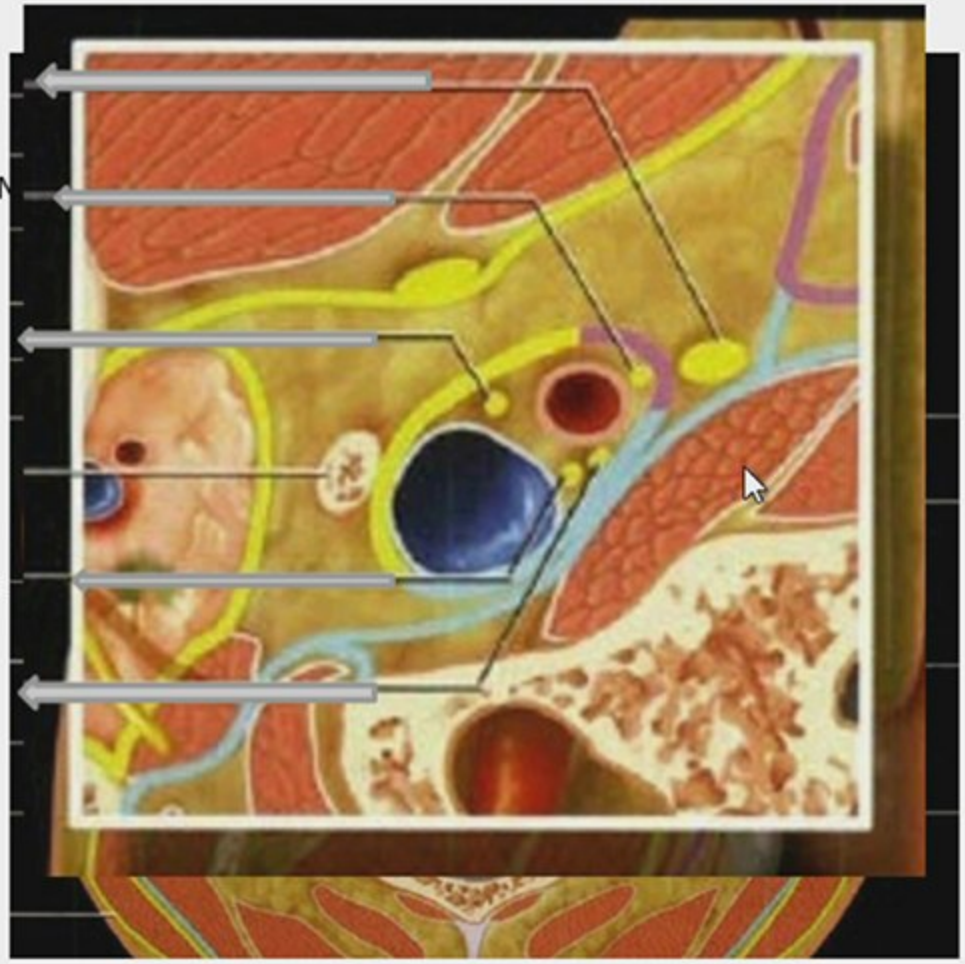
- IH →10.CN

  CCA

  IJV



Sempatik pleksus

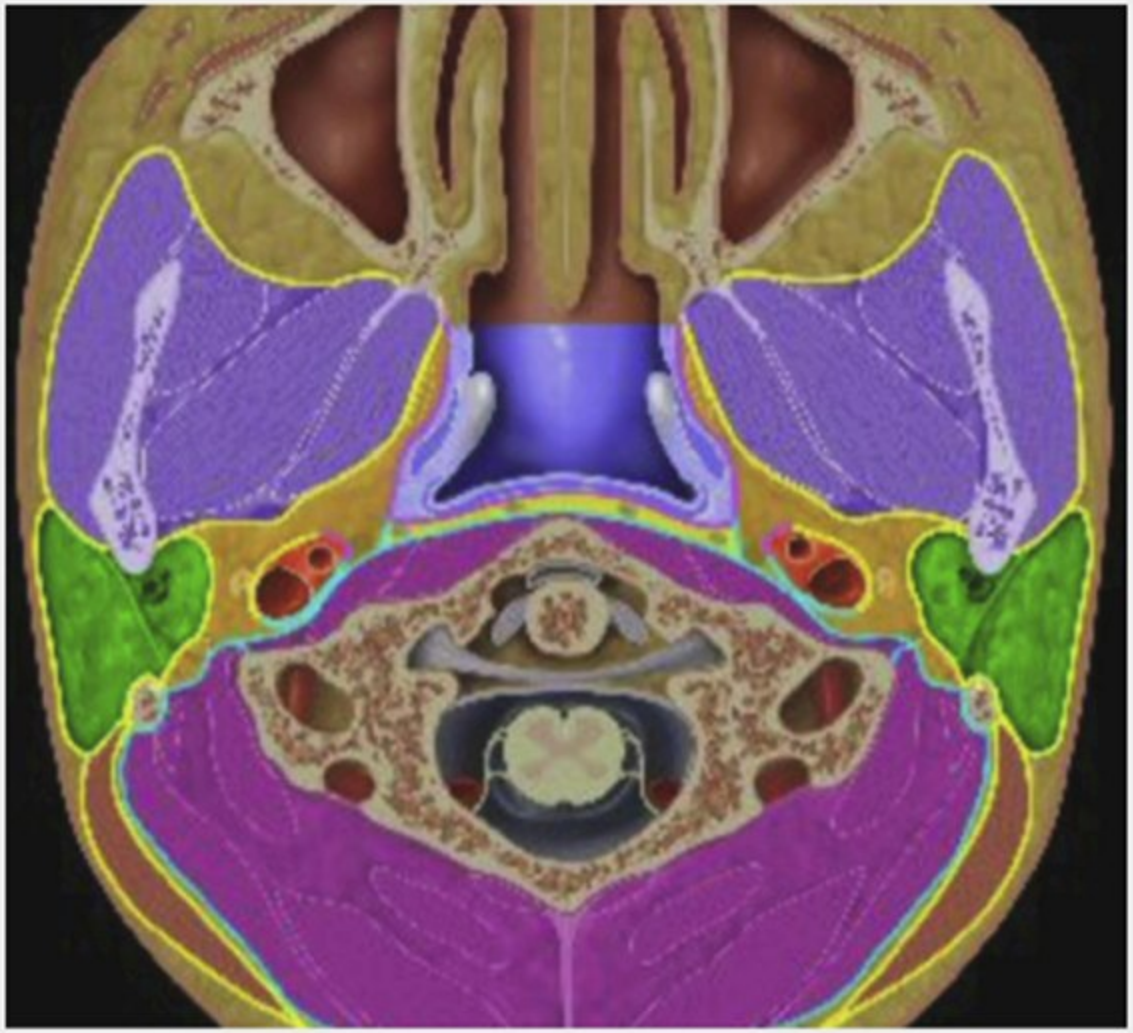


Patolojiler

- Karotid arter → Büküntü, diseksiyon, psödoanevrizma, tromboz
- Juguler ven → Tromboflebit, tromboz
- Glomus → Karotid body paraganglioma, glomus vagale paraganglioma
- 9-12 sinir kökenli → Schwannoma, nörofibroma

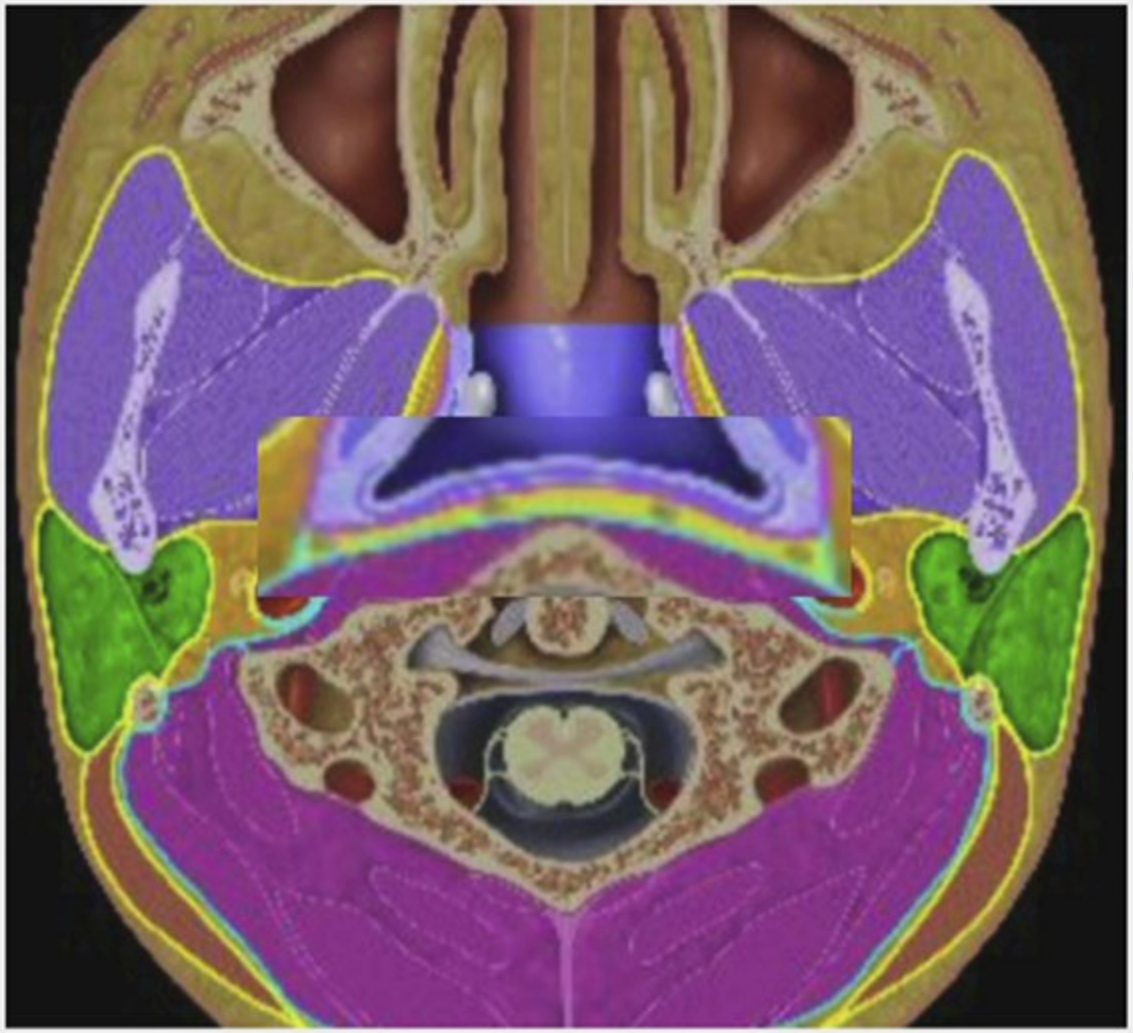
Suprahyoid Alanlar

- Parafaringeal alan
- Faringeal mukozal alan
- Mastikatör alan
- Bukkal alan
- Parotid alan
- Karotid alanı
- Retrofaringeal alan
- Perivertebral alan



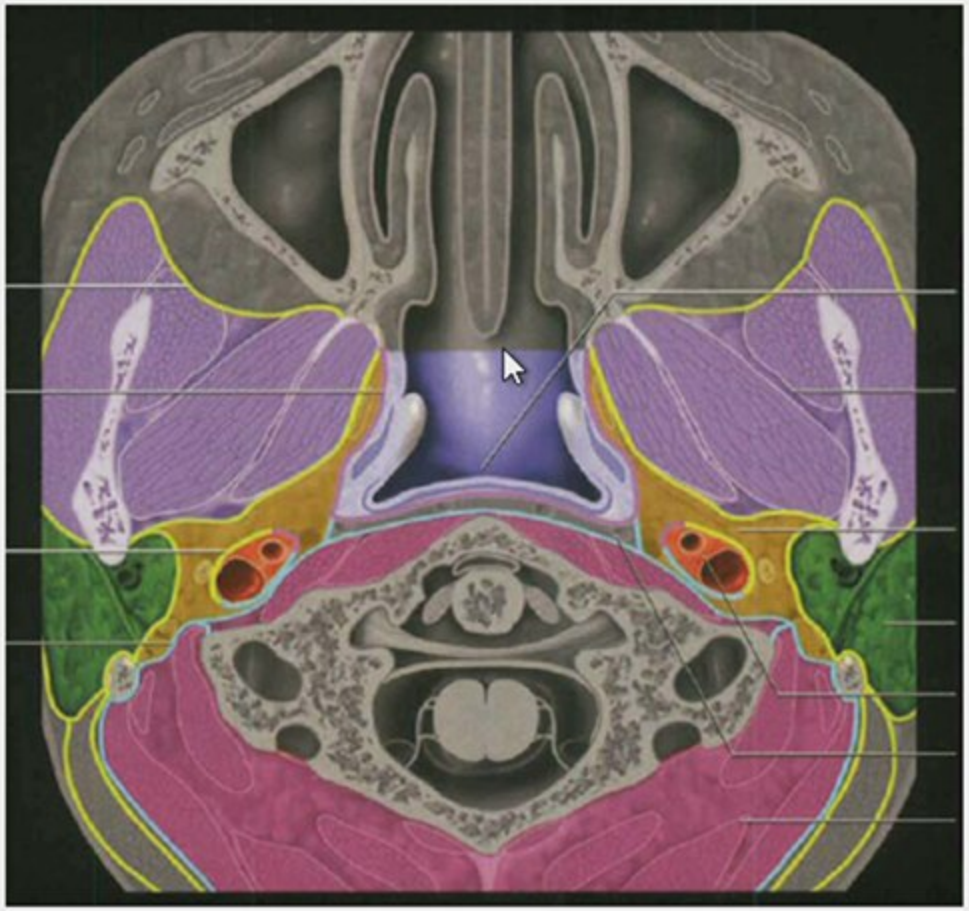
Suprahyoid Alanlar

- Parafaringeal alan
- Faringeal mukozal alan
- Mastikatör alan
- Bukkal alan
- Parotid alan
- Karotid alanı
- Retrofaringeal alan
- Perivertebral alan



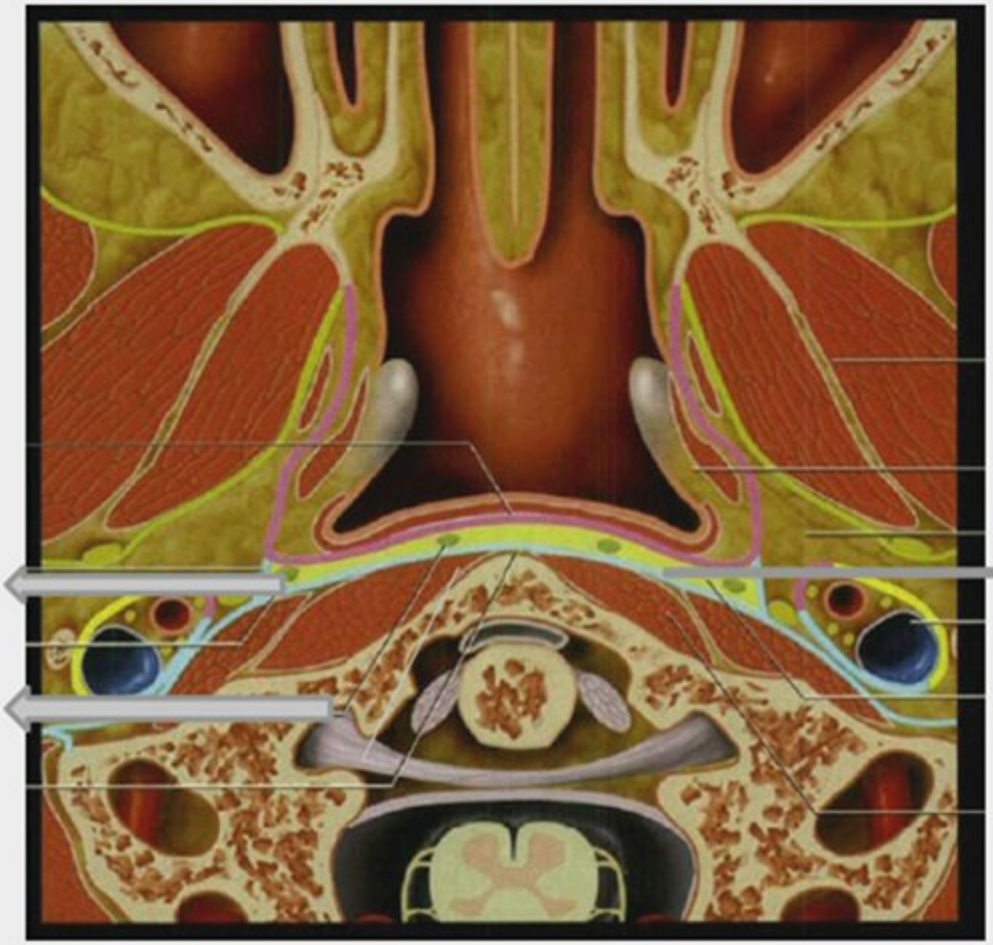
Retrofaringeal Alan(RPS)

- Kafa tabanından T3 vertebraya kadar
- SH'de lenf bezleri ve yağ dokusu, İH'de sadece yağ dokusu
- Bu bölgede yer alan patolojilerde prevertebral kaslar arkaya deplase olur.



Doku İçeriği

- SH:
  - Yağ doku (temel)
  - LN lateral grup = Rouviere
  - LN medial grup
- IH:
  - Yağ doku
- Lezyon sıklıkla SH alandan başlayıp inferiora yayılır


Lateral grup LN
Medial grup LN
RPS

Patolojiler(Yalancı)

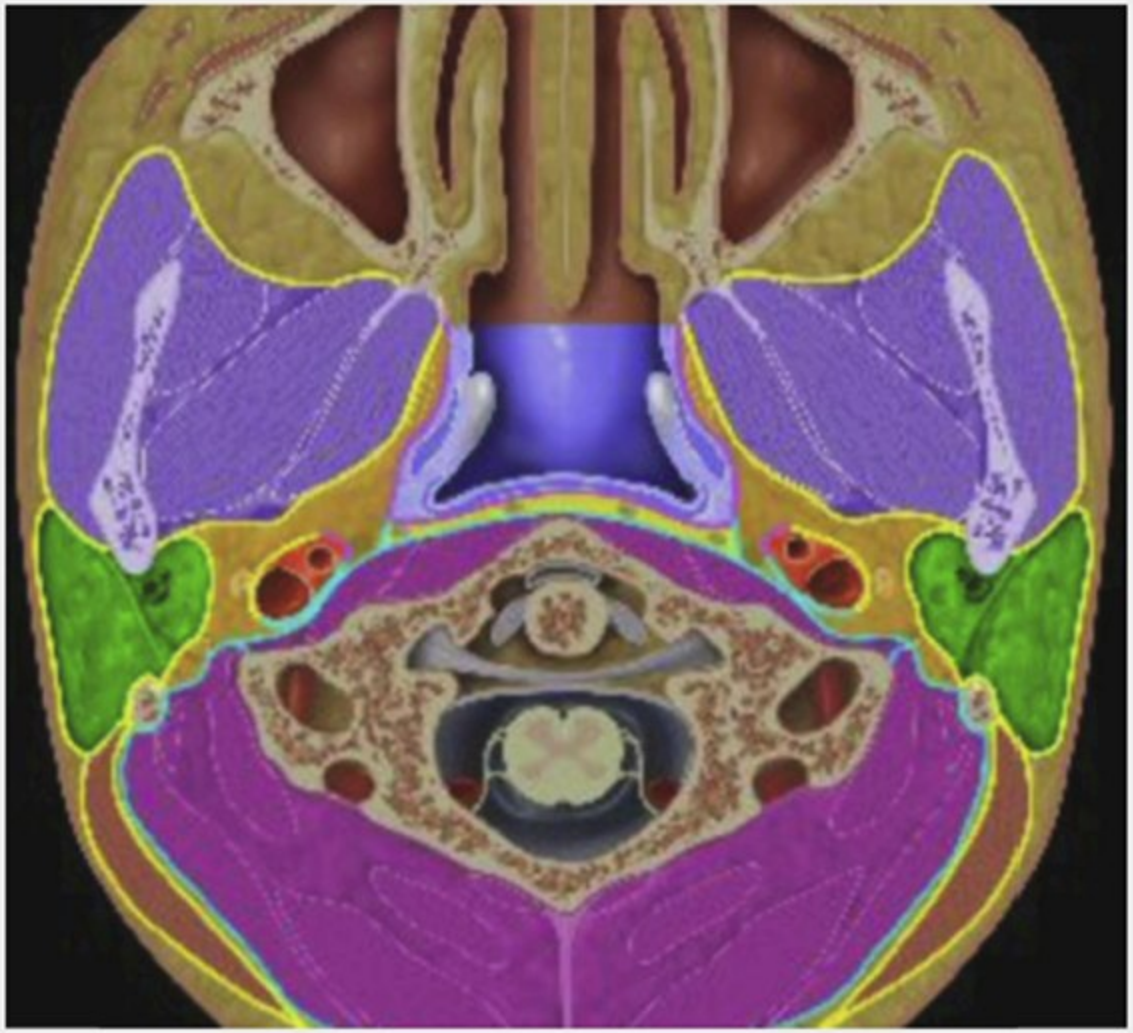
- Bükünтülü dilate karotid arter

Patolojiler

- Lenf bezleri:
  - Supüratif lenf bezlerinden gelişen abseler
  - SCC nodal yayılımı
  - Uzak metastazlar ve non-Hodgkin lenfoma
- Nazofarinks, orofarinks posterior duvarı ve hipofarinks SCC ilk RPS LN'larına drene olur

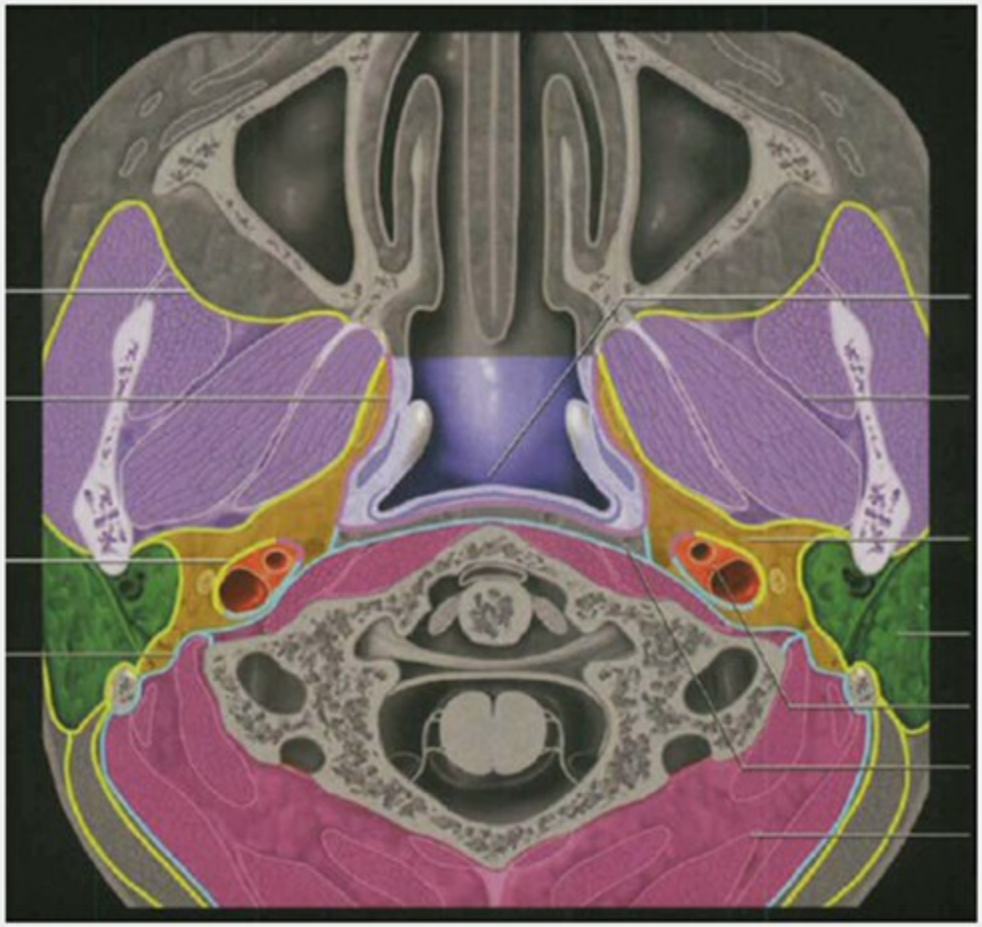
Suprahyoid Alanlar

- Parafaringeal alan
- Faringeal mukozal alan
- Mastikatör alan
- Bukkal alan
- Parotid alan
- Karotid alanı
- Retrofaringeal alan
- Perivertebral alan



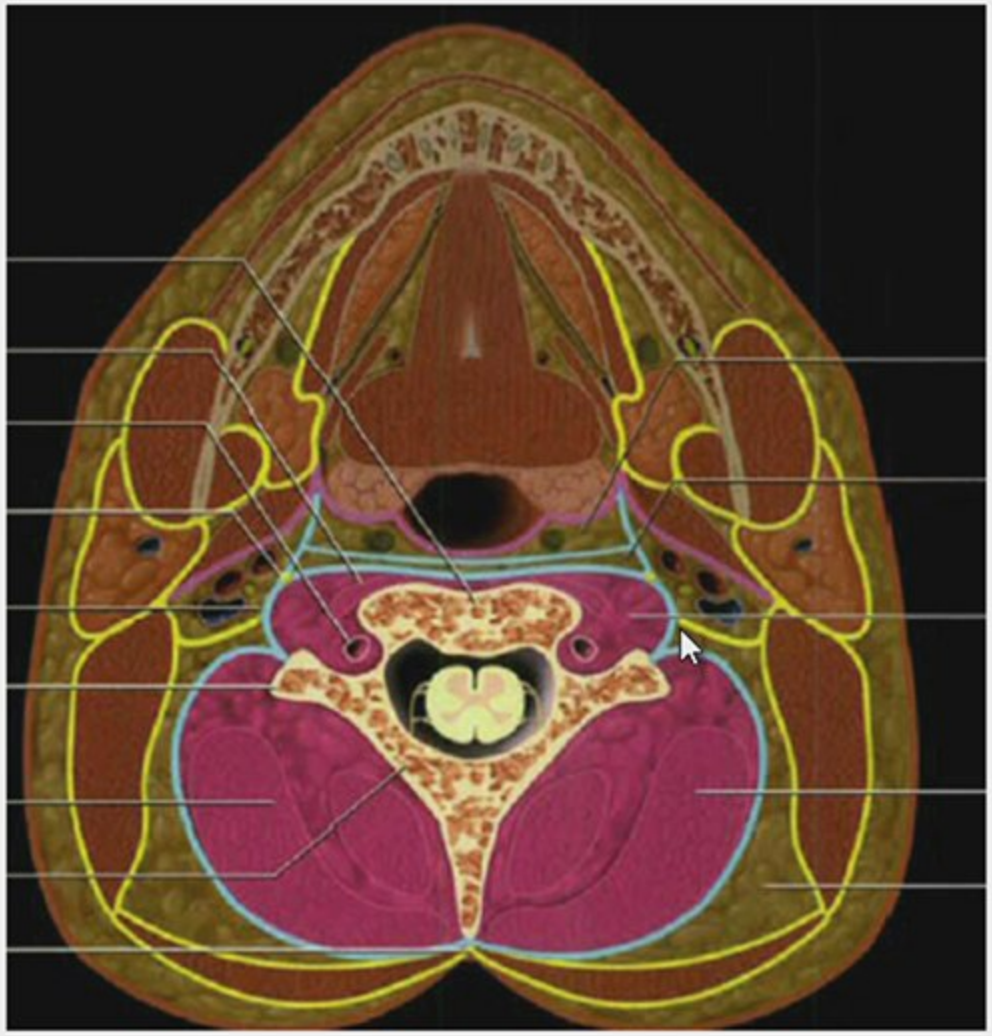
Perivertebral Alan(PVS)

- RPS arka kesimi
  - Prevertebral kısım
  - Paravertebral kısım
- Patolojilerinde prevertebral kaslar öne itilirler.



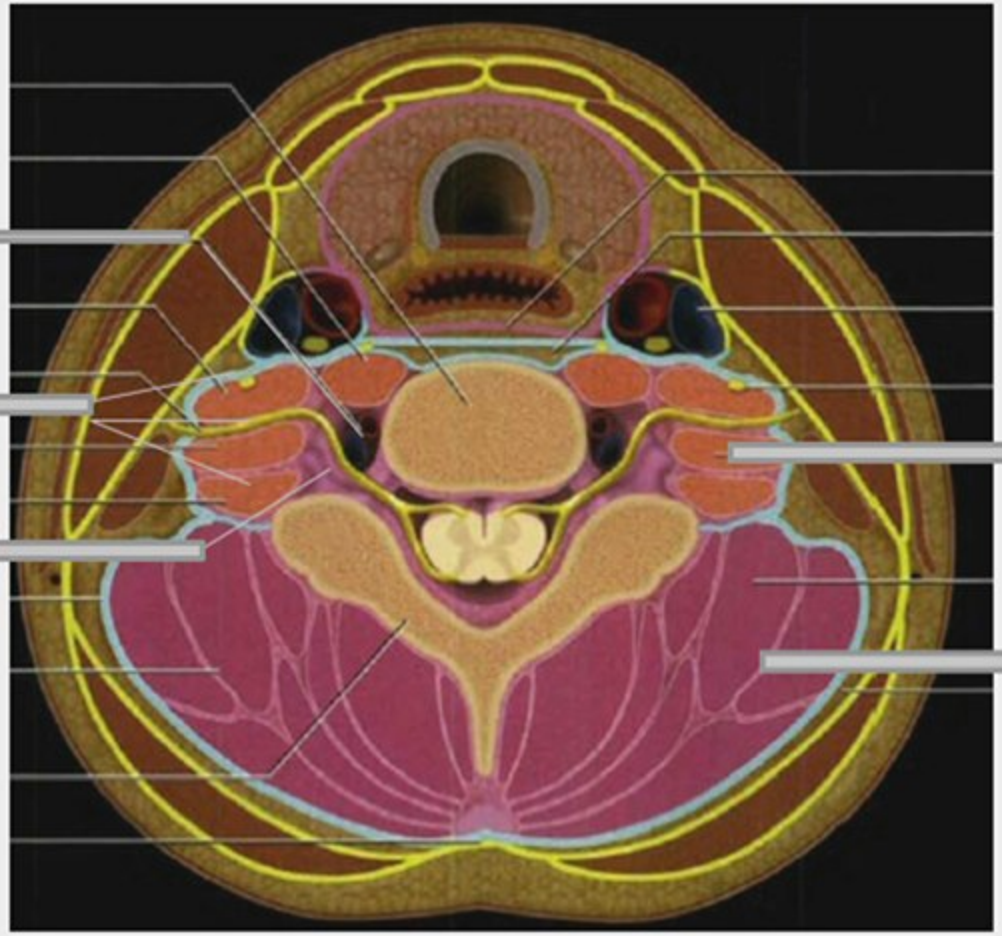
Tehlikeli Alan(Danger Space)

- RPS posterioru ve PVS önü arasındadır.
- Buraya uzanan enfeksiyonlar sınırlama olmadan diyafragma düzeyine kadar arka mediastene uzanabilirler



Doku İçeriği

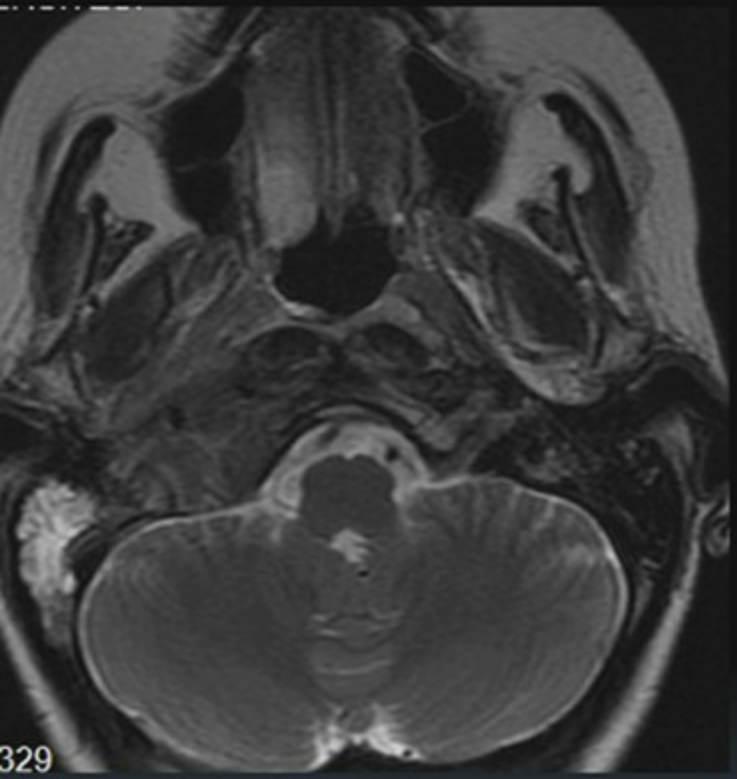
- Prevertebral
  - Prevertebral kaslar (longus koli ve capitis)
  - Skalen kaslar (anterior media posterior
  - Brakial pleksus kökleri
  - Frenik sinir (C3-C5)
  - Vertebral arter ve ven
  - Vertebra korpusları
- Paravertebral
  - Paraspinal kaslar
  - Vertebral kolon posterior elemanları


Vertabral arter ve ven
Skalen kaslar
Brakial pleksus kökleri
Prevertebral kısım
Paravertebral kısım

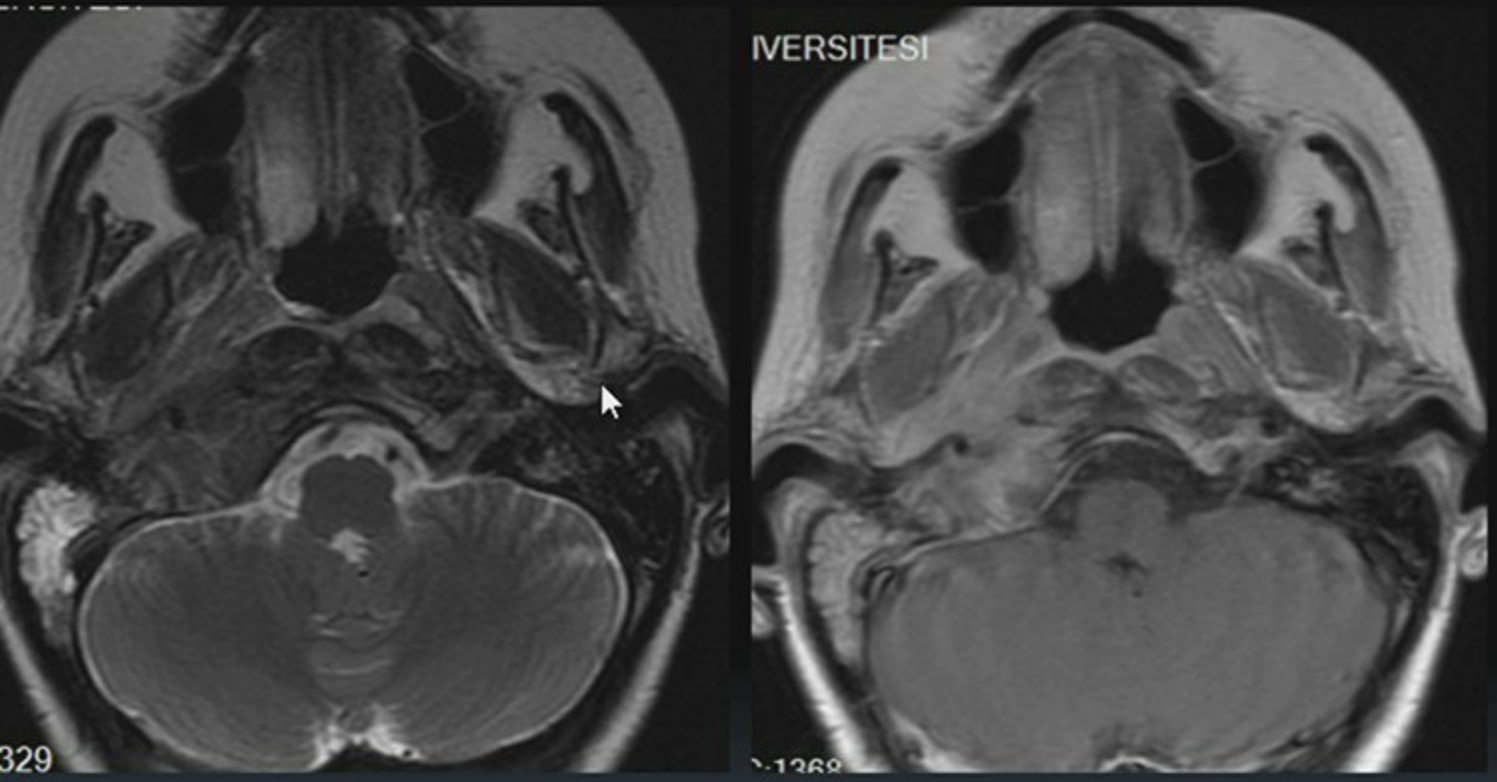
Patolojiler

- En sık: Vertebral kökenli primer ve metastatik kitleler, kordoma
- Anterior disk herniasyonları ve büyük osteofitler sık olarak gözlenirler

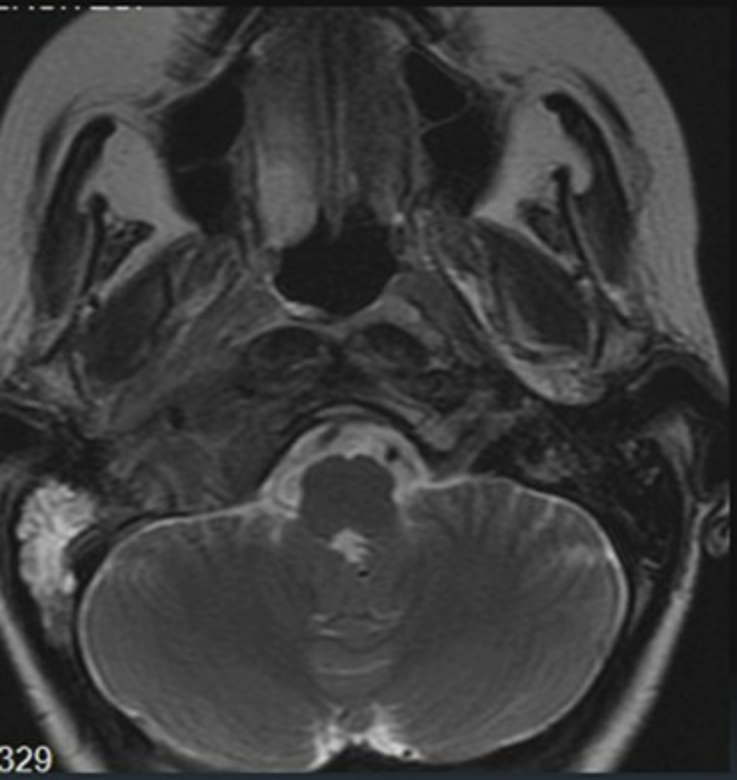
46 yaş, kadın, sağ kulak ağrısı

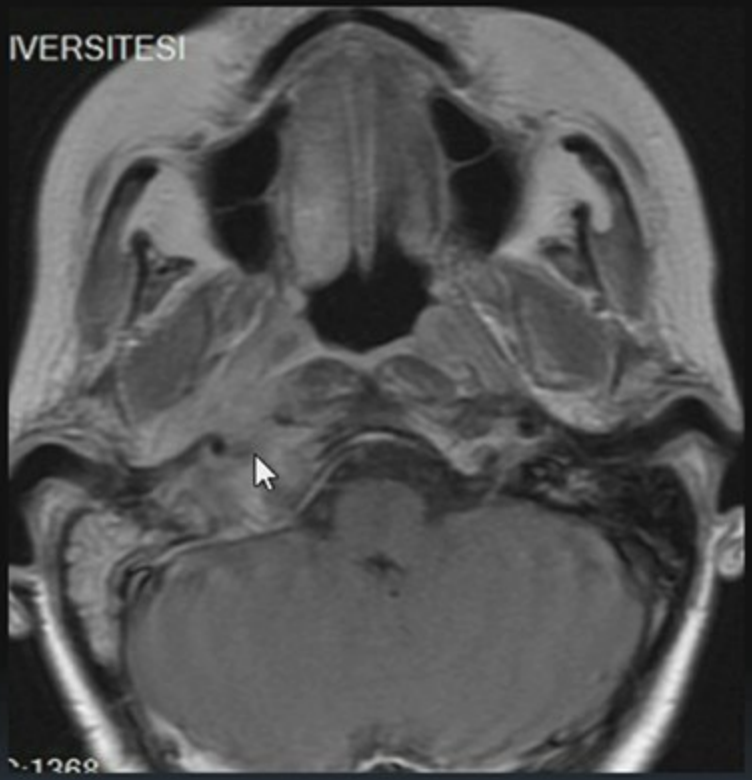


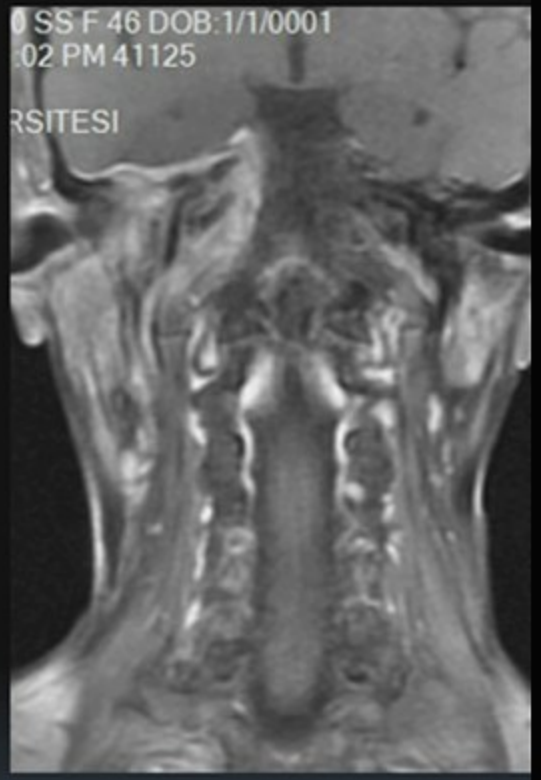
46 yaş, kadın, sağ kulak ağrısı



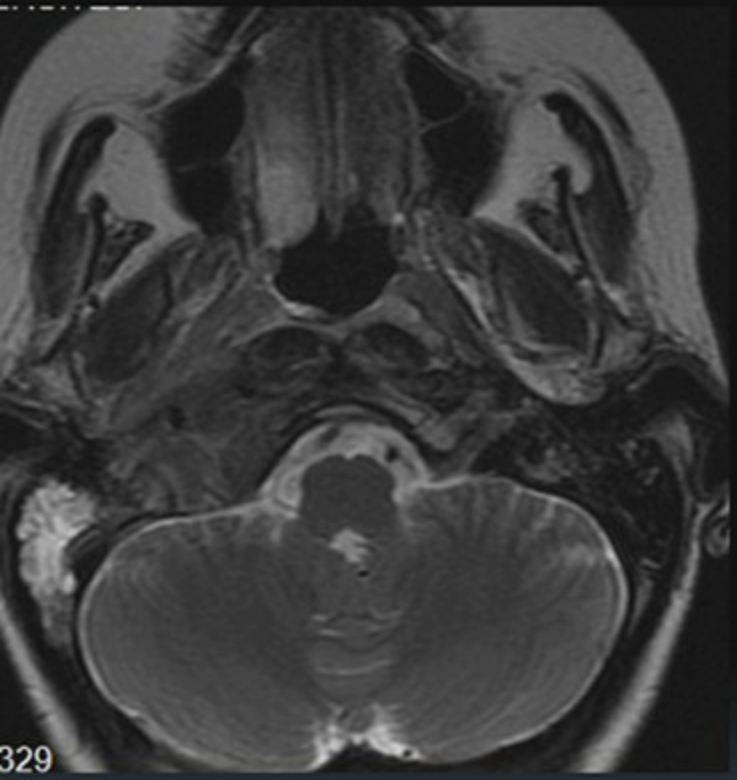
46 yaş, kadın, sağ kulak ağrısı

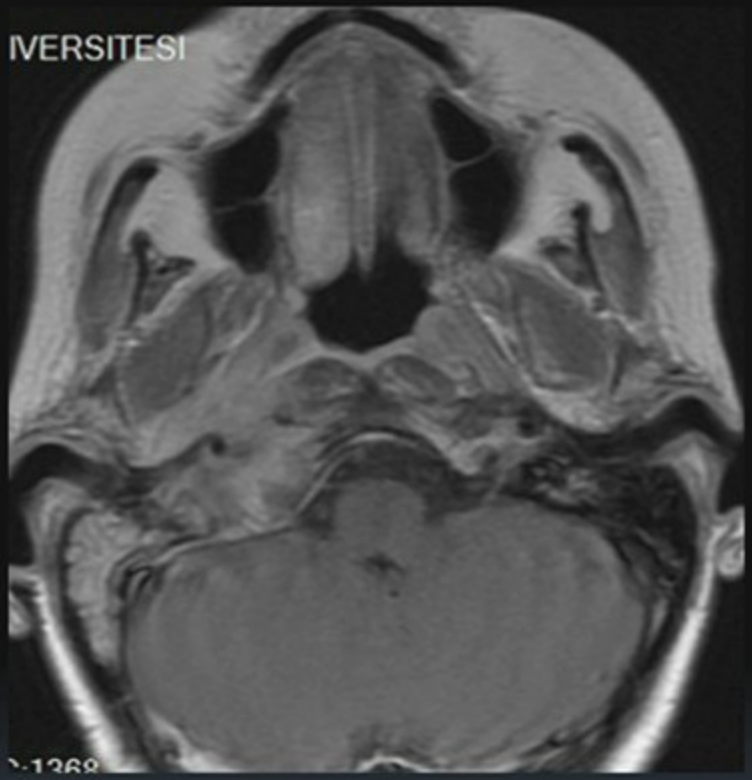


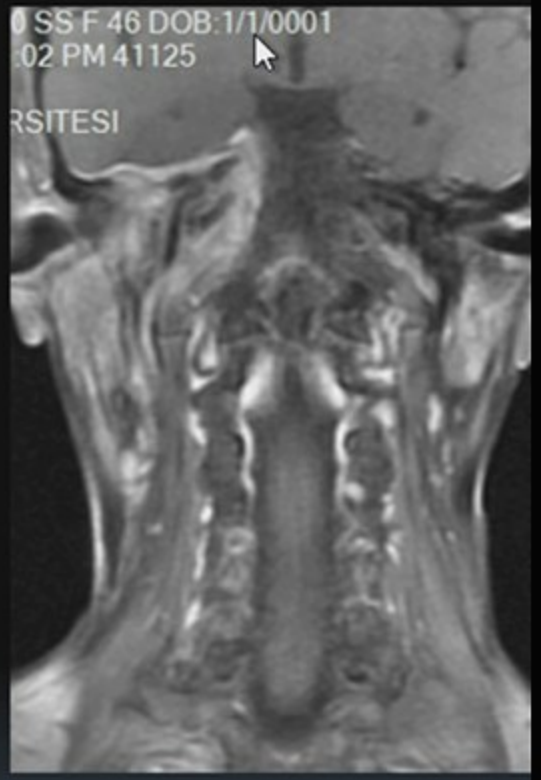




46 yaş, kadın, sağ kulak ağrısı





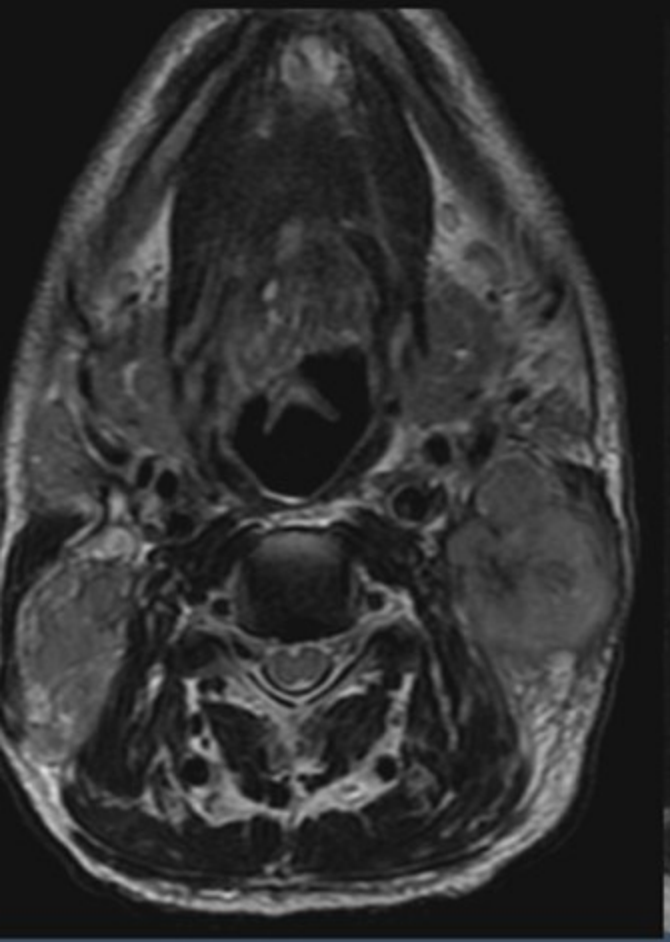


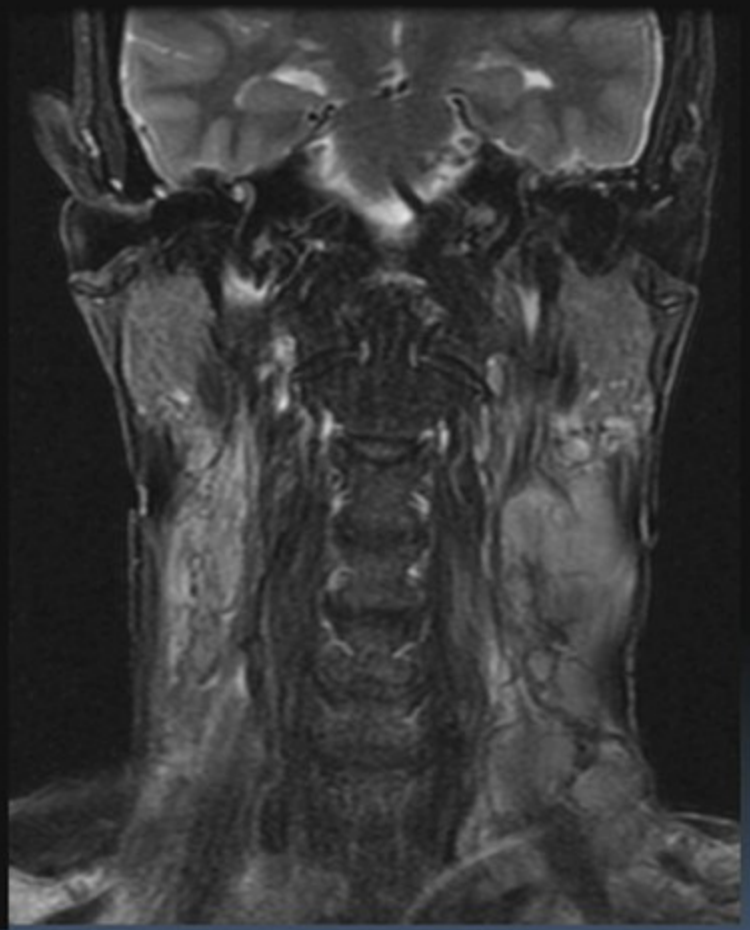
Nonkeratinize Nazofarenks SCC

Skuamöz Hücreli Karsinom

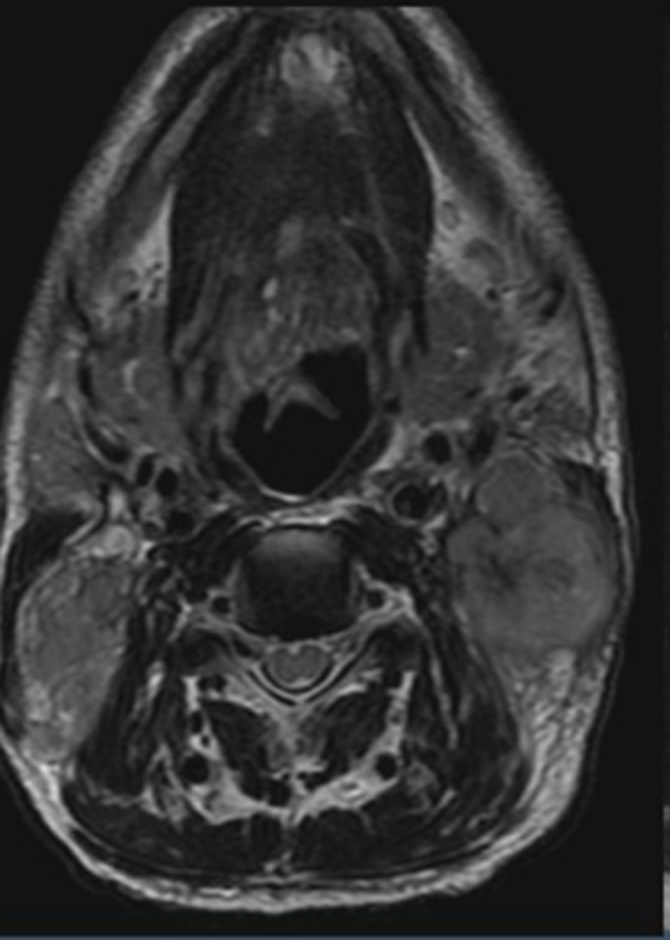
- En sık karşılaşılan tablo "seviye II ve V" lenf nodlarının ele gelmesi
- **Tek taraflı seröz otitis medialı olgularda mutlaka nazofarengeal düzlem incelenmeli**

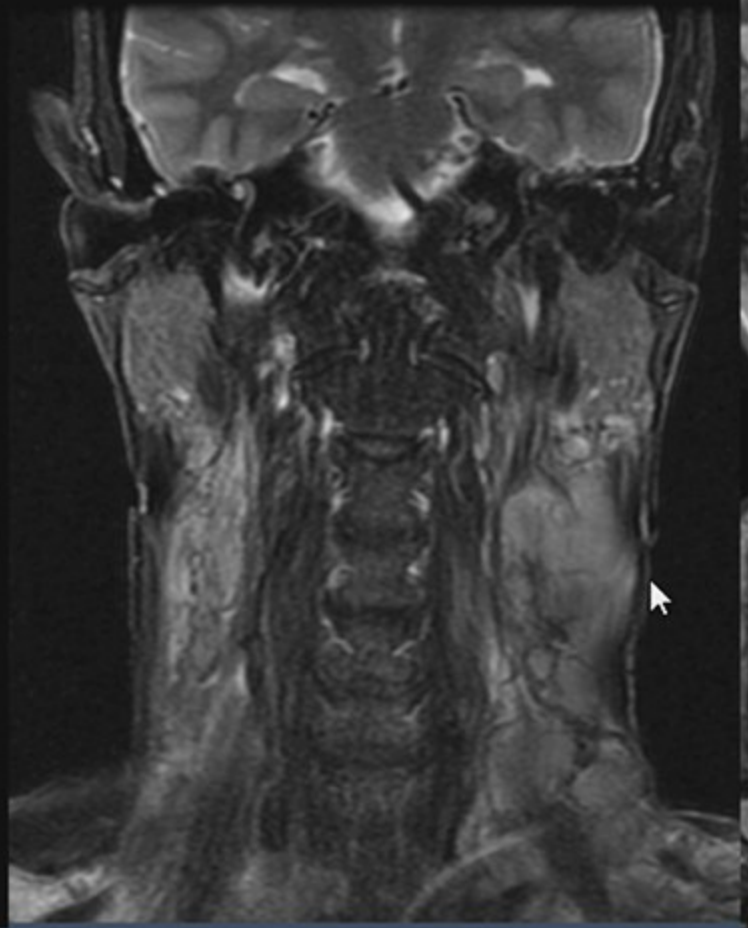
58 yaş, erkek, lenfoma öyküsü, boyunda şişlik

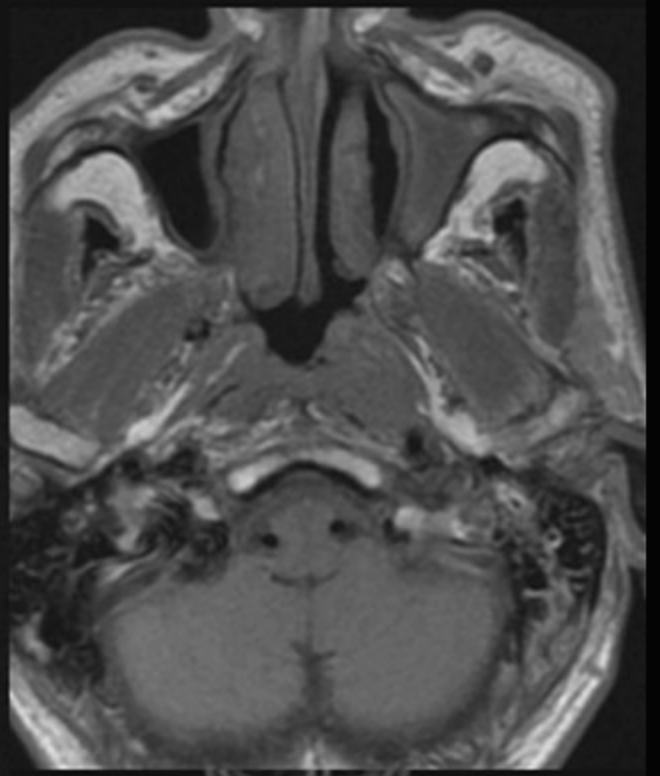


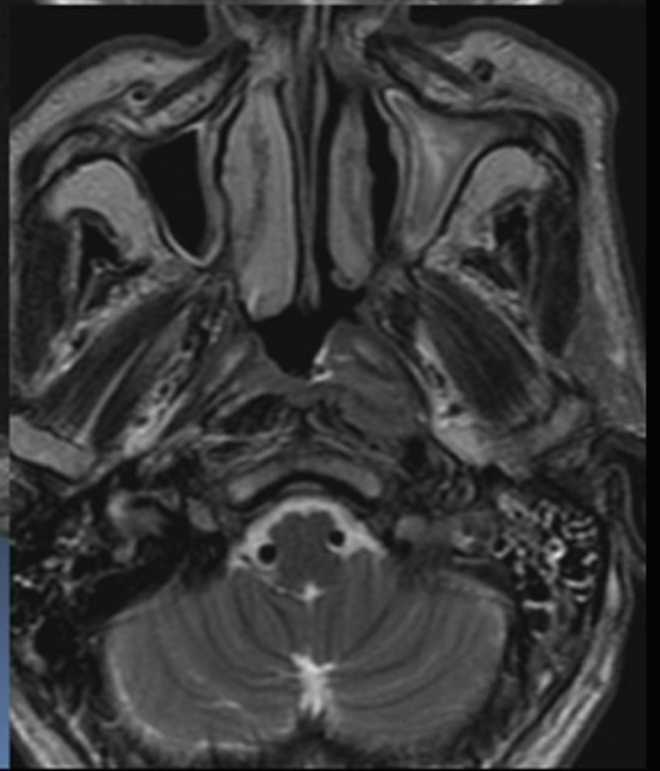


58 yaş, erkek, lenfoma öyküsü, boyunda şişlik

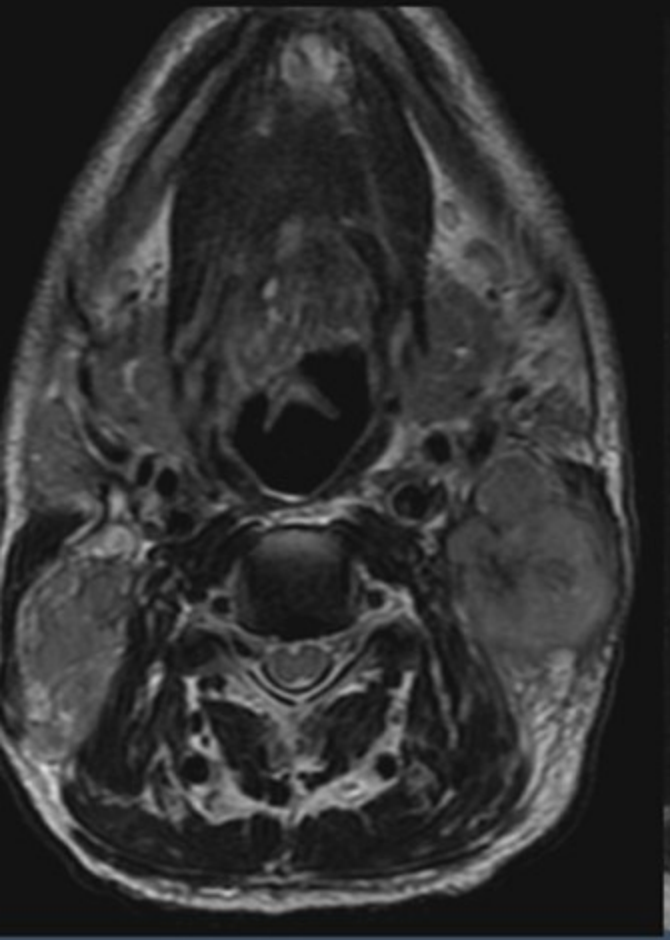


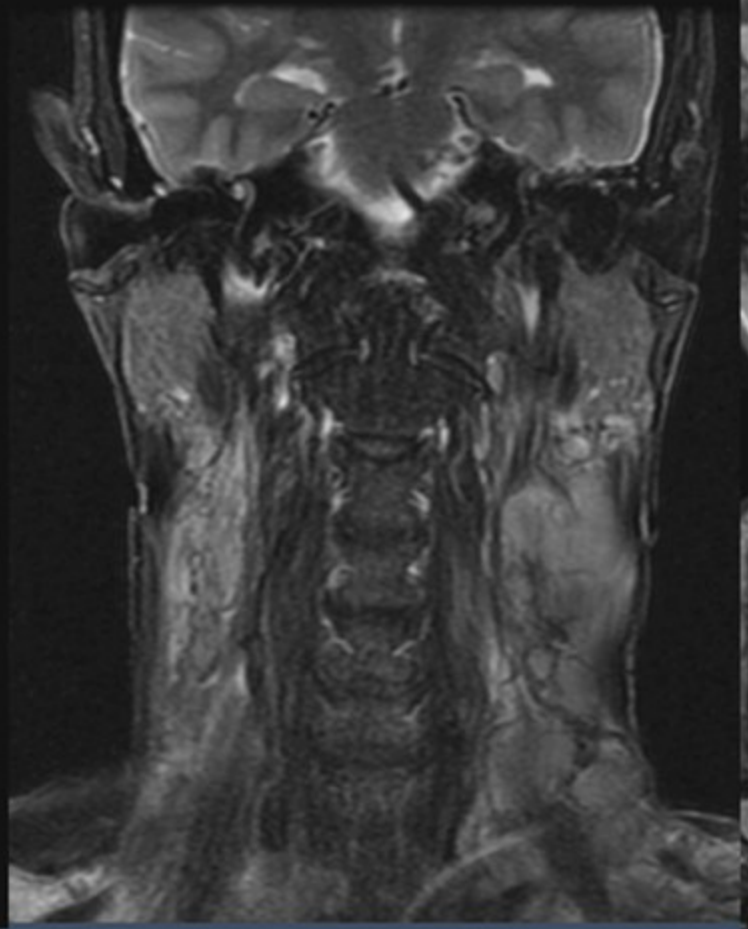


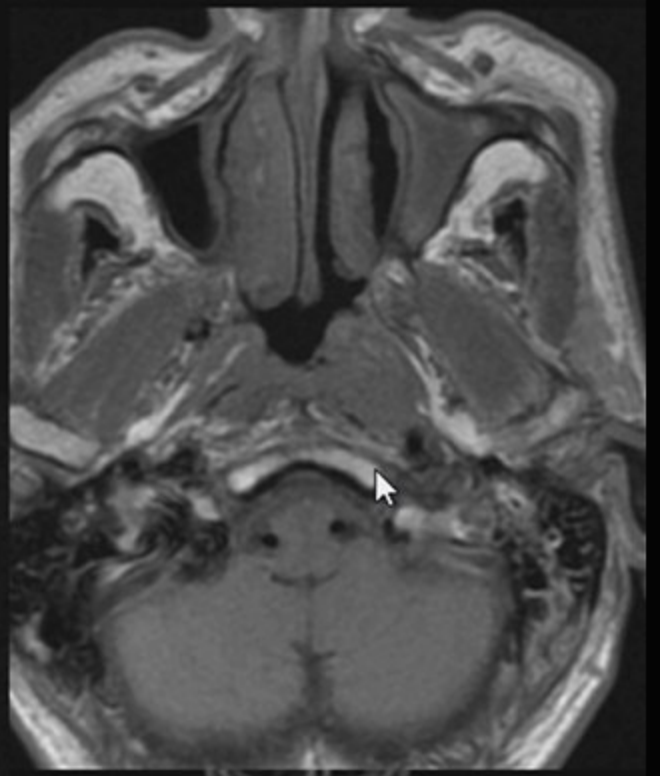


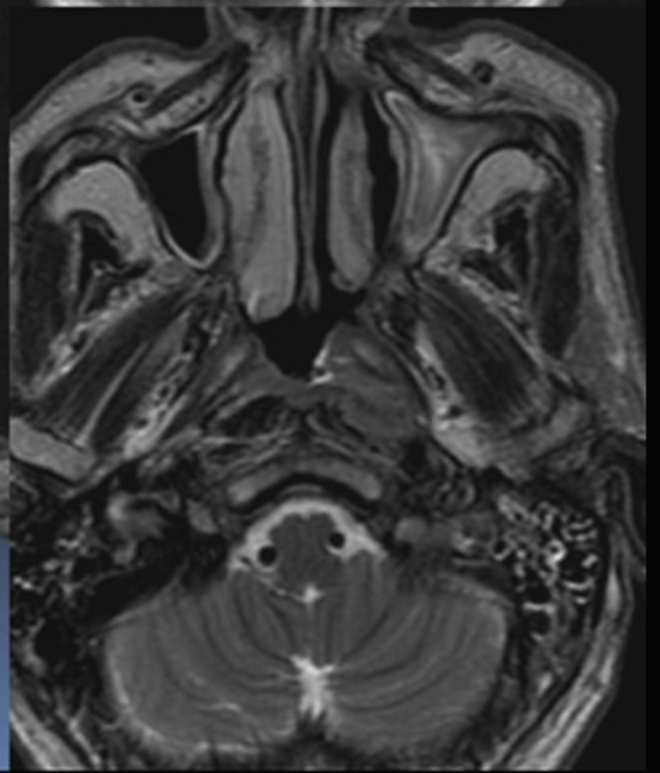


58 yaş, erkek, lenfoma öyküsü, boyunda şişlik



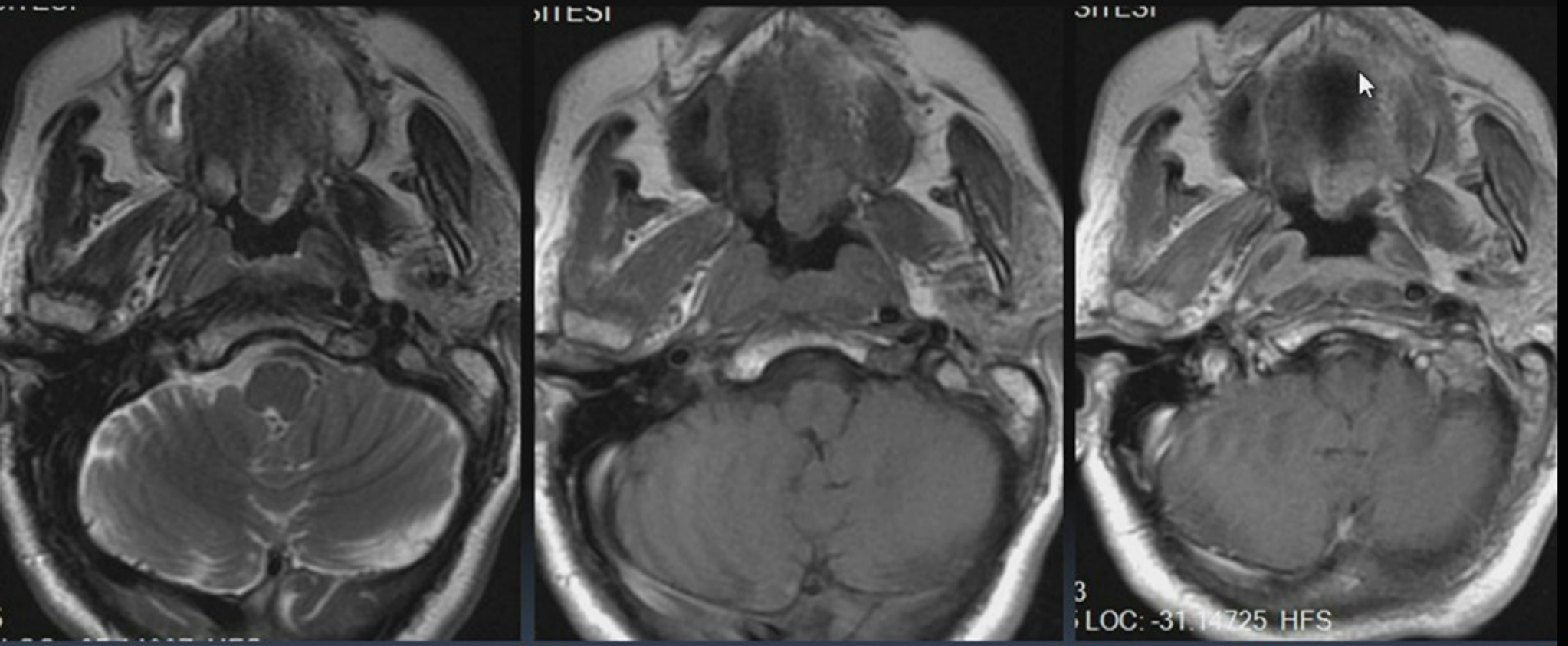




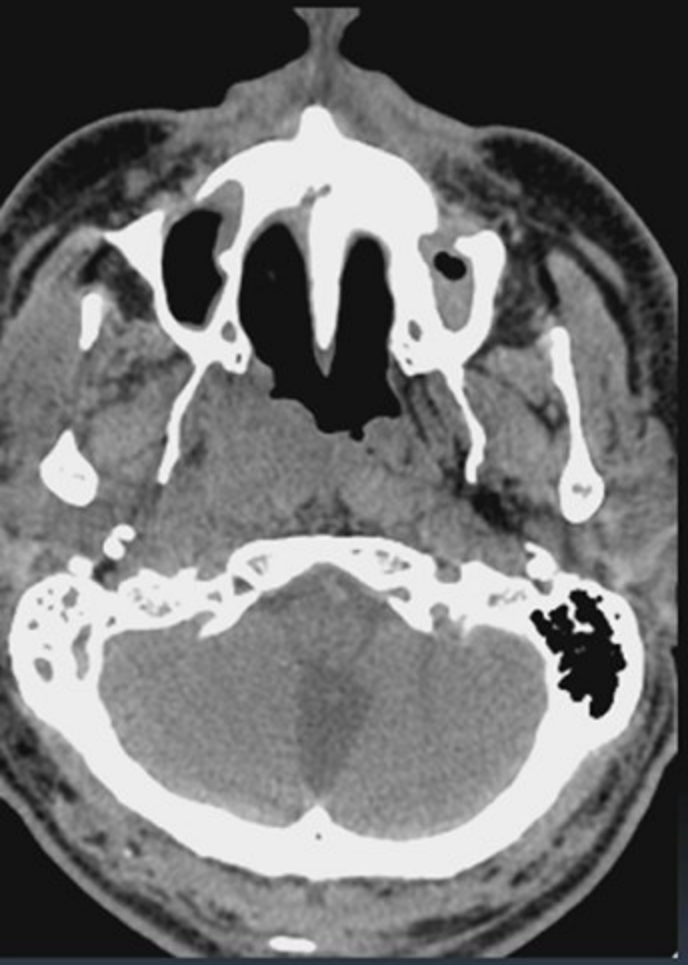


Nazofarenks SCC

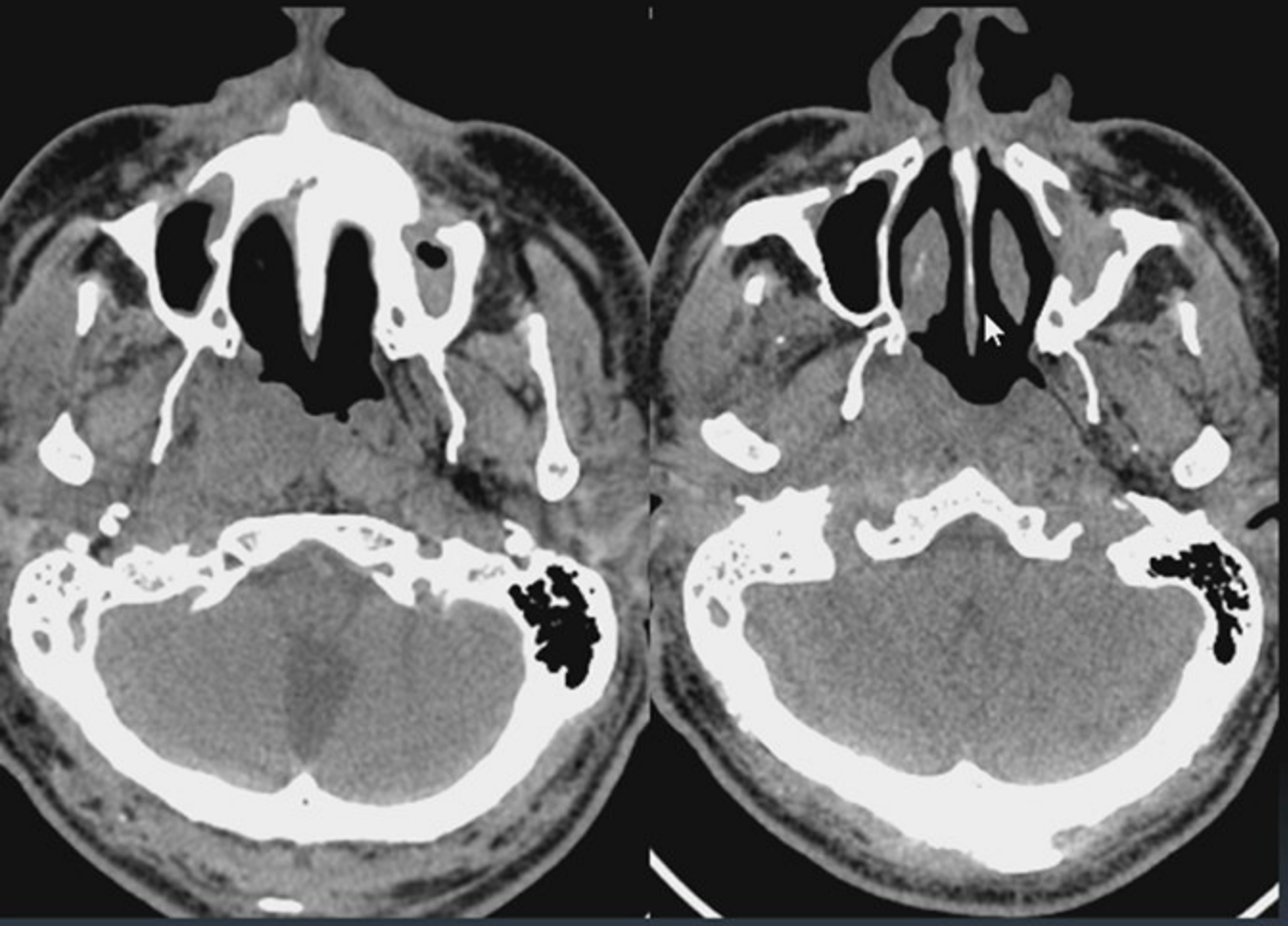
70 yaş, kadın, burun tıkanıklığı kanaması



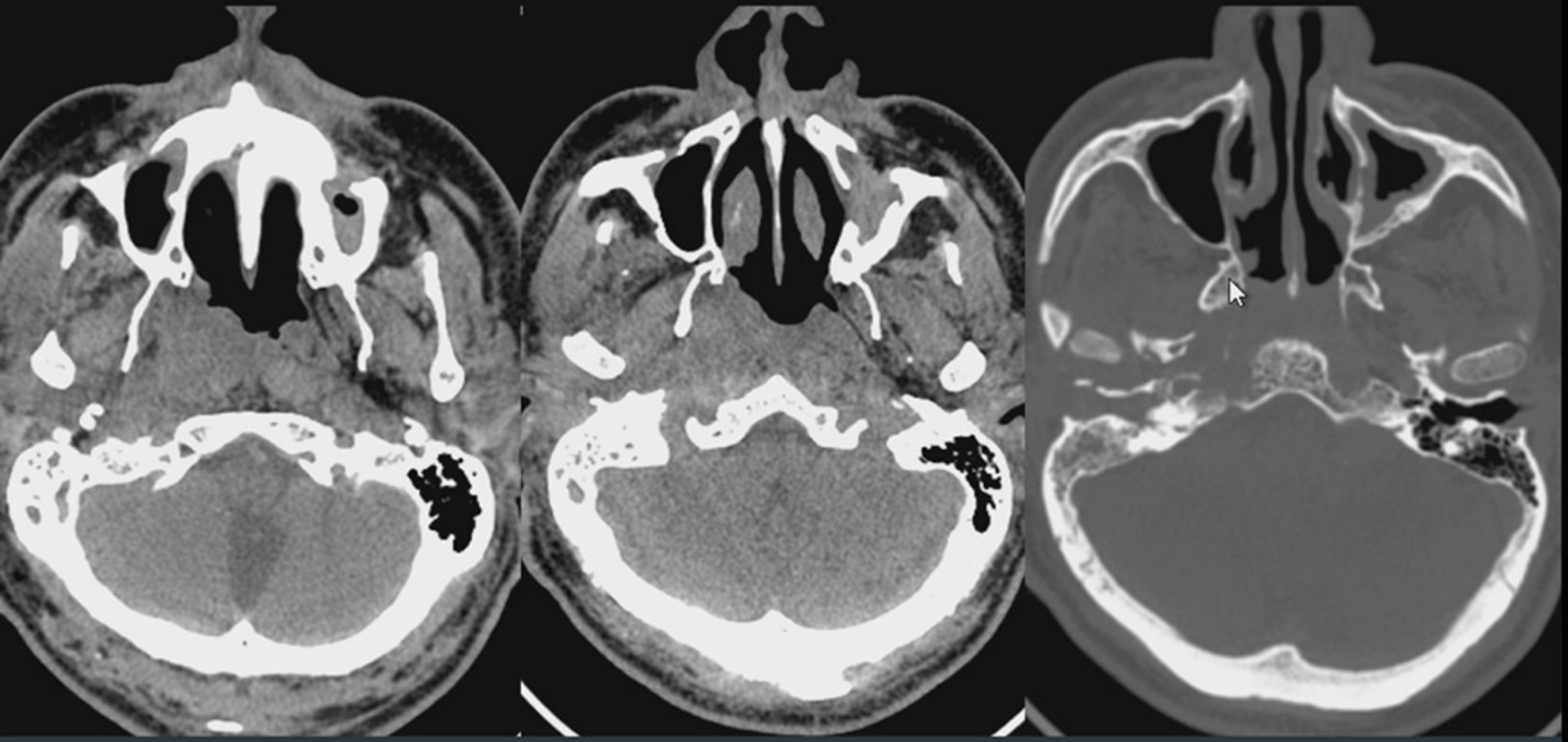
58 yaş, erkek, sağ kulak ağrısı ve otit

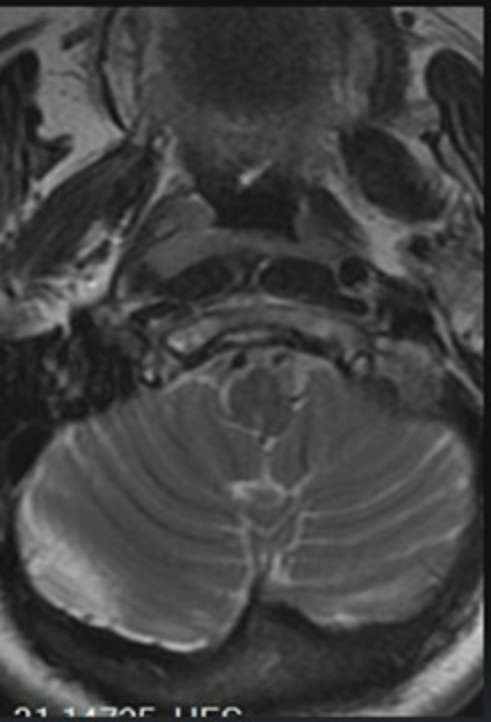


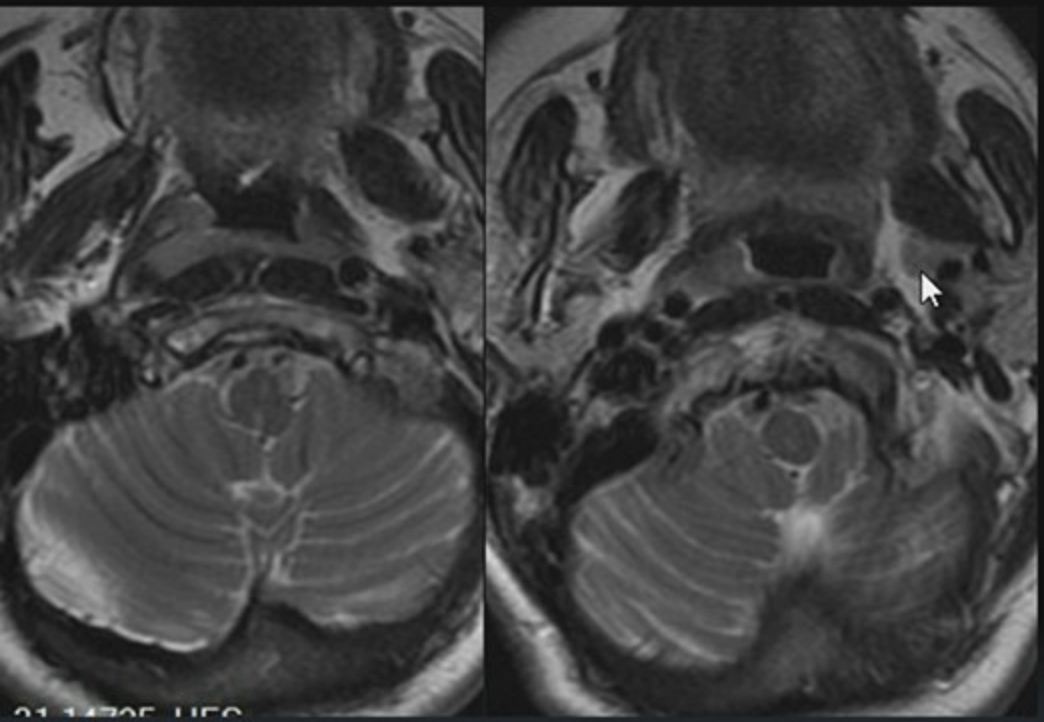
58 yaş, erkek, sağ kulak ağrısı ve otit

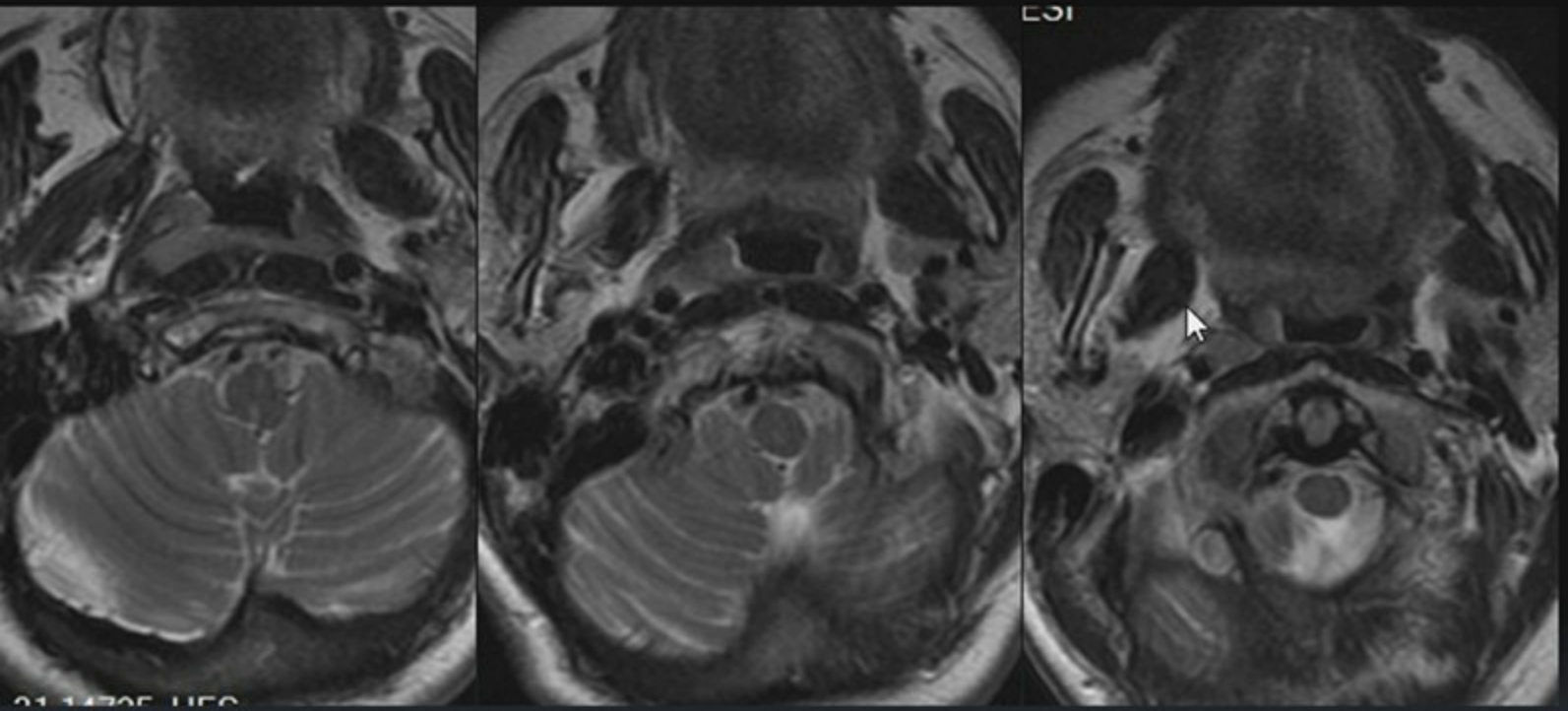


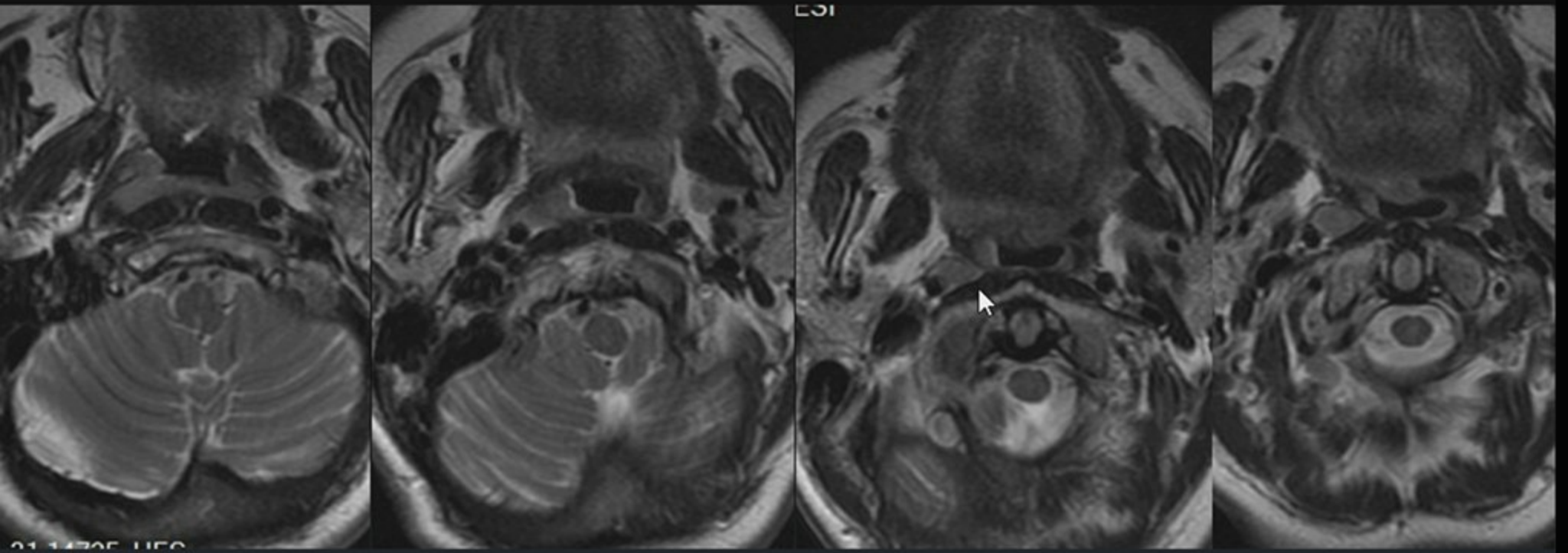
58 yaş, erkek, sağ kulak ağrısı ve otit

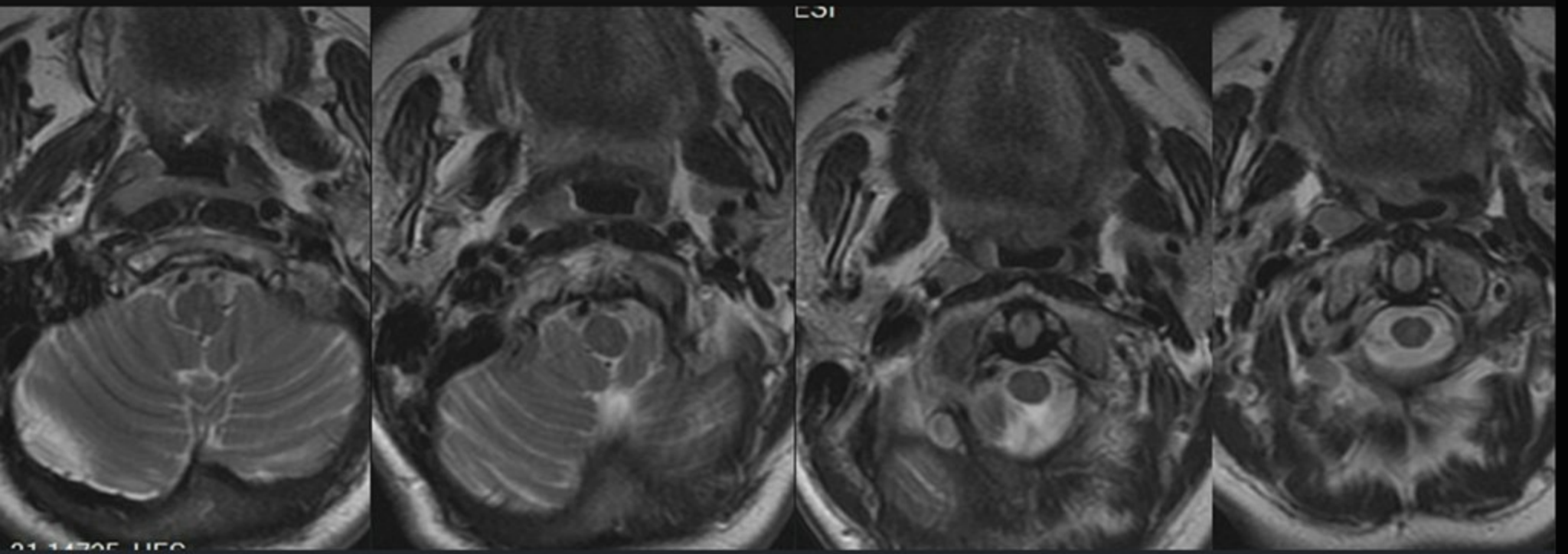






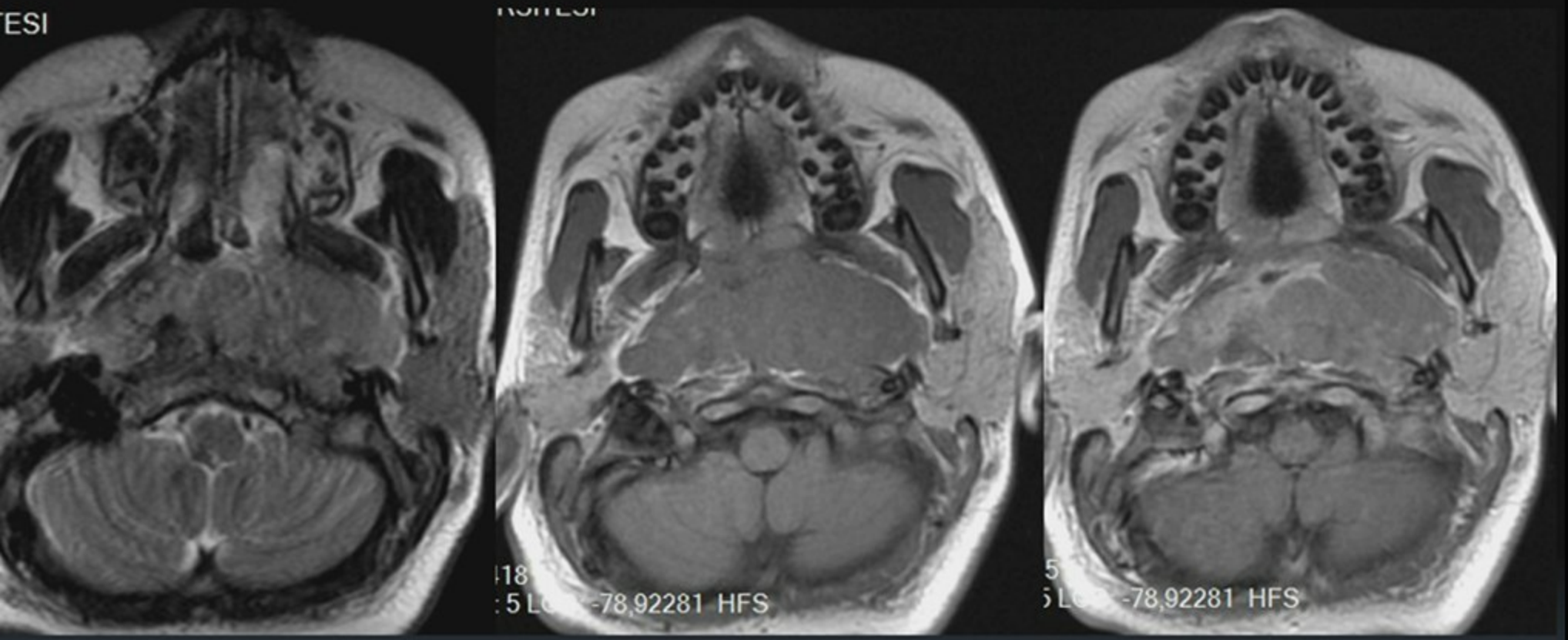




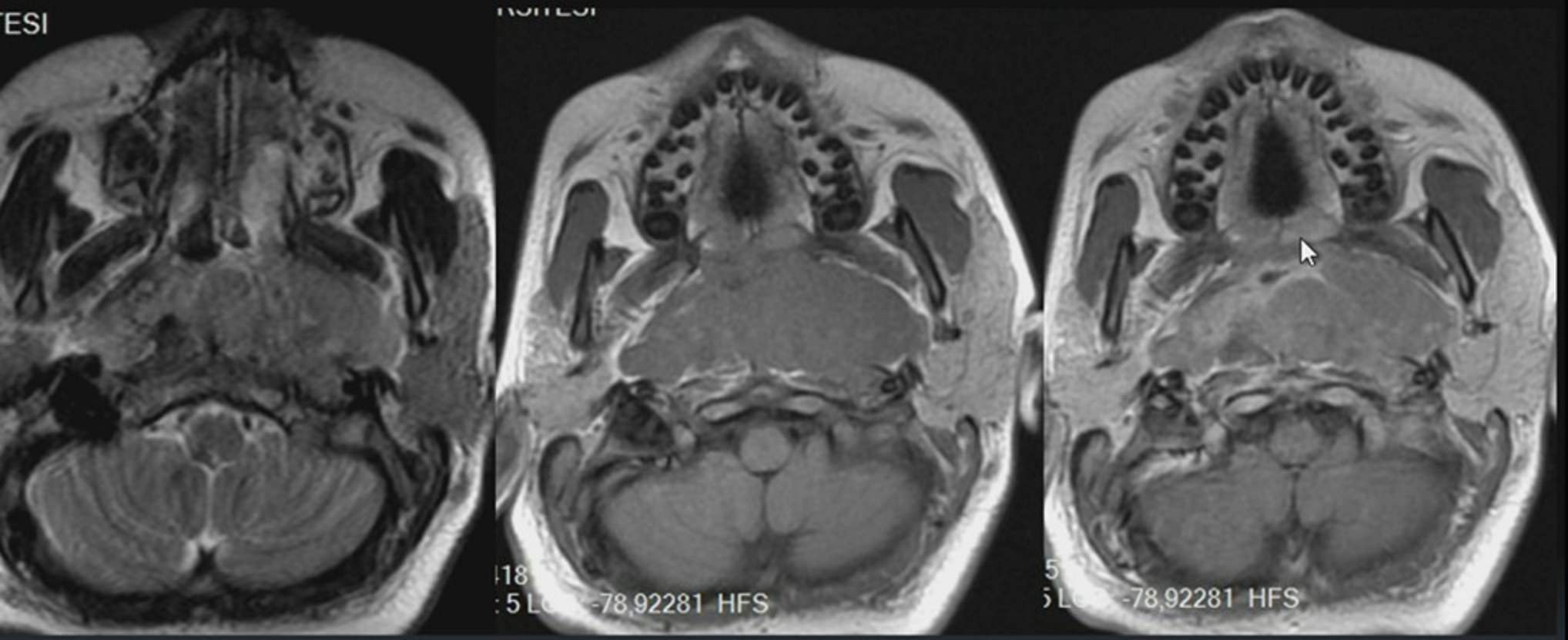


*Genellikle ilk olarak retrofaringeal mesafe lenf nodları tutulur

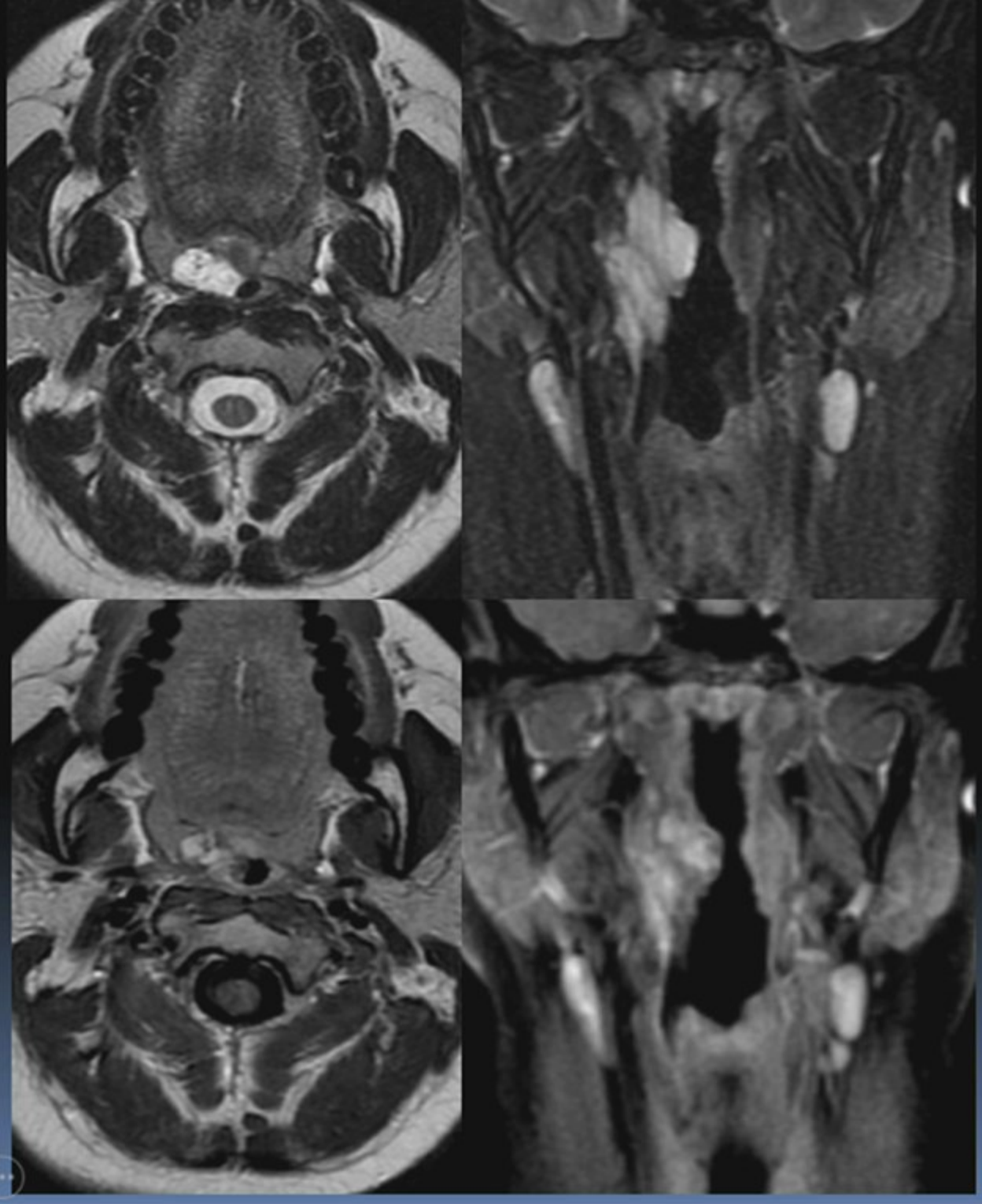
15 yaş, erkek

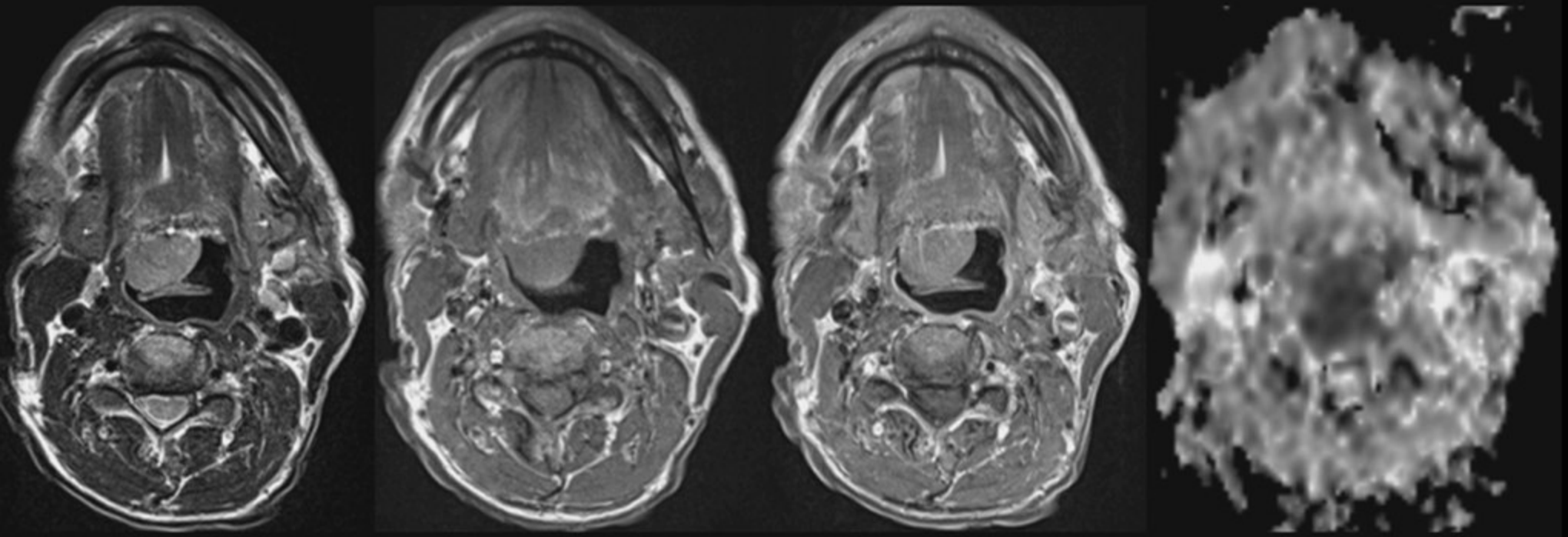


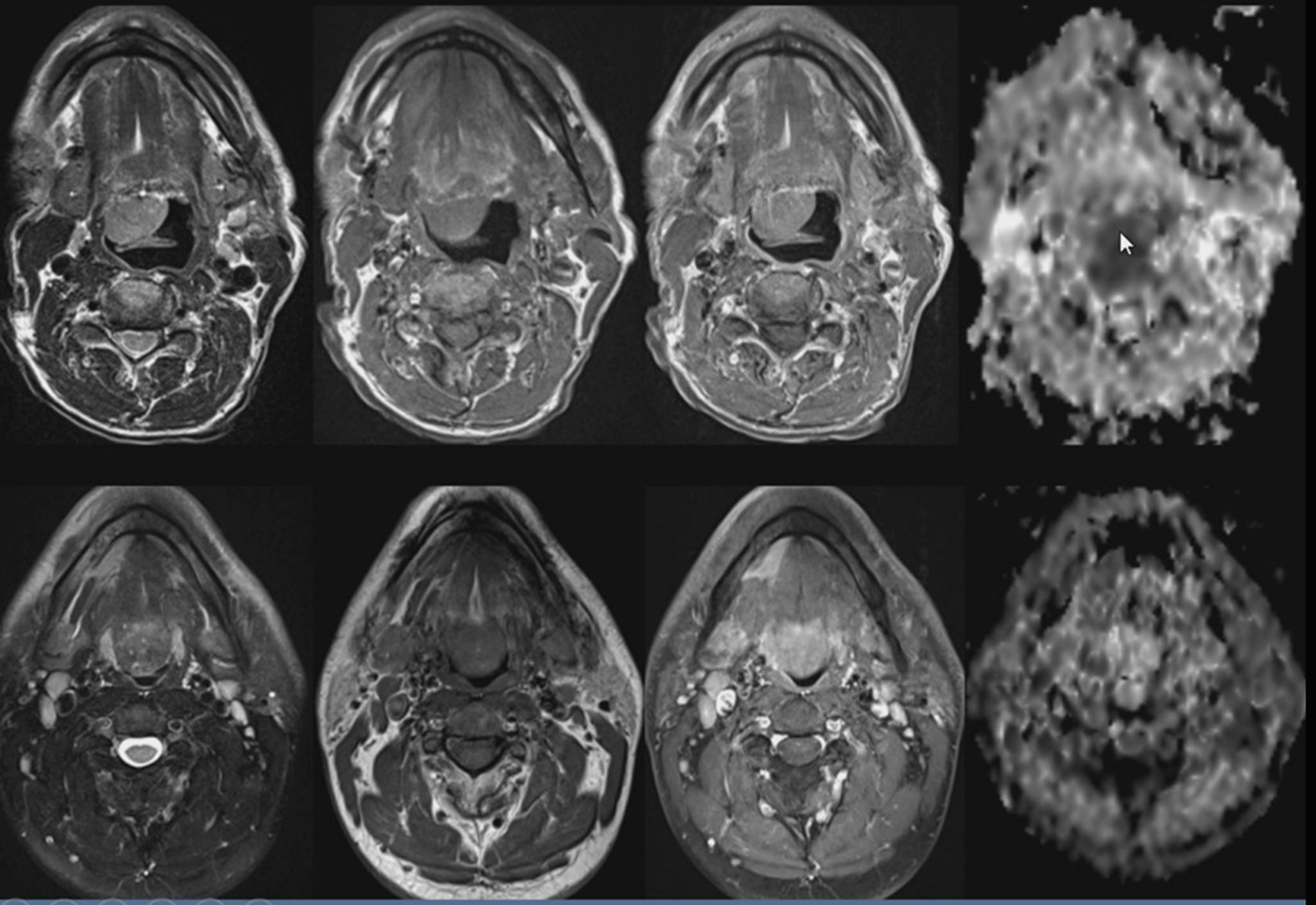
15 yaş, erkek

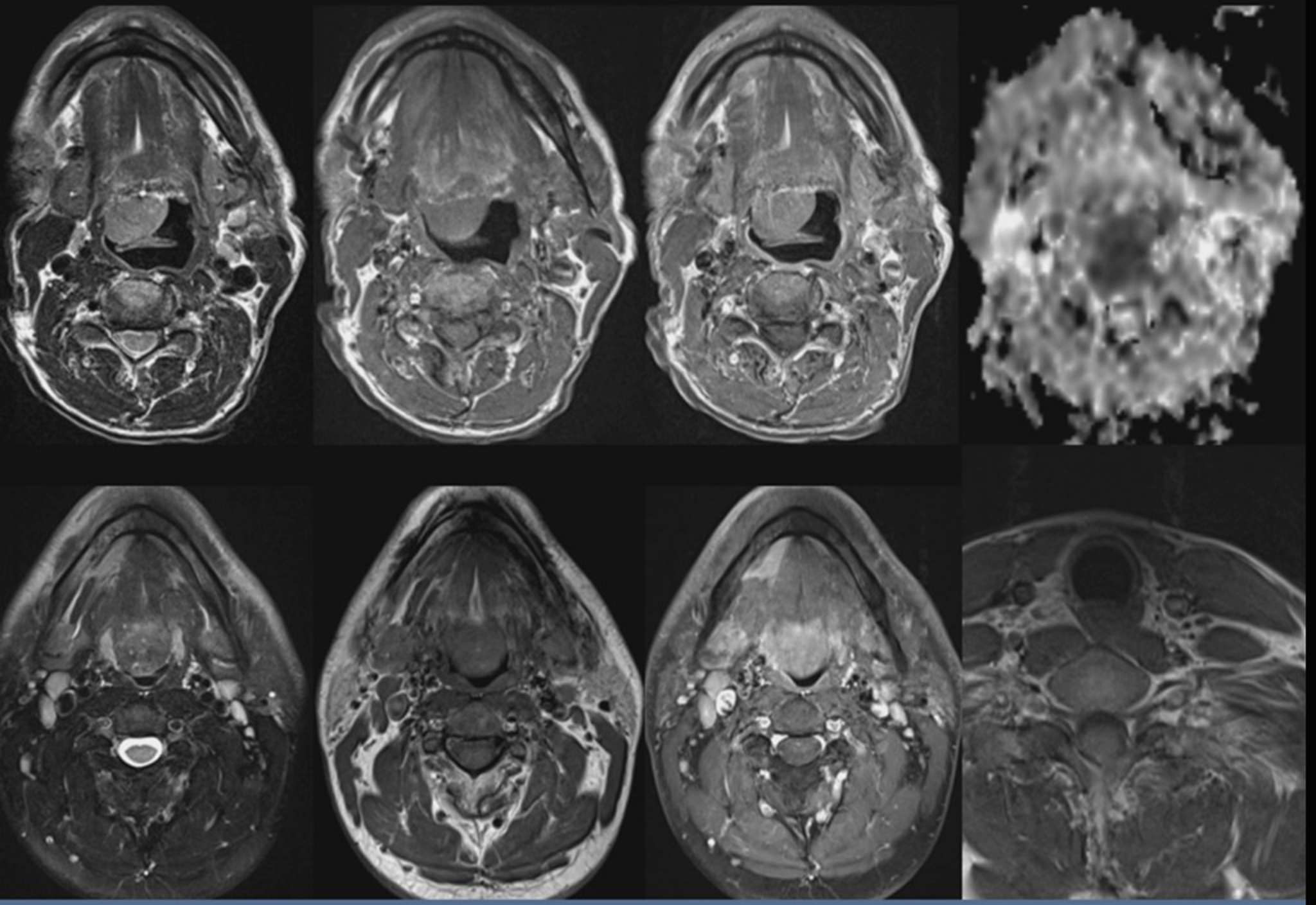


Burkitt Lenfoma

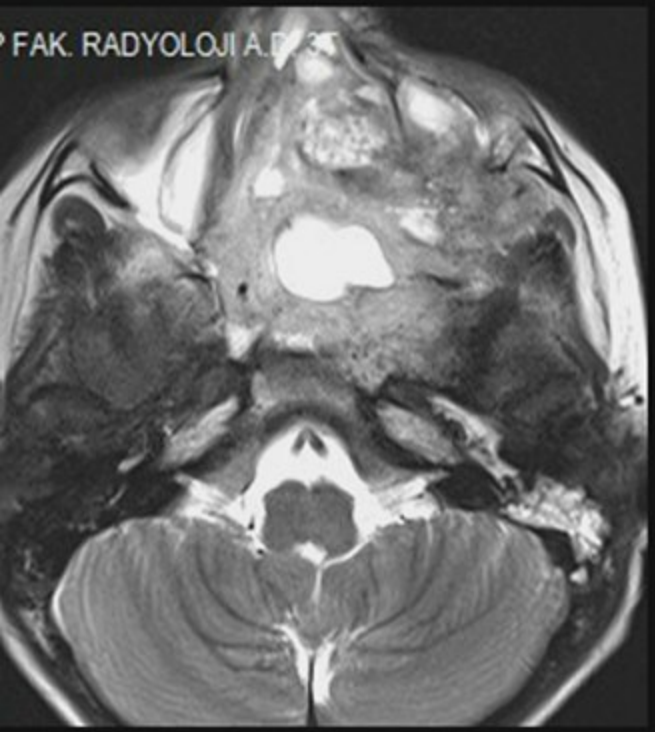




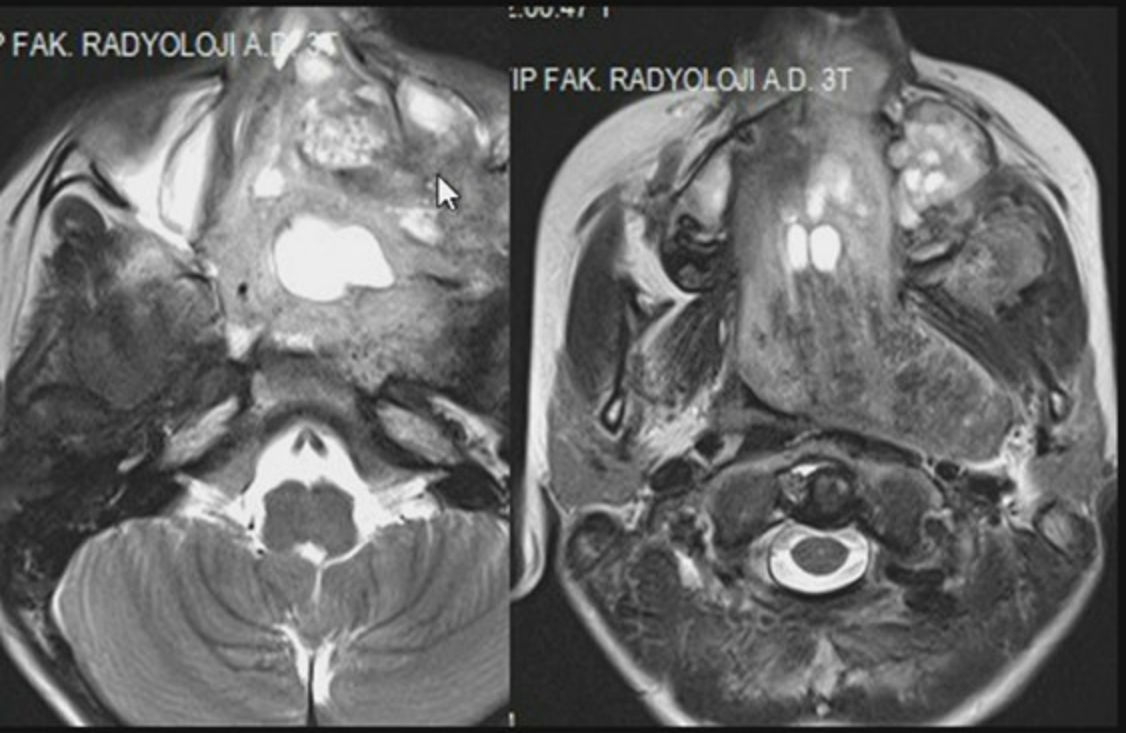




13 yaş, erkek



13 yaş, erkek



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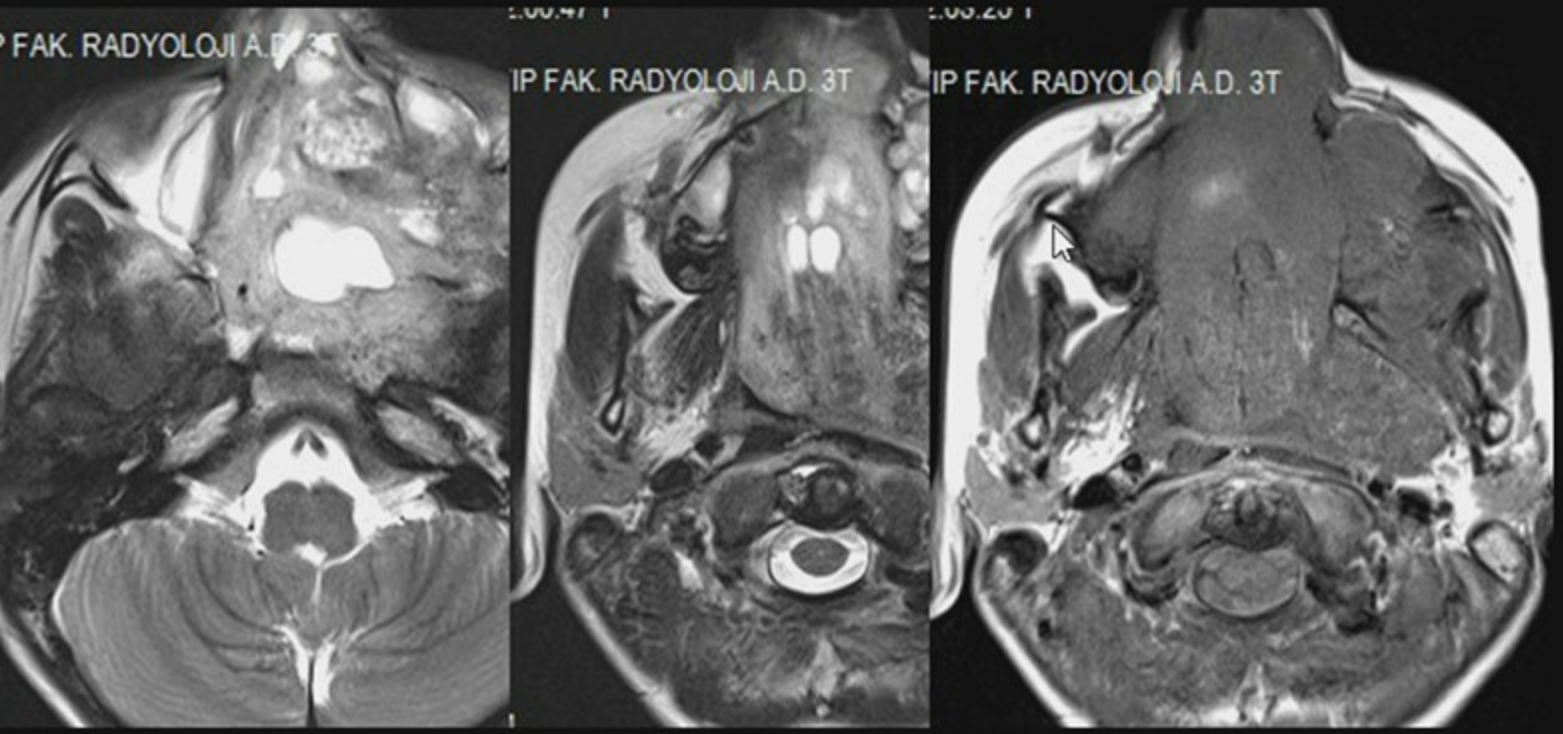
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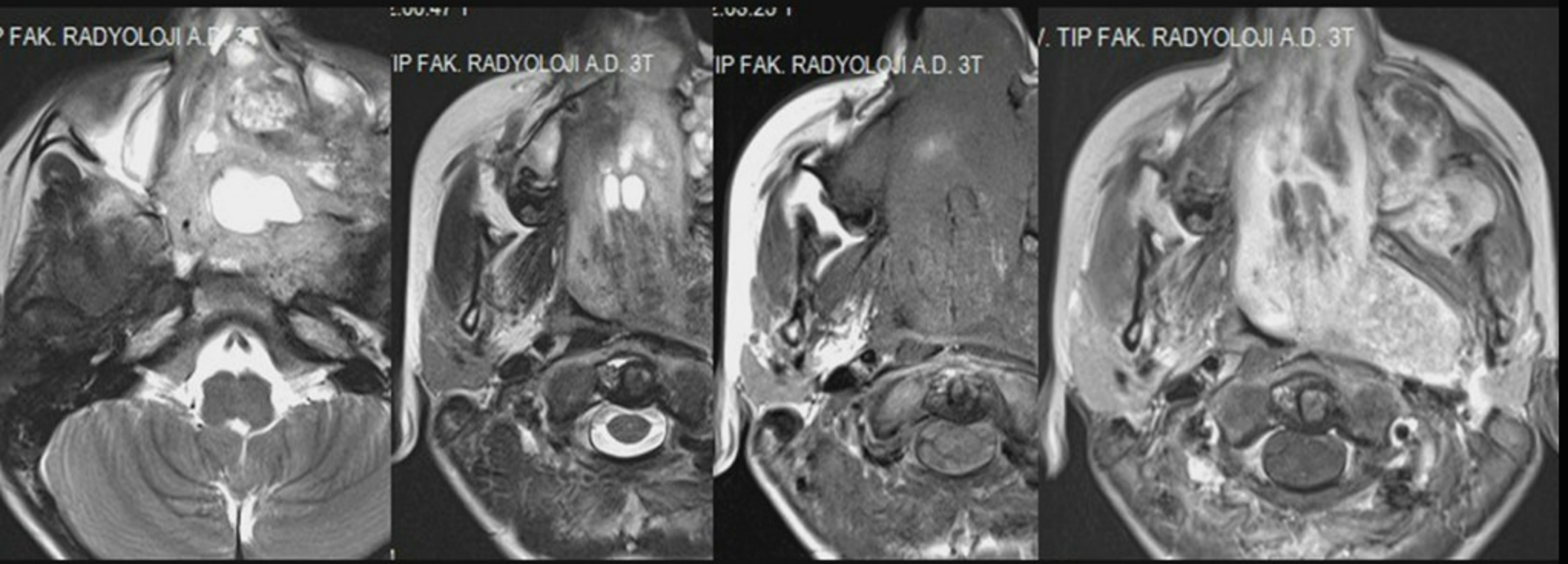
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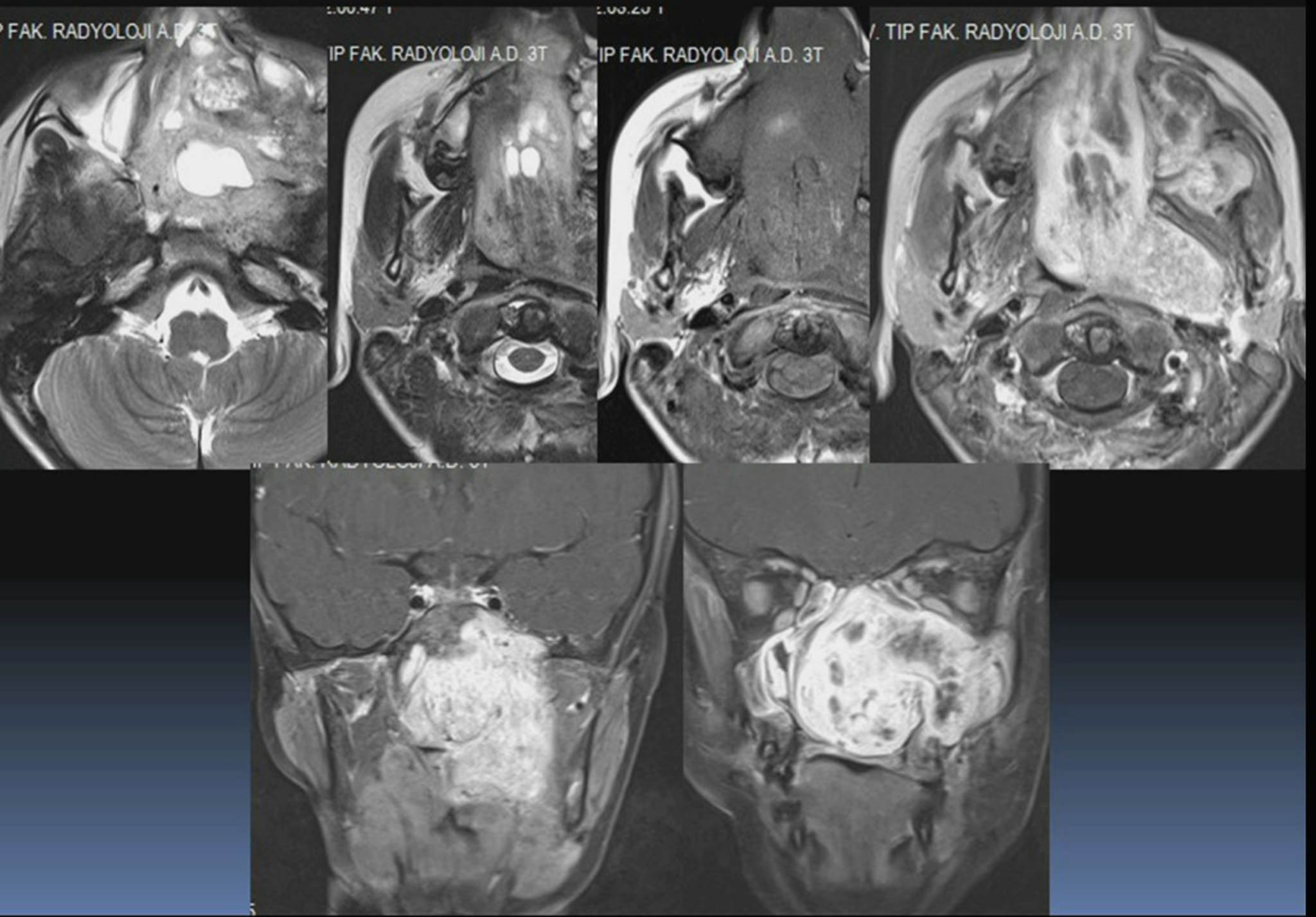
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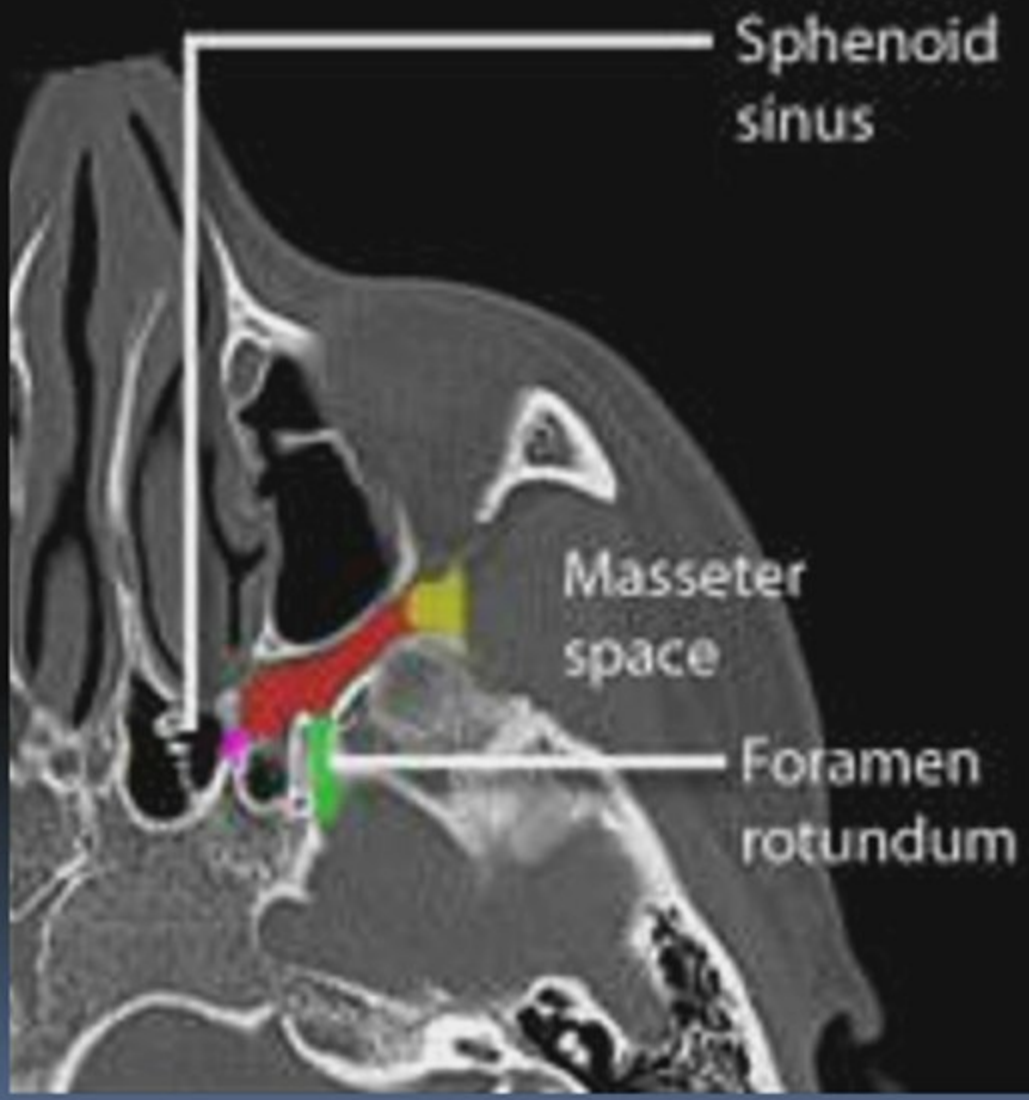
IP FAK. RADYOLOJI A.D. 3T
. TIP FAK. RADYOLOJI A.D. 3T

Juvenil Anjiofibroma

- Benign ancak lokal invazif, agresif vasküler bir tümör
- Hemen daima adölesan erkekler
- Baş-boyun tm'lerinin % 0.5, ancak en sık benign nazofarengeal neoplazi

Juvenil Anjiofibroma

- Sfenopalatin foromende posterior konka kökenlidir
- Yoğun vasküler tm, Bx bazen fatal olabilir.
- Yoğun kontrast tutar



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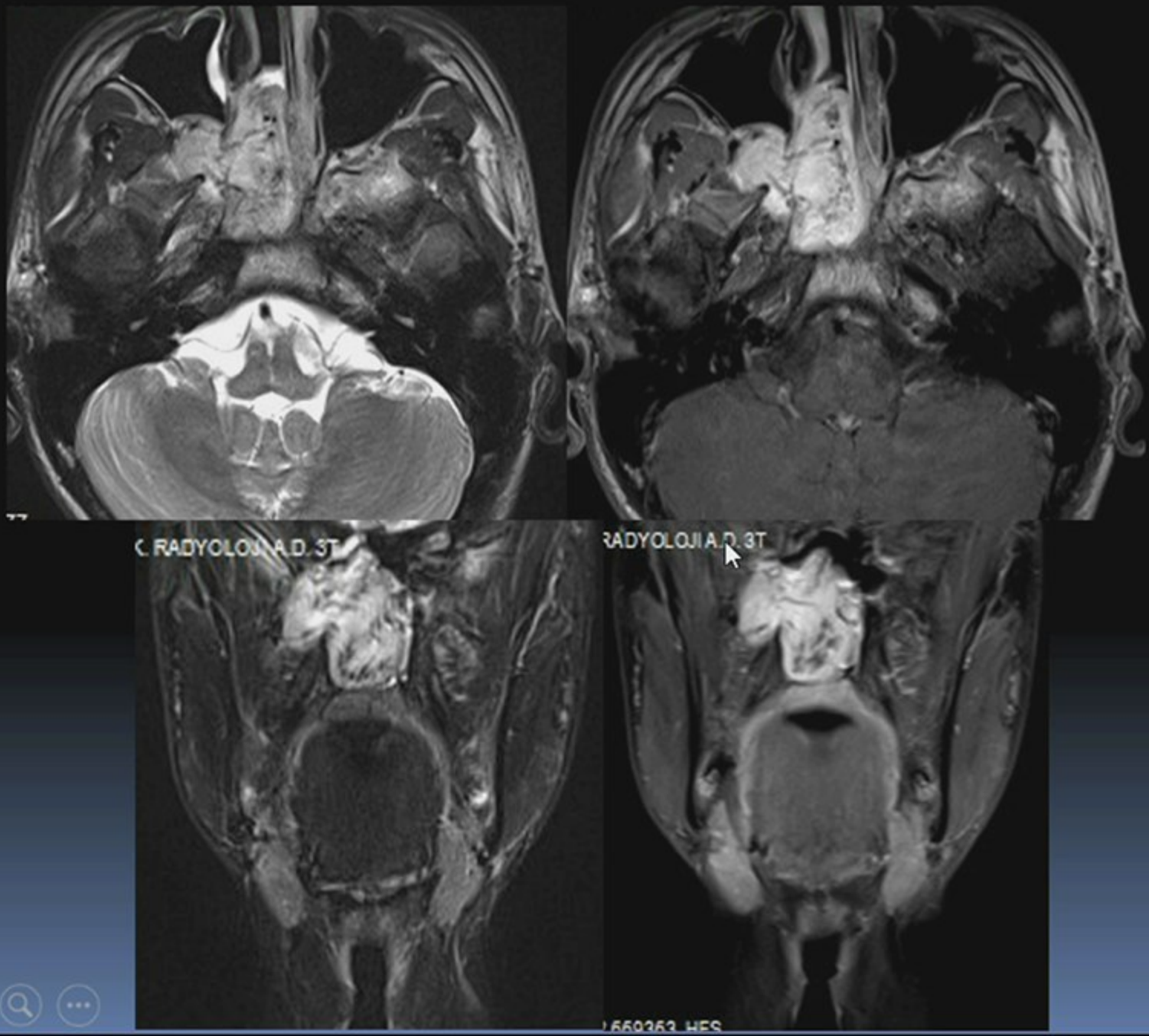
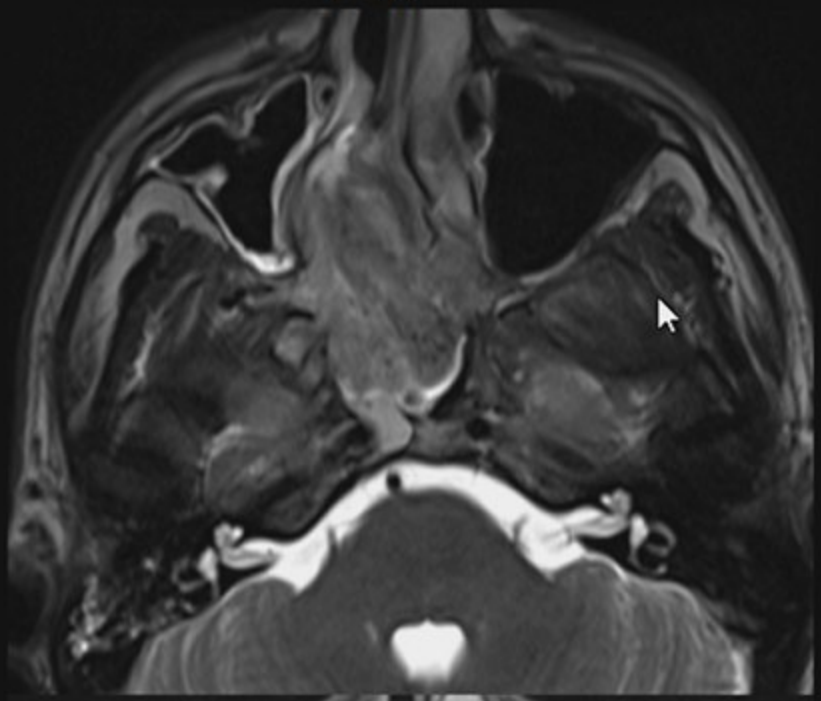
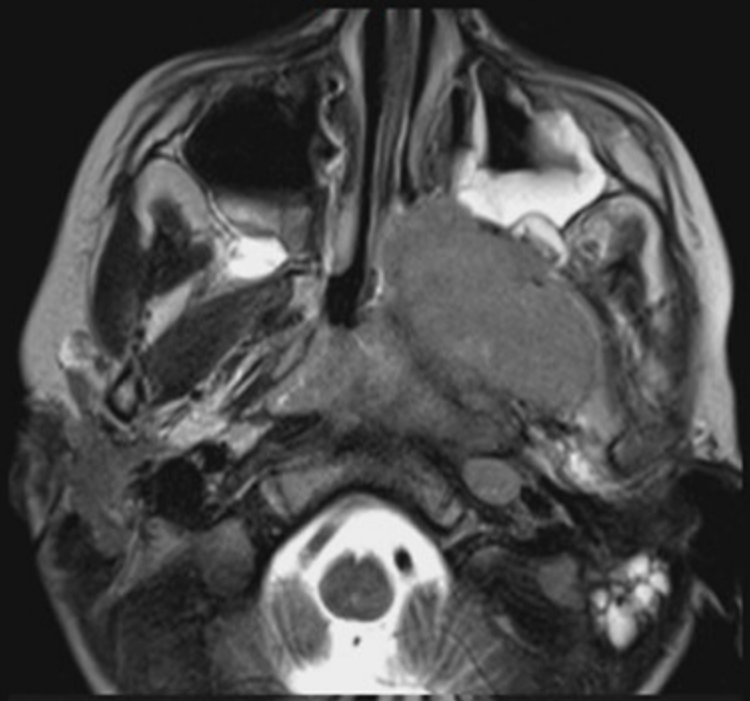
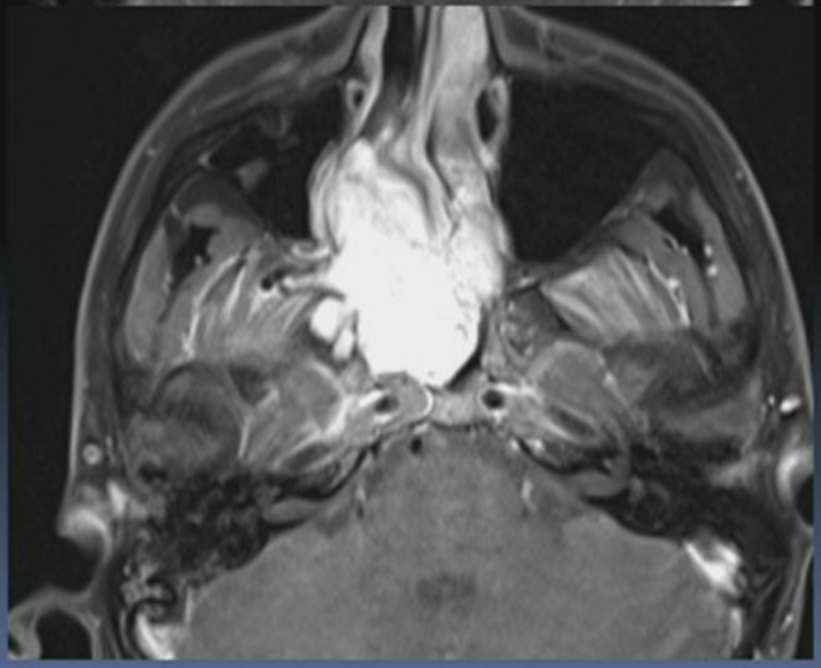


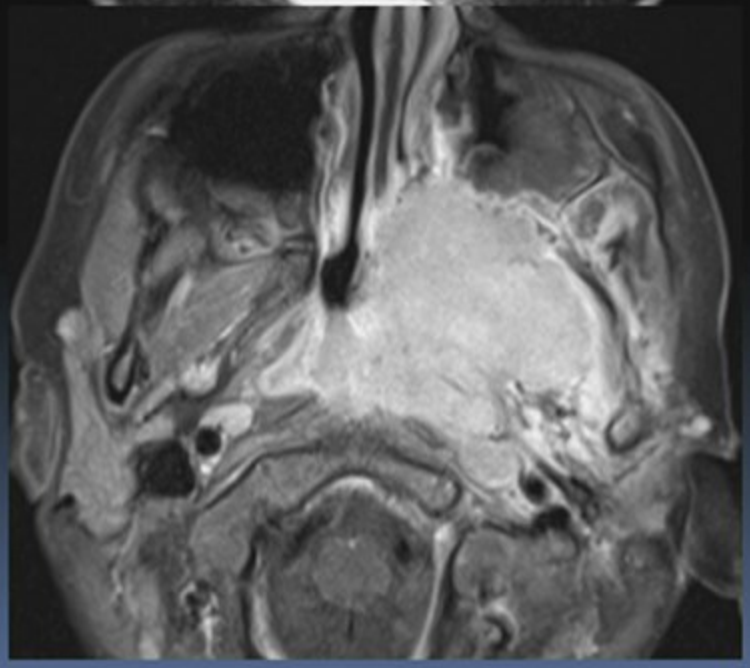
26 yaş, erkek

10 yaş, erkek









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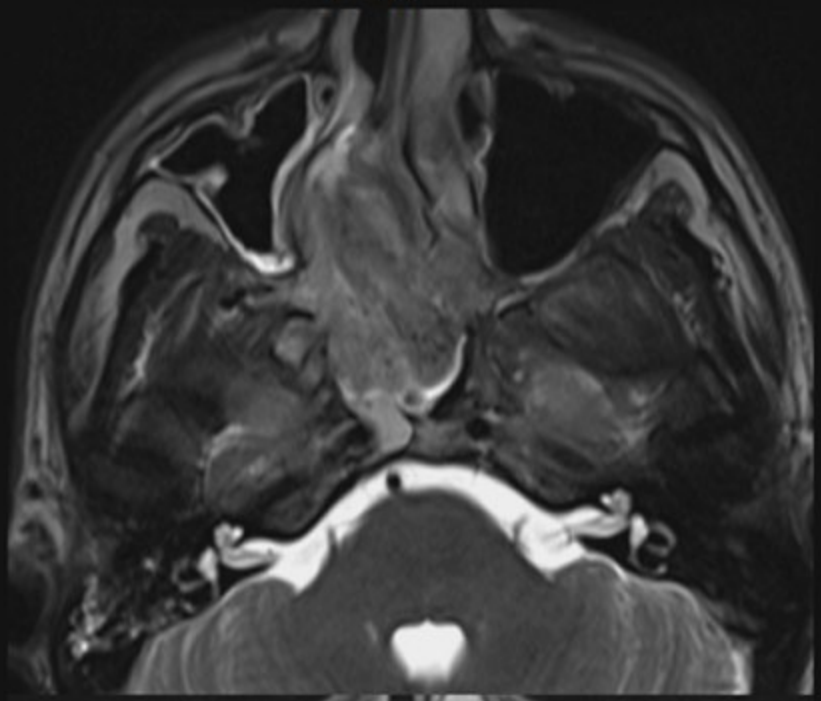
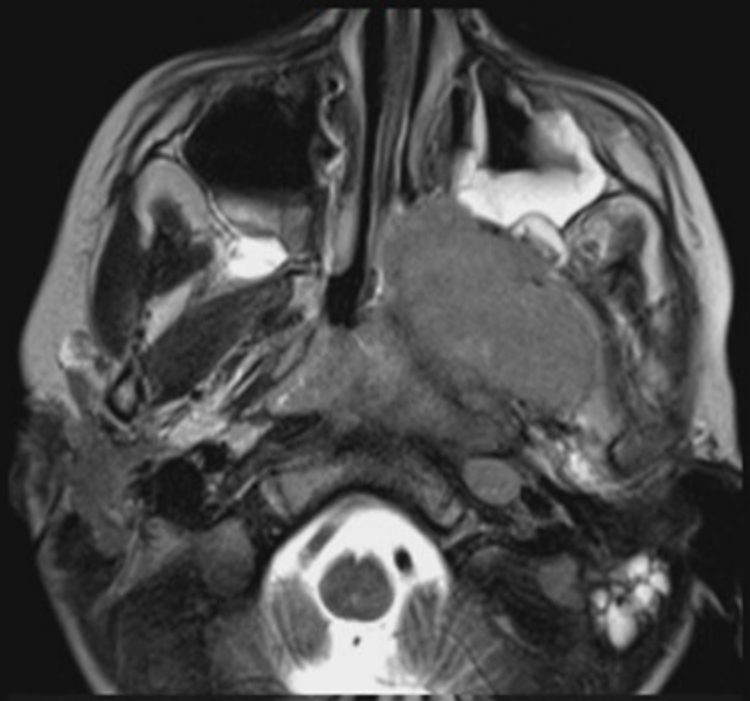
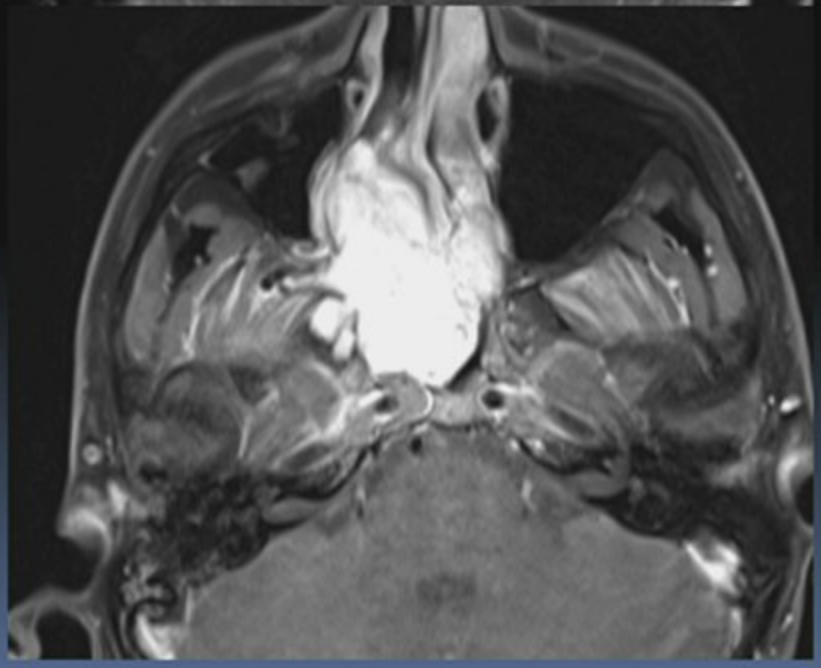
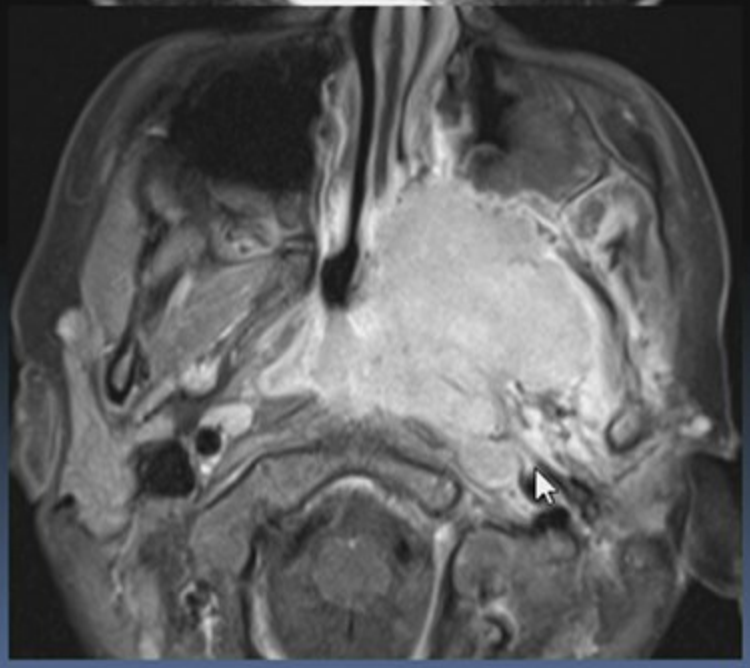




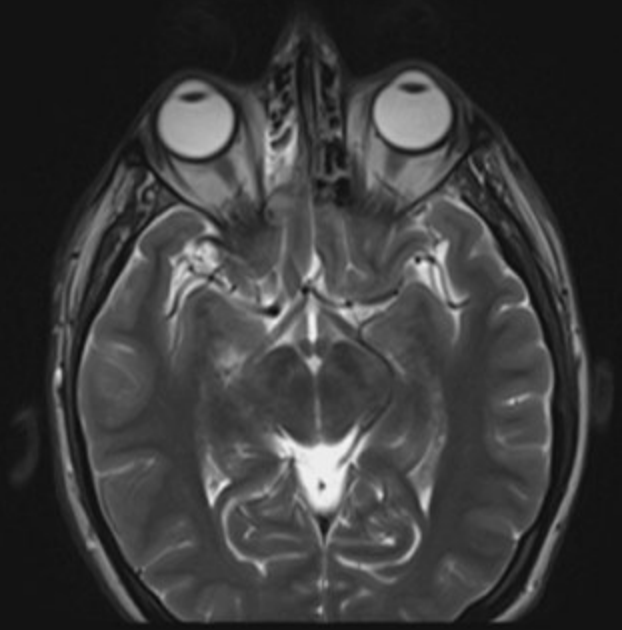


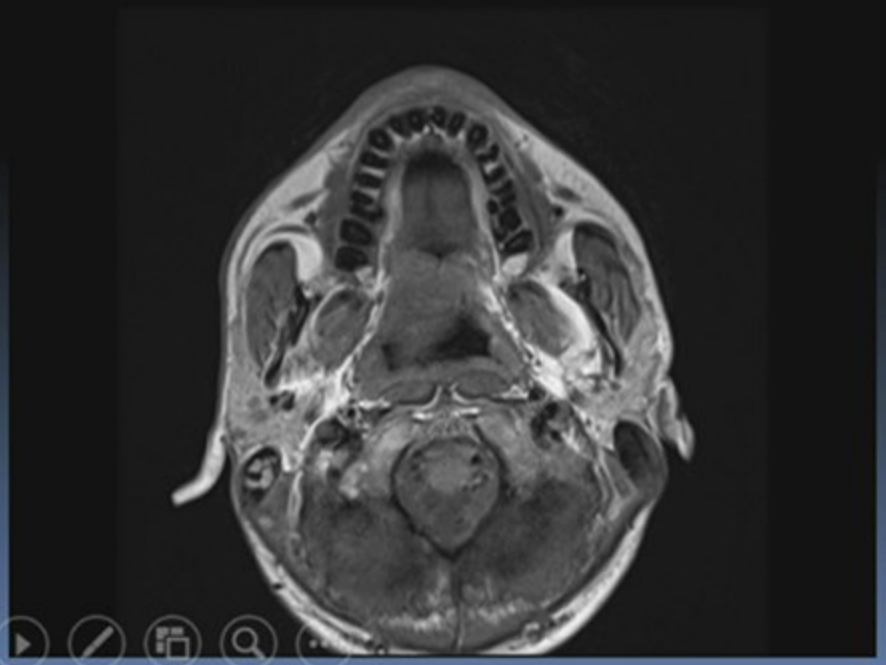


Jüvenil Anjiofibroma

Lenfoma

26 yaş, erkek





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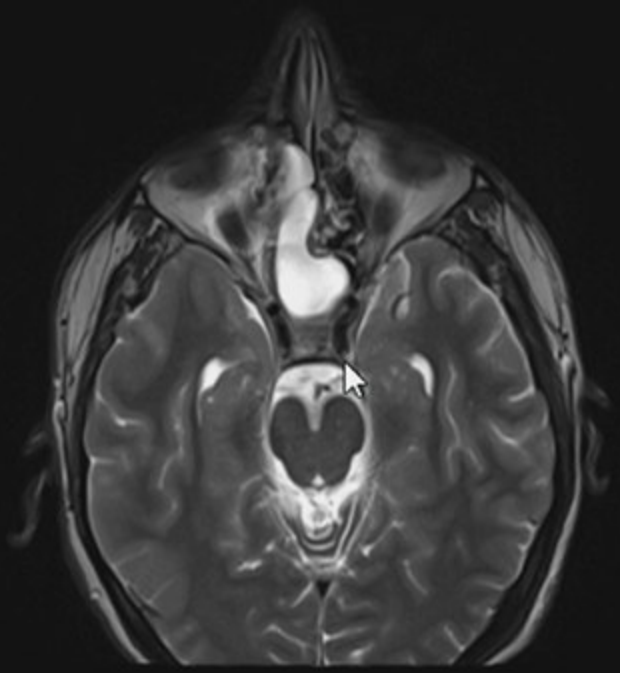

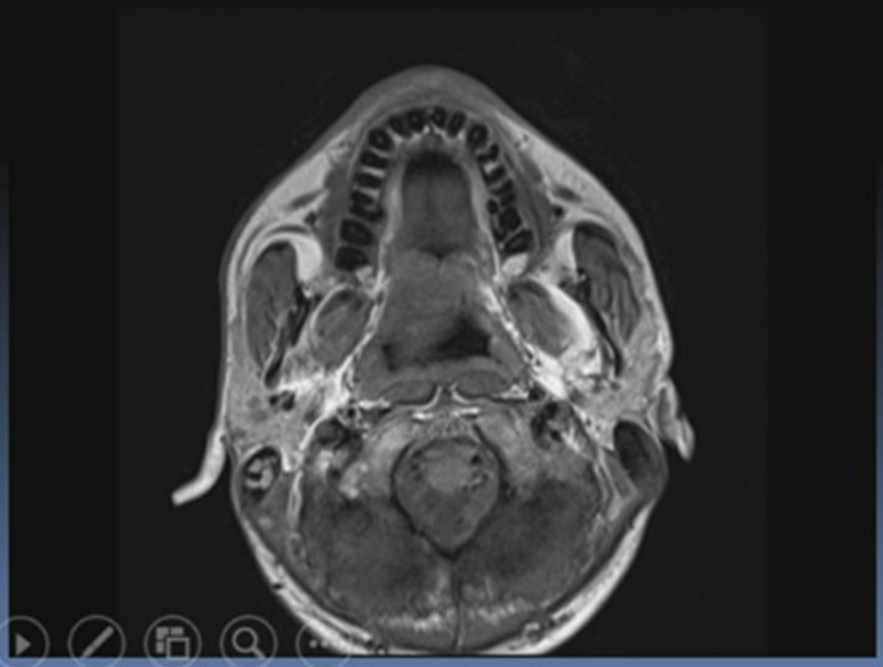

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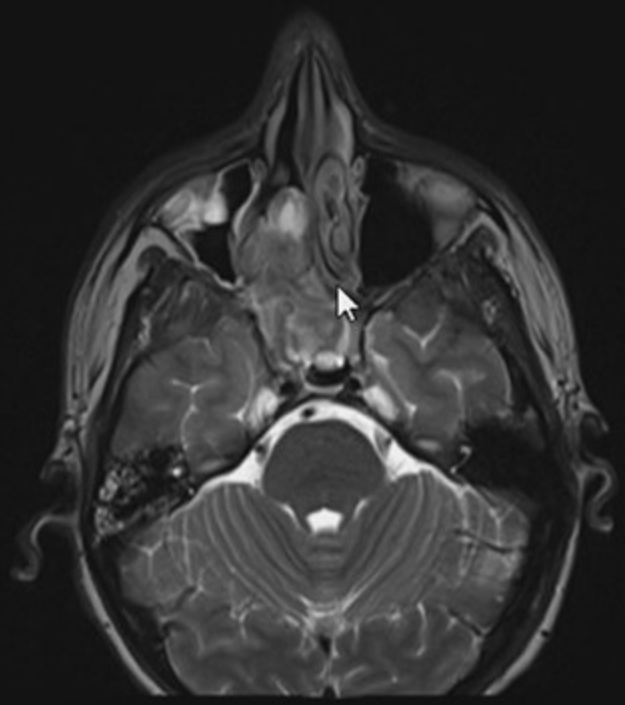

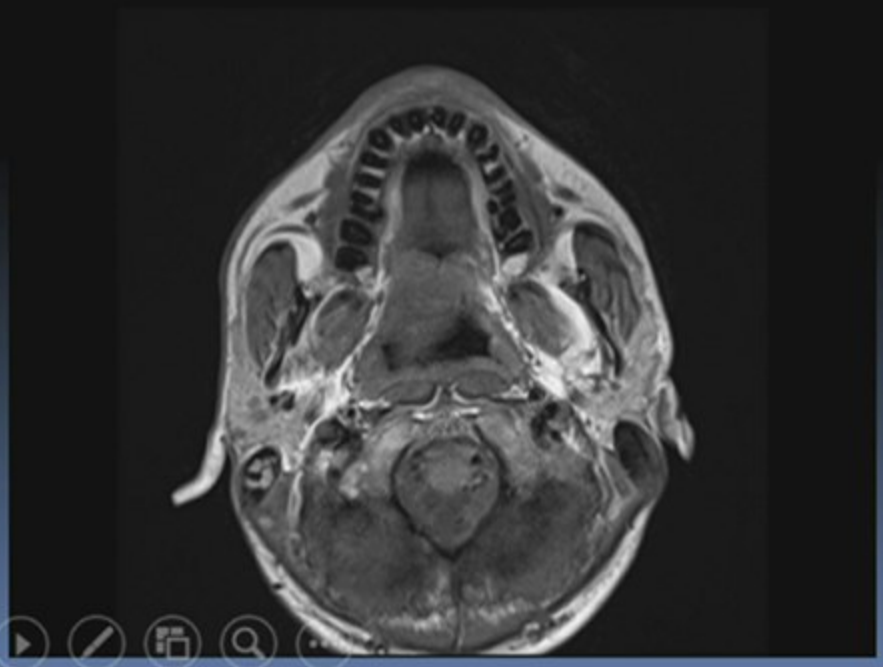

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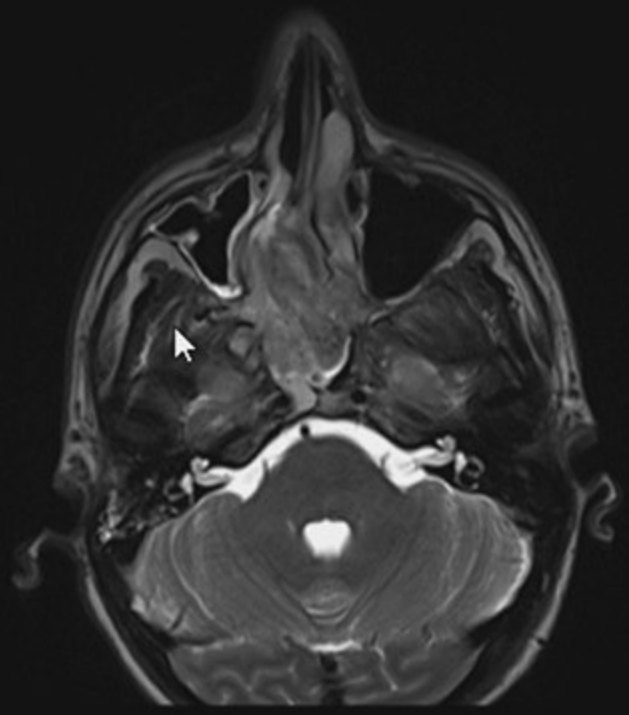

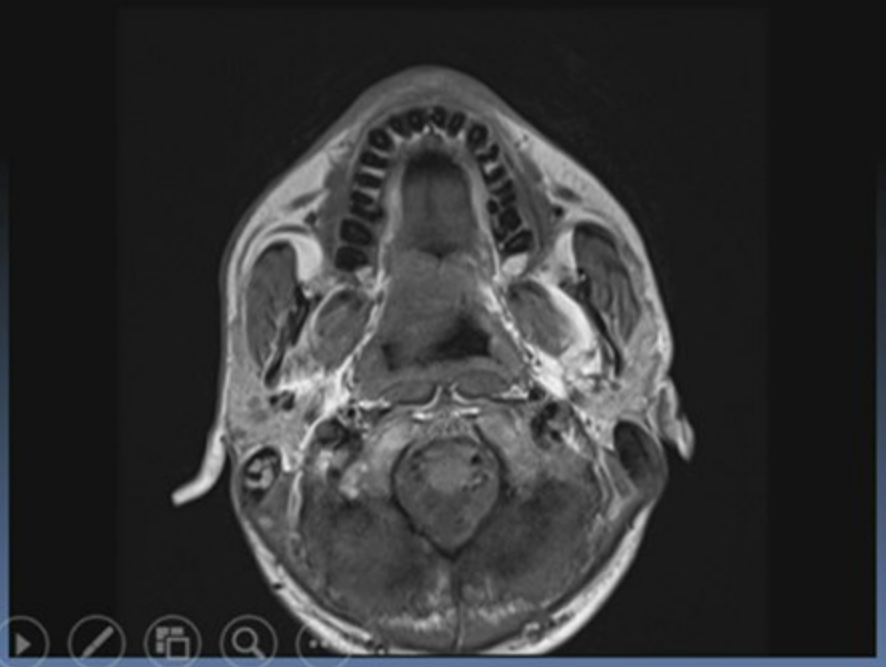

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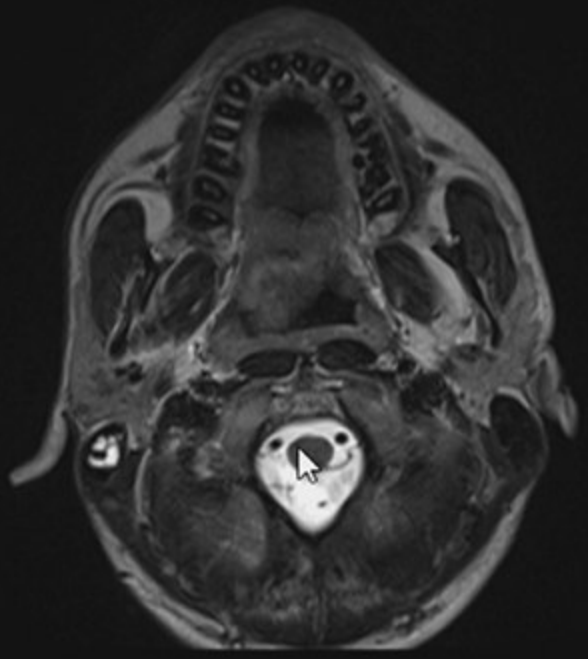

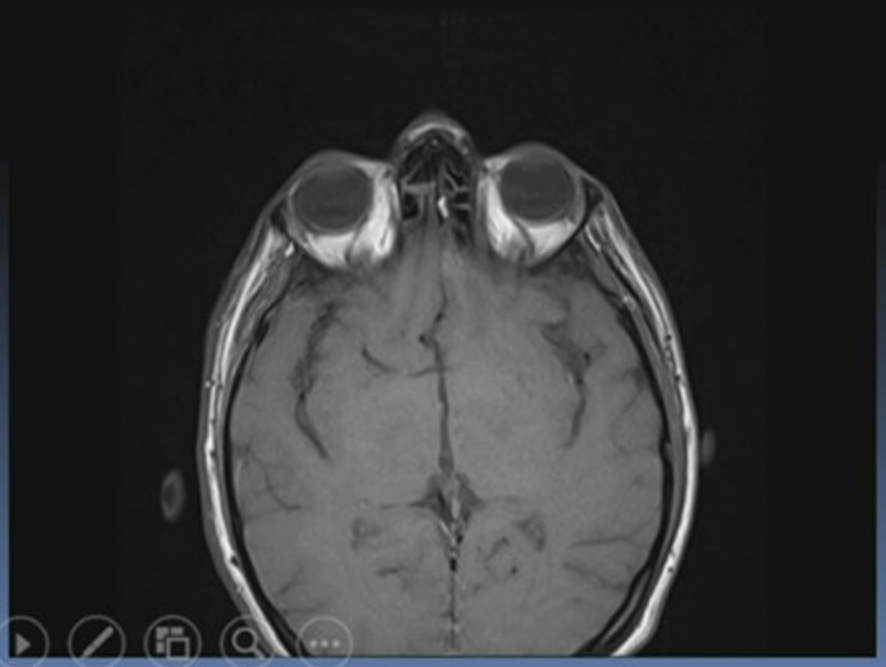

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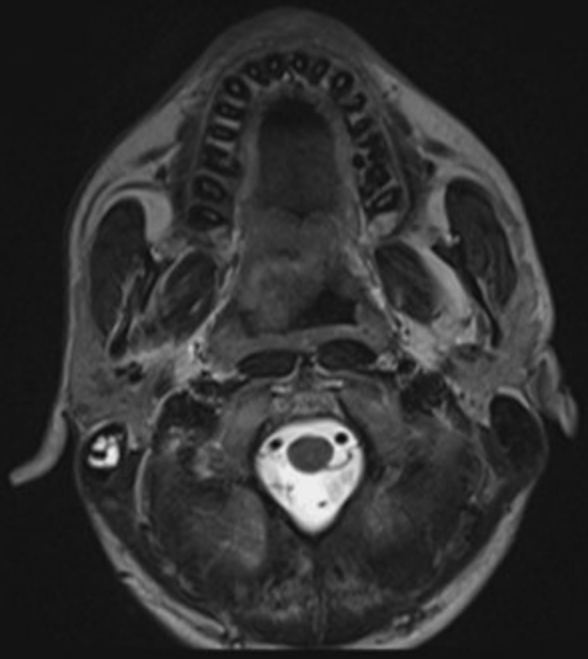

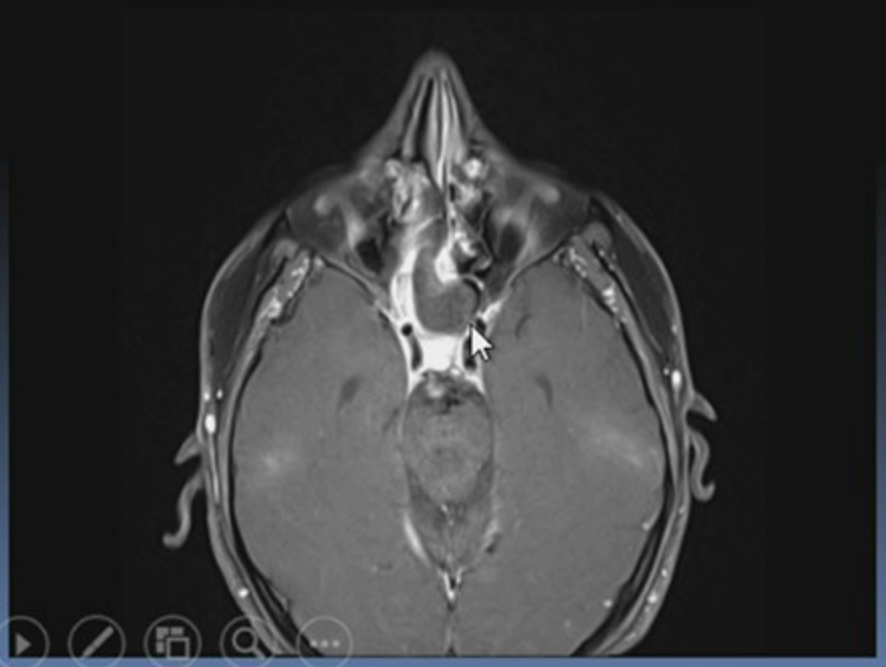

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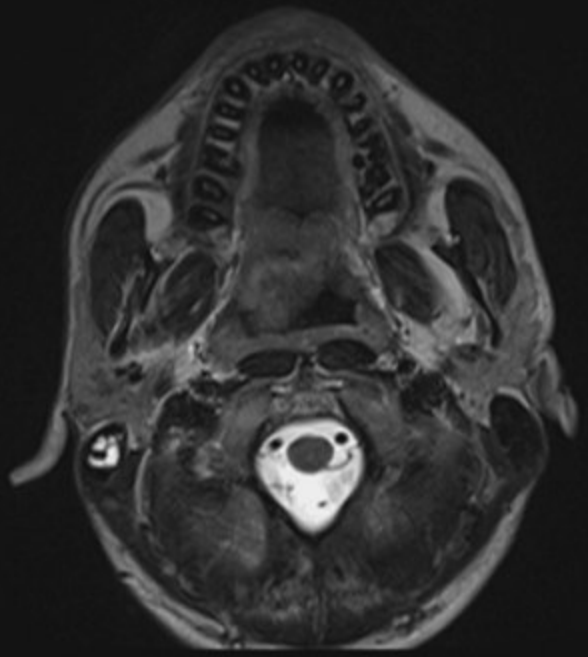

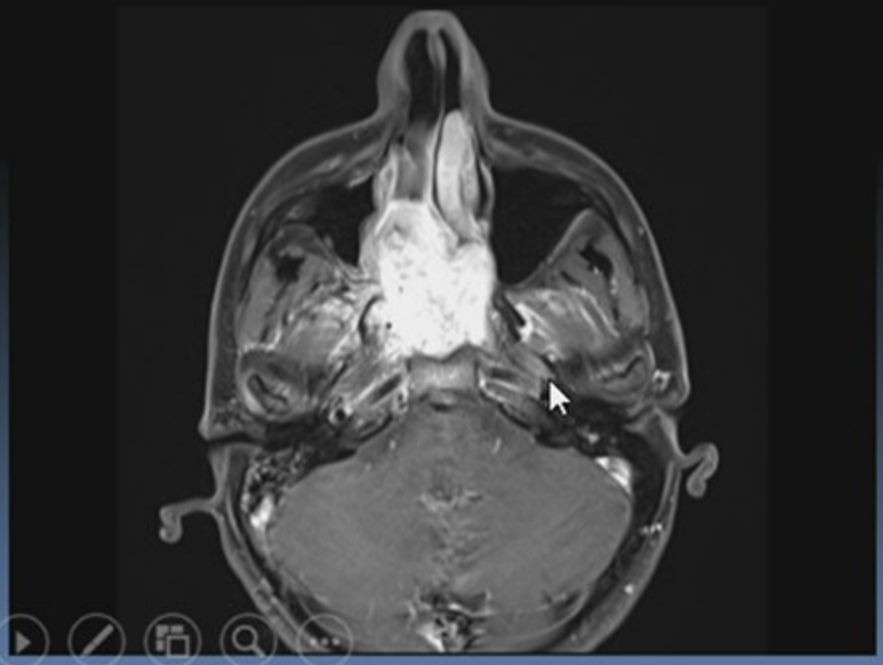

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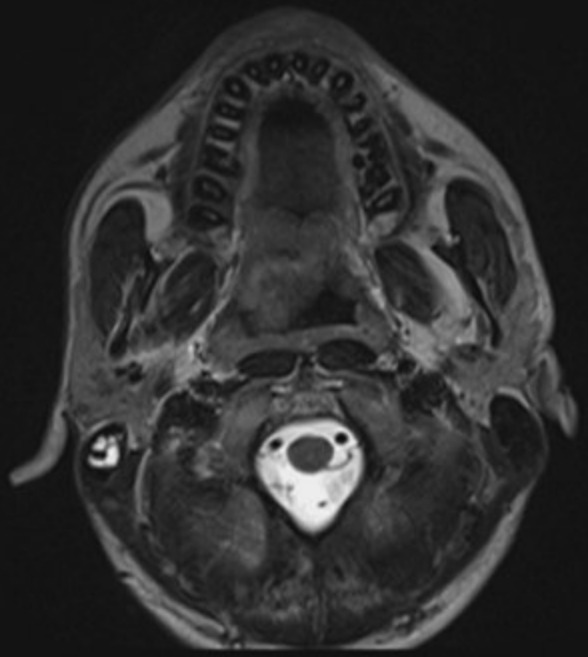

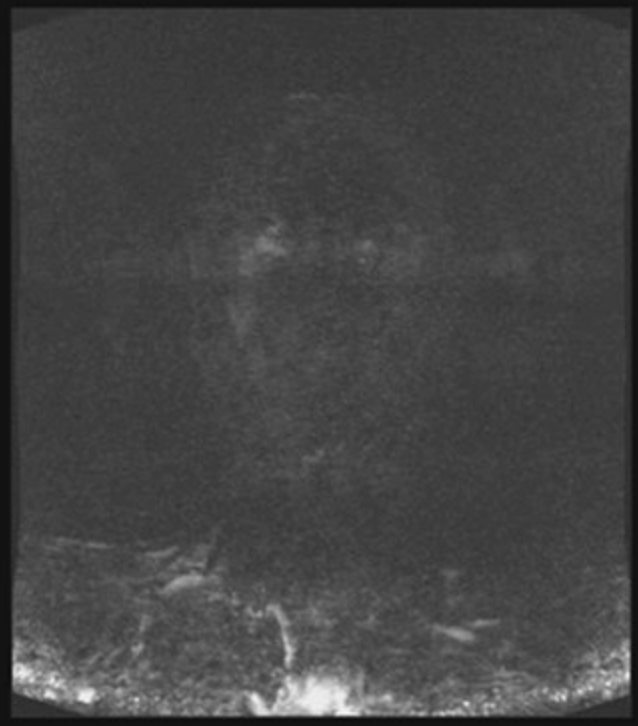

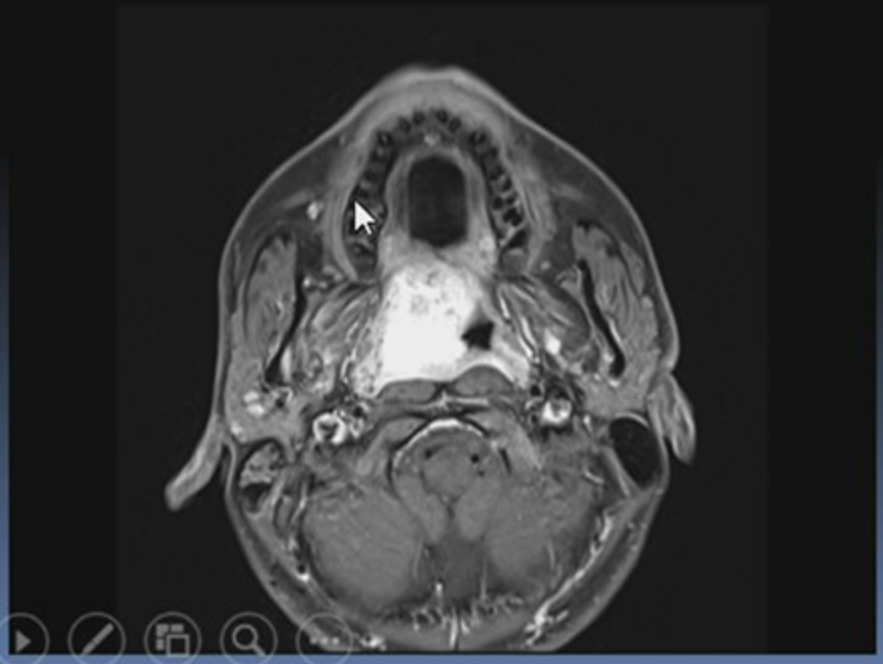

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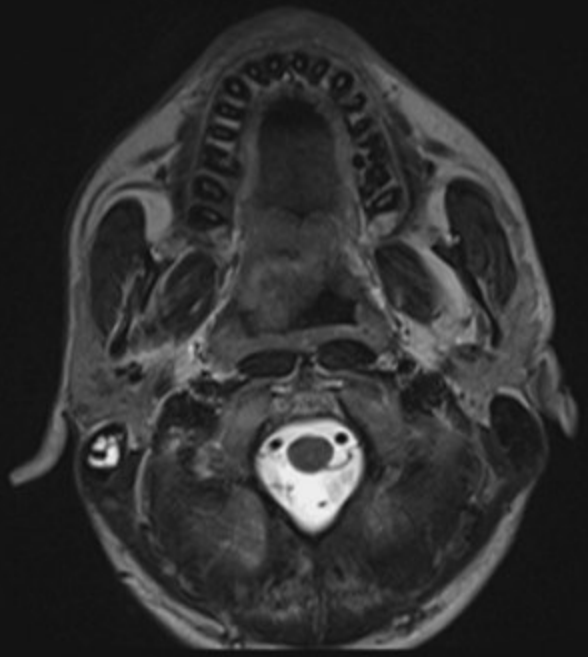

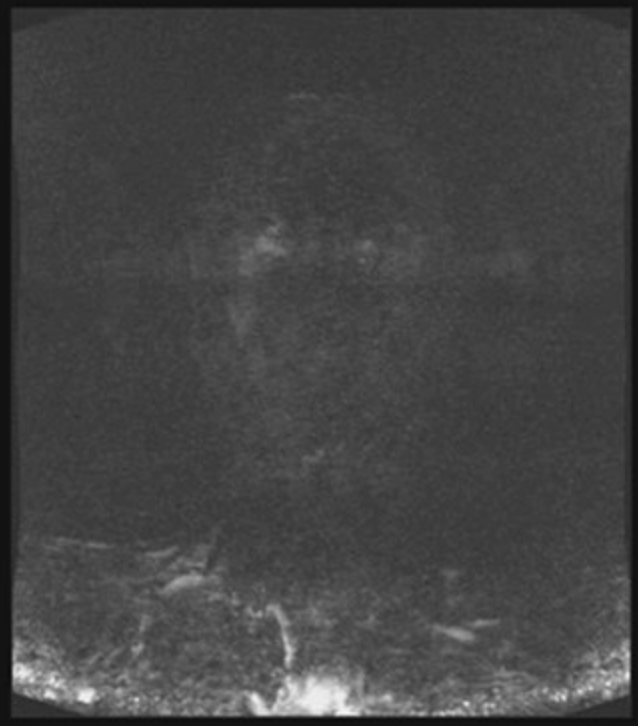

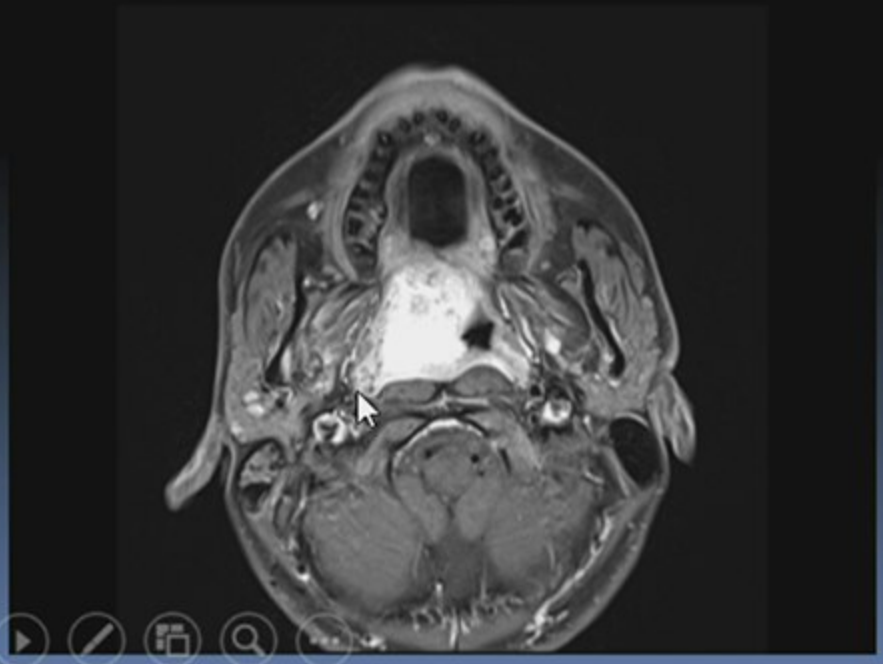

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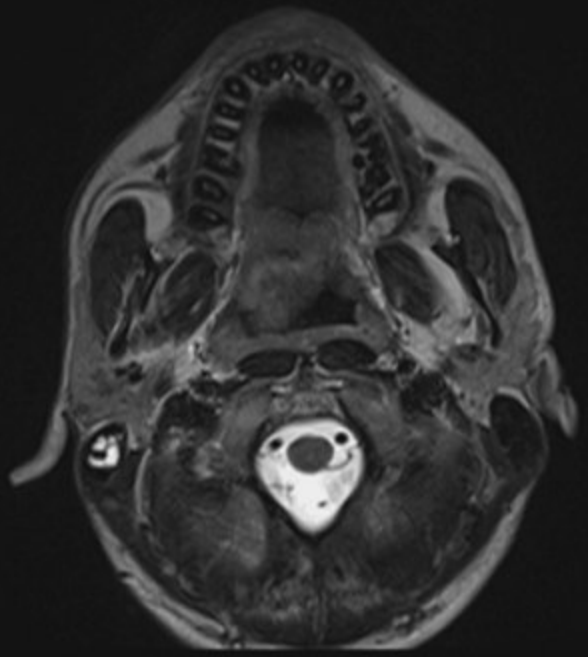

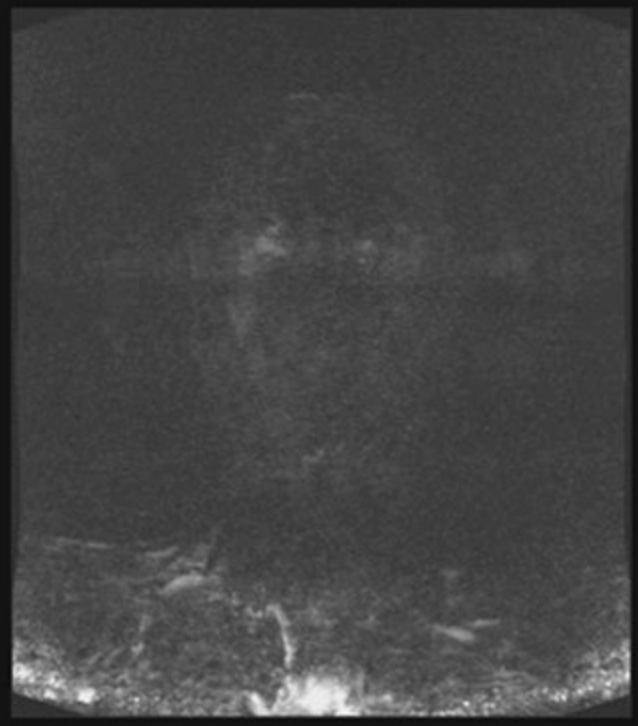

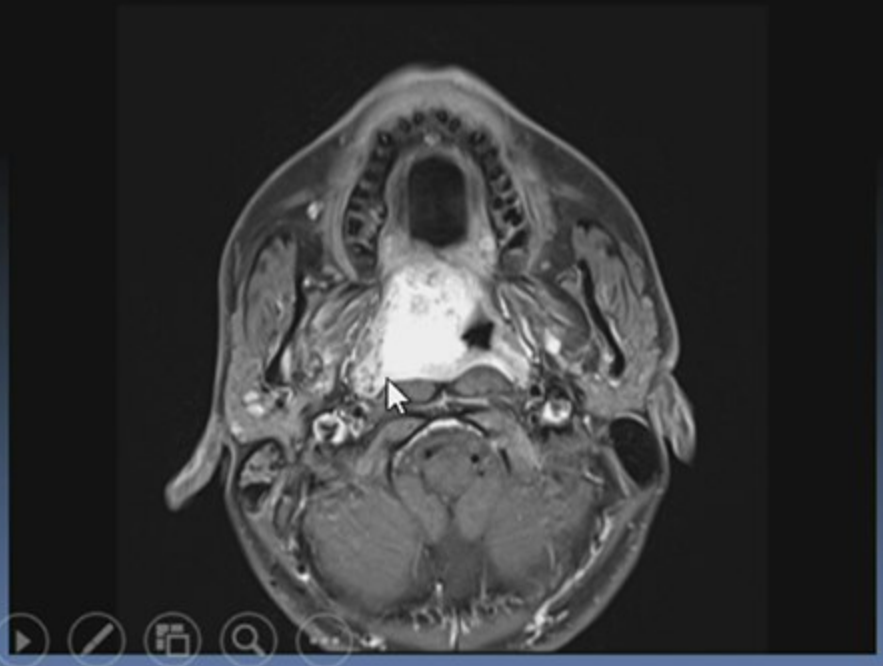

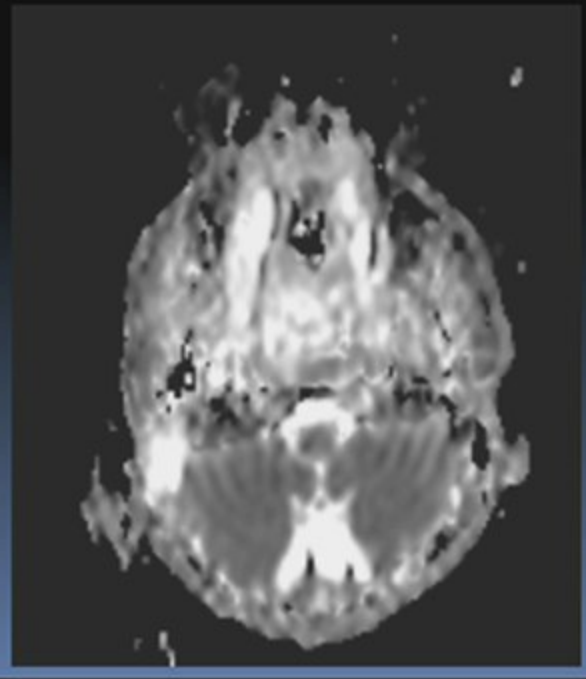

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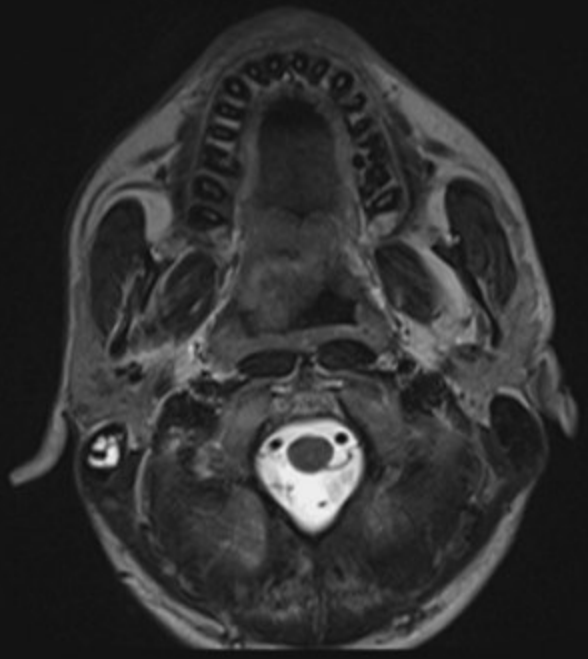

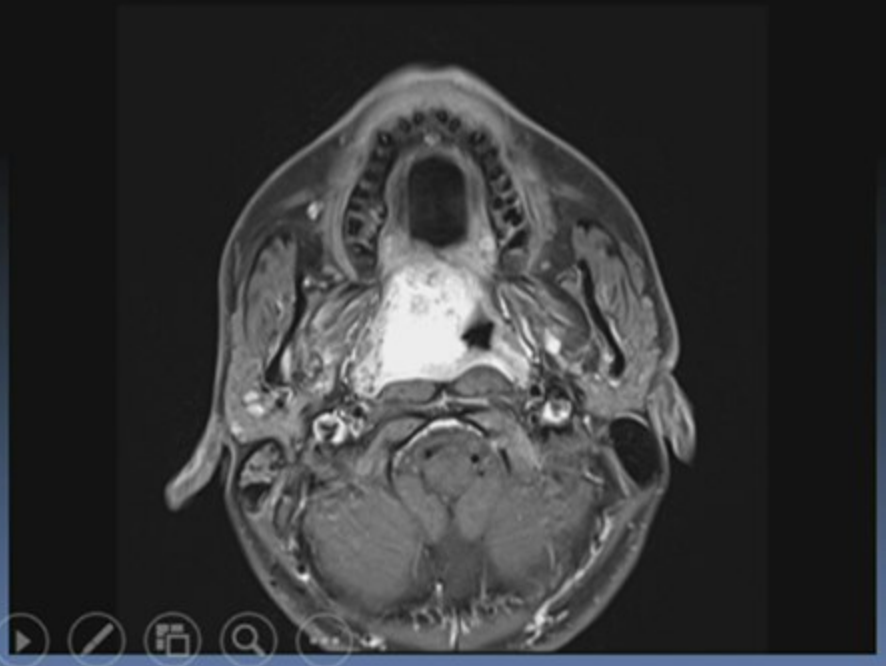

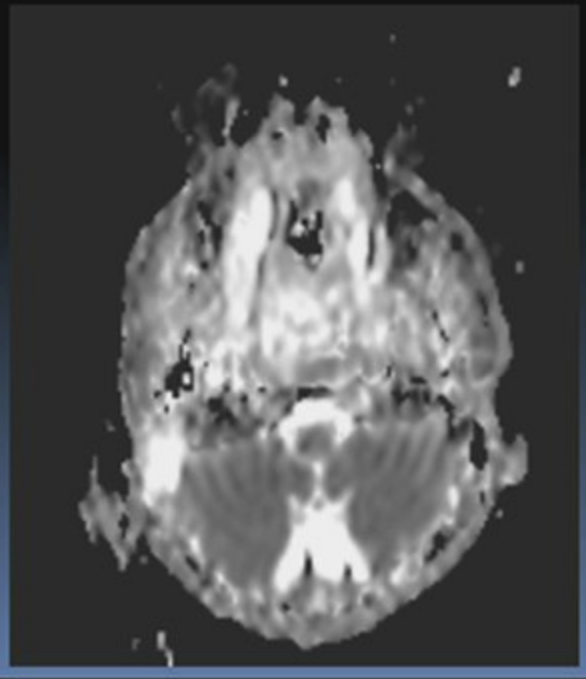

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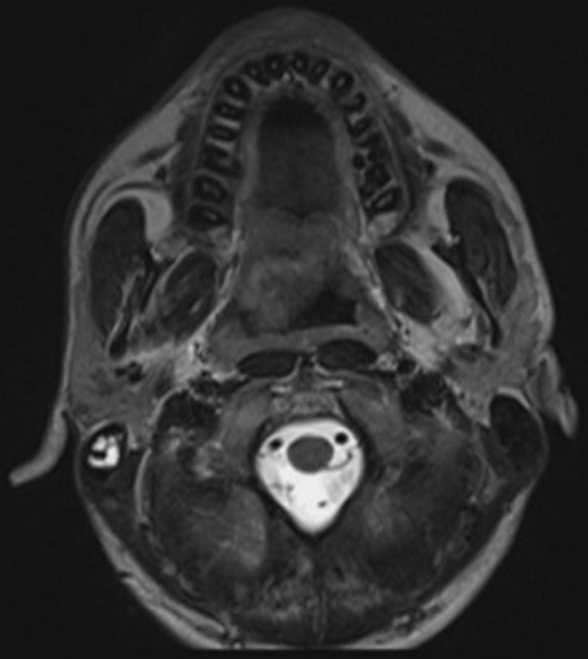

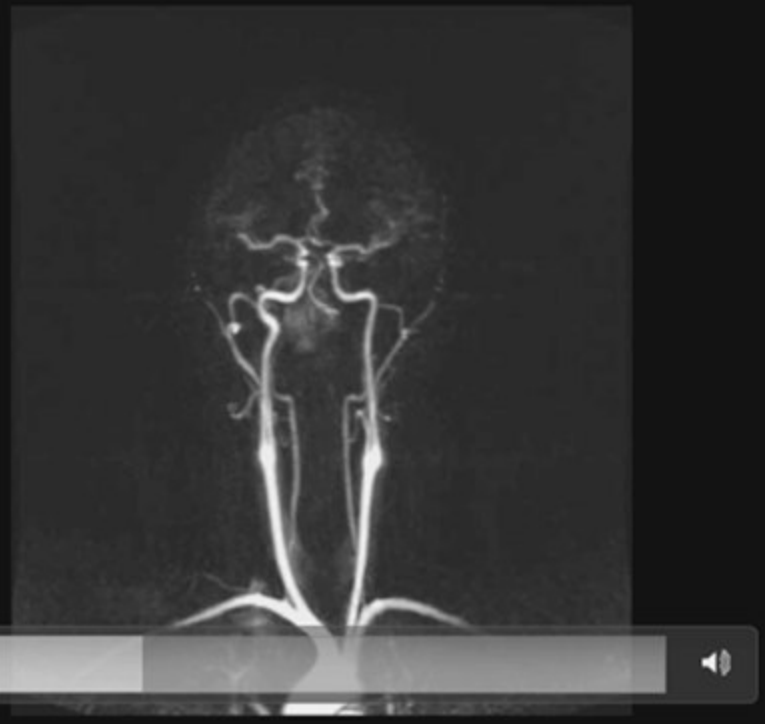

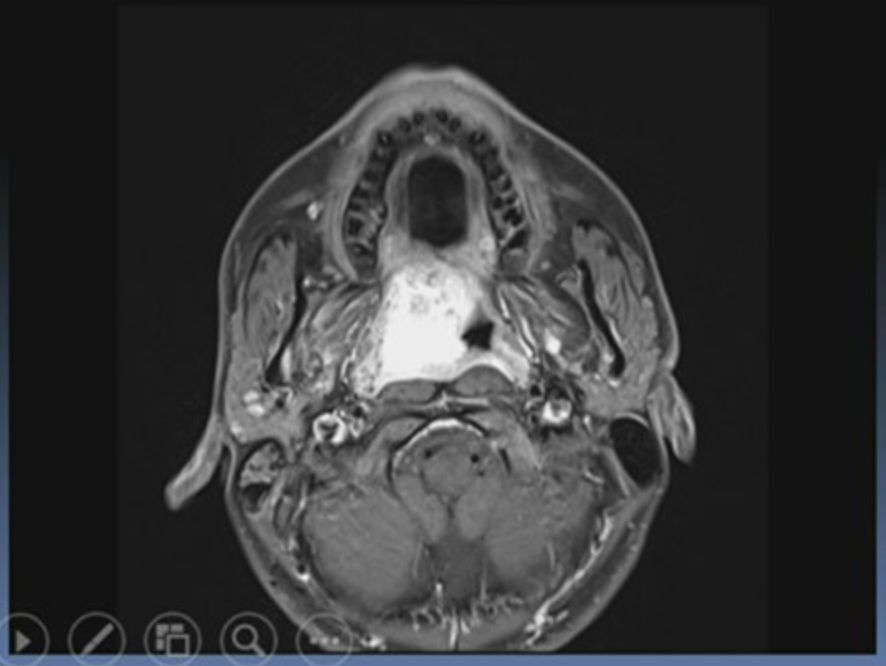

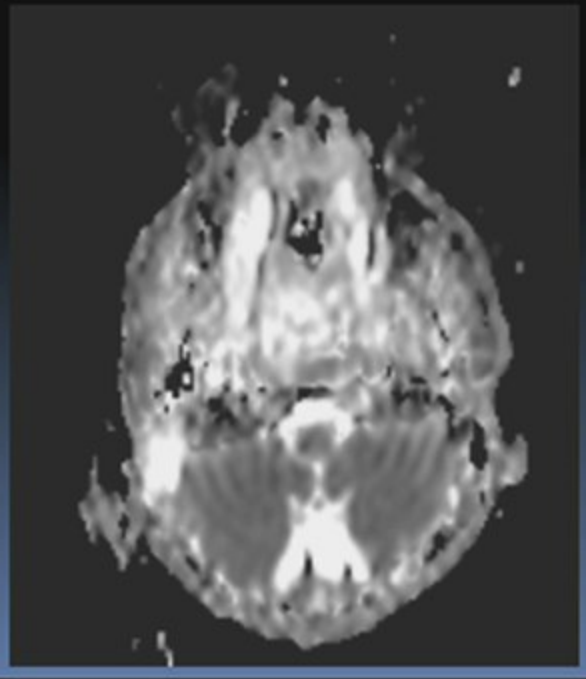

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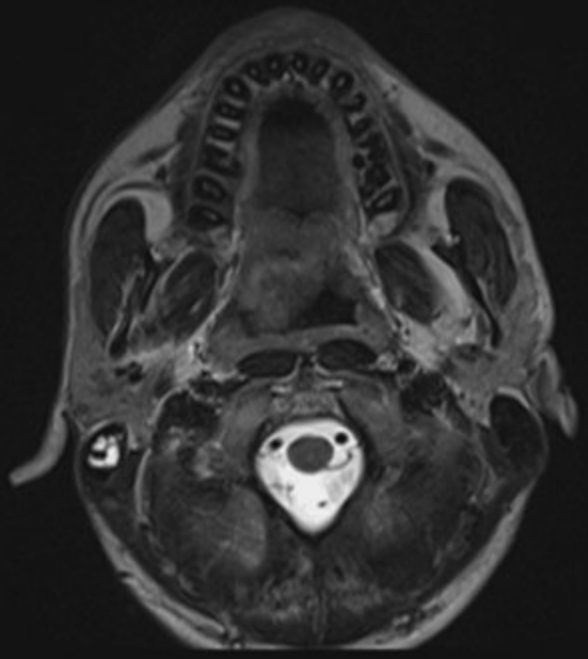

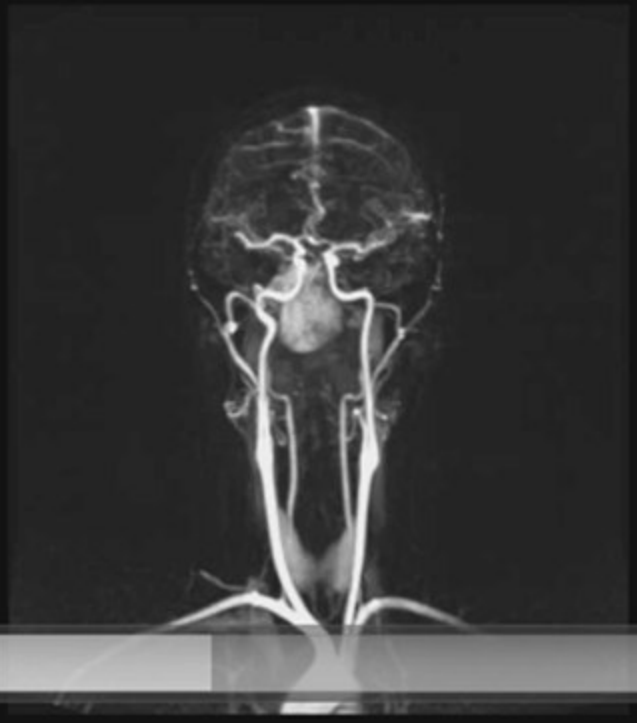

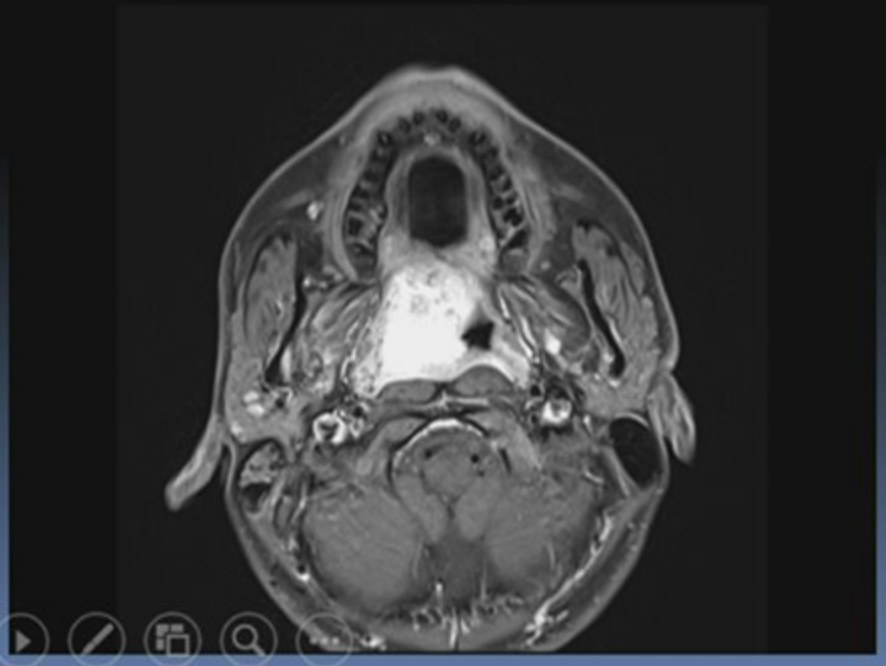

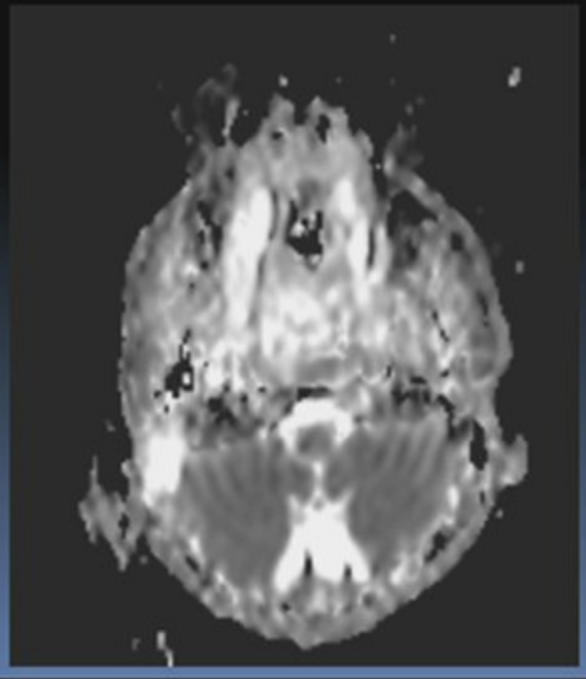

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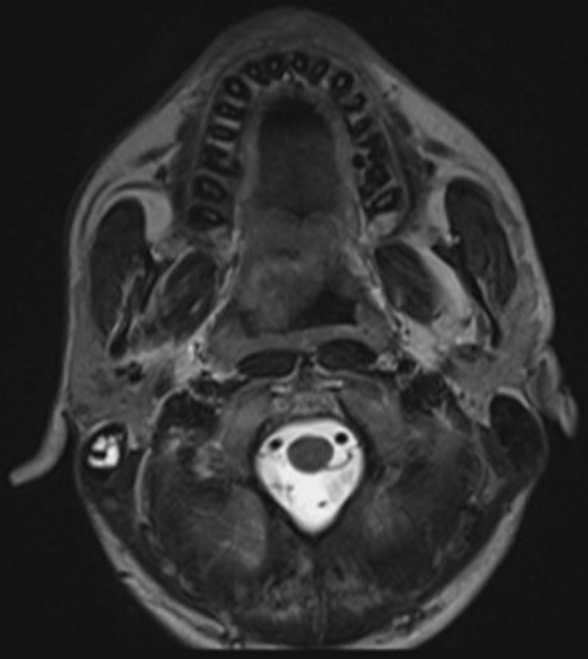

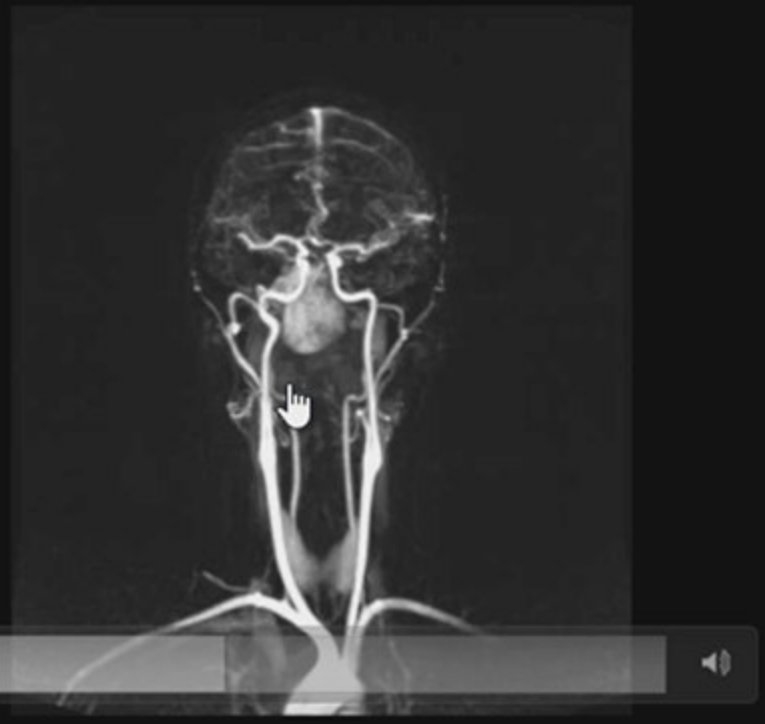

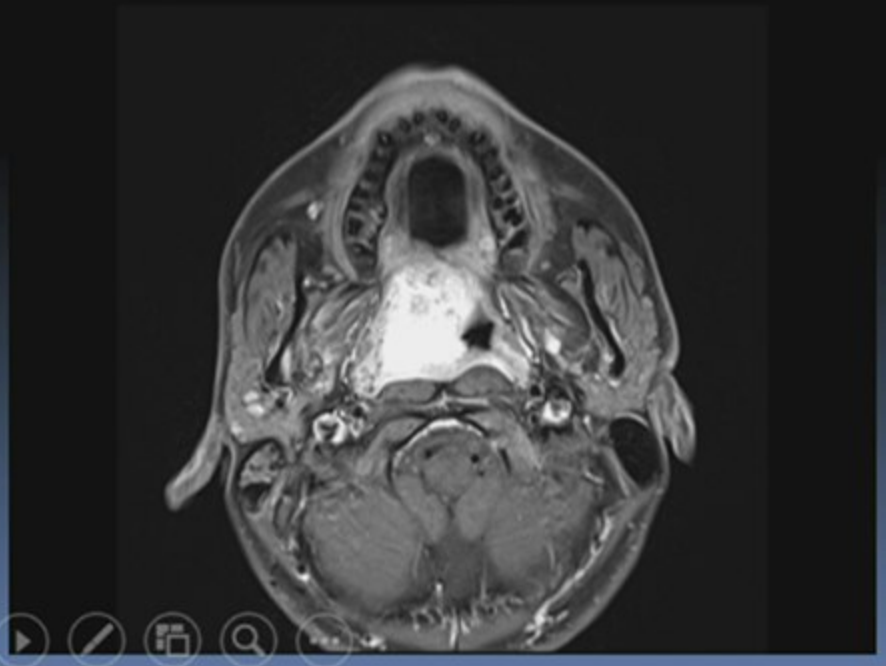

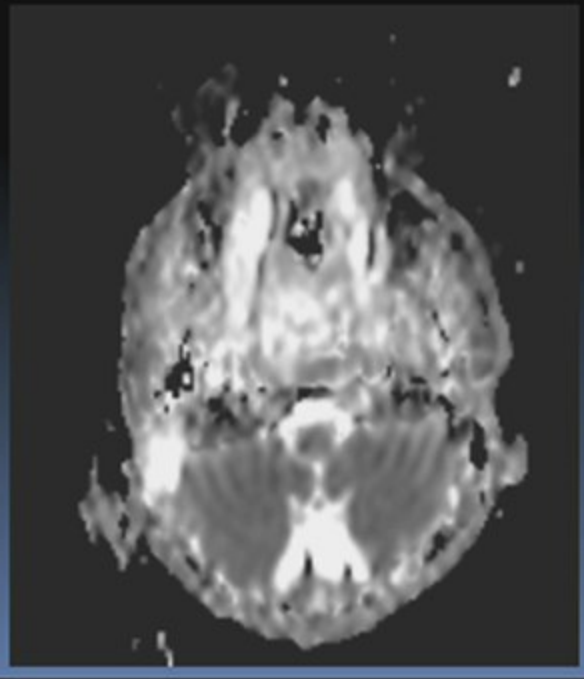

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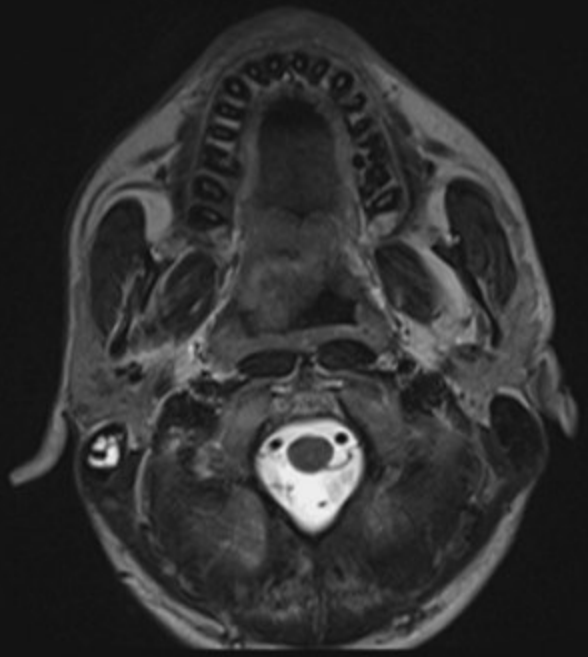

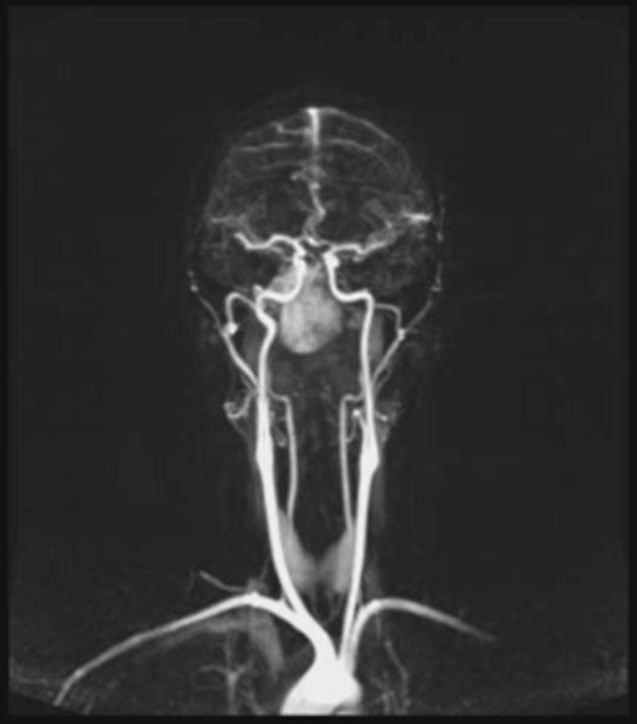

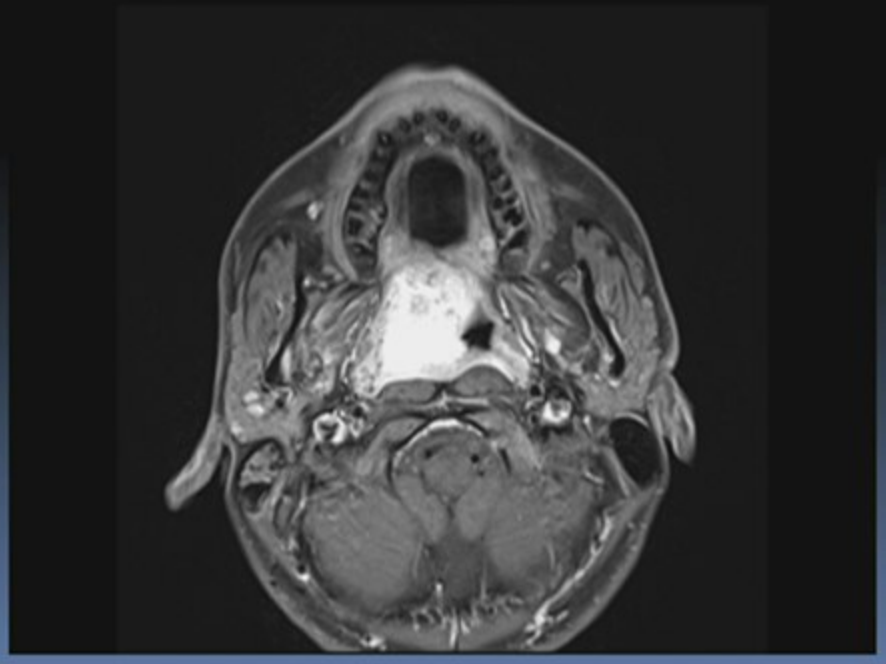

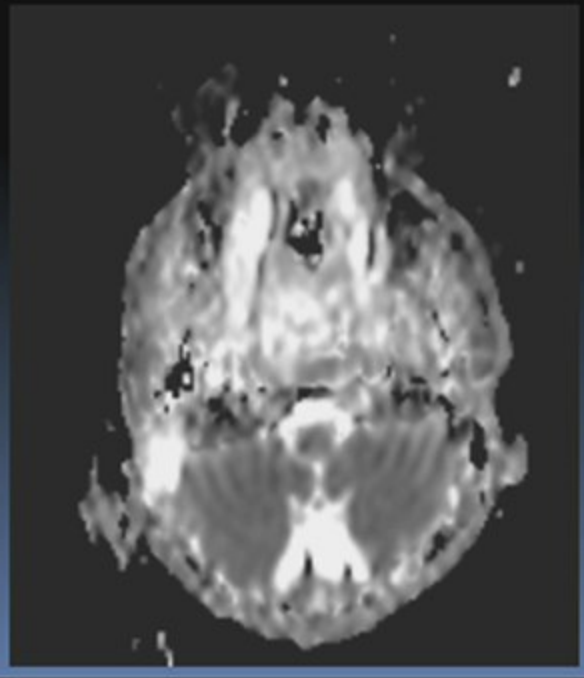

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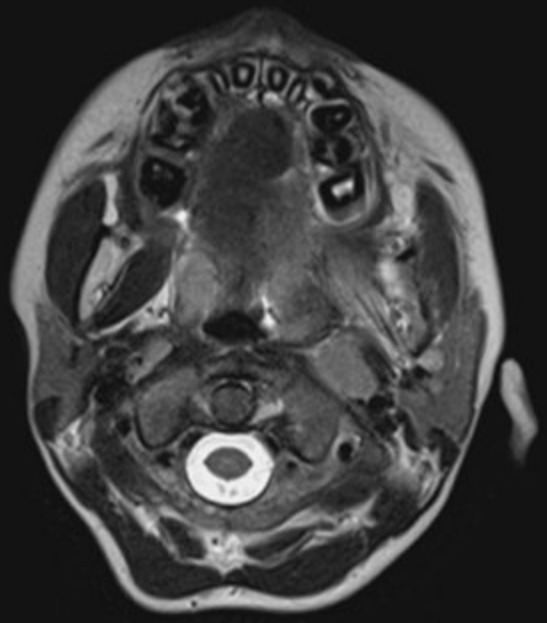

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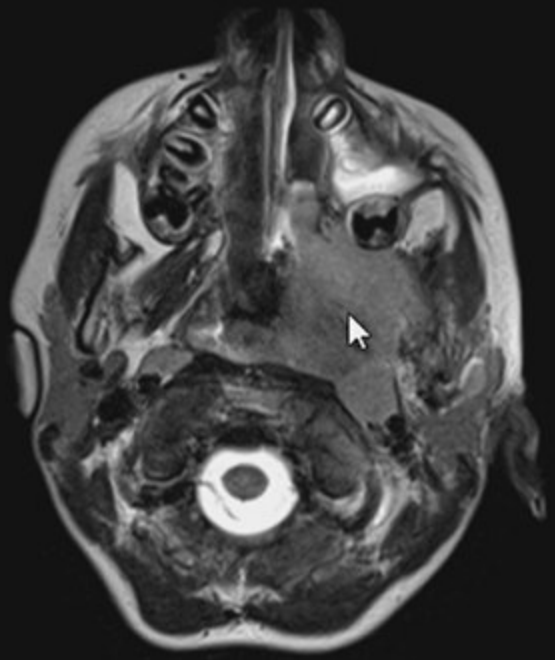

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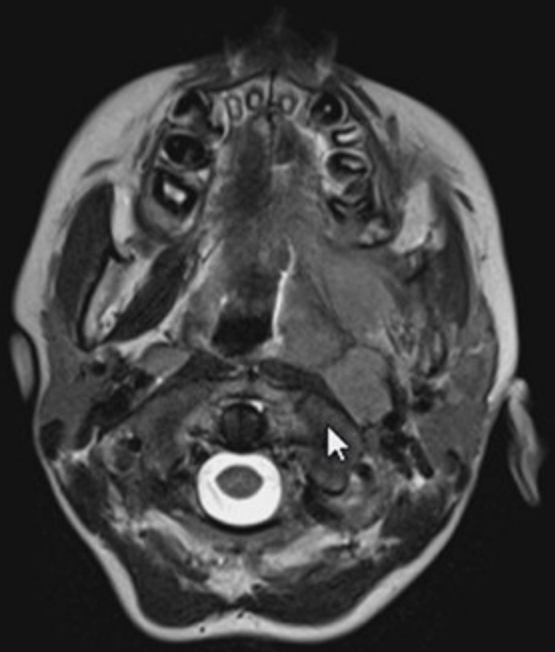

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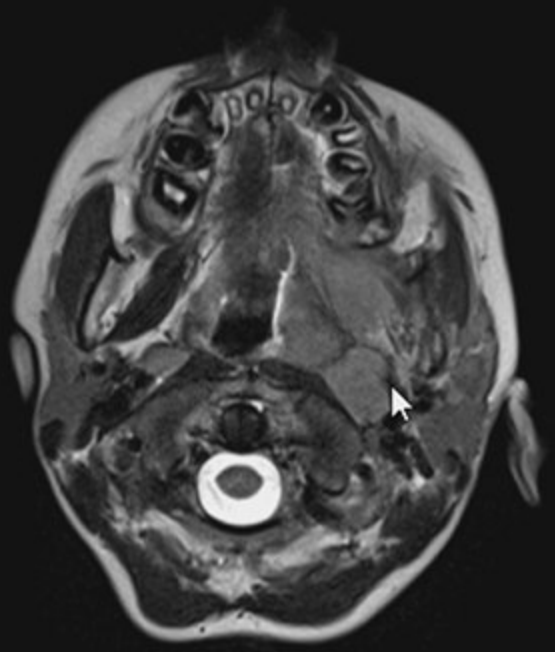

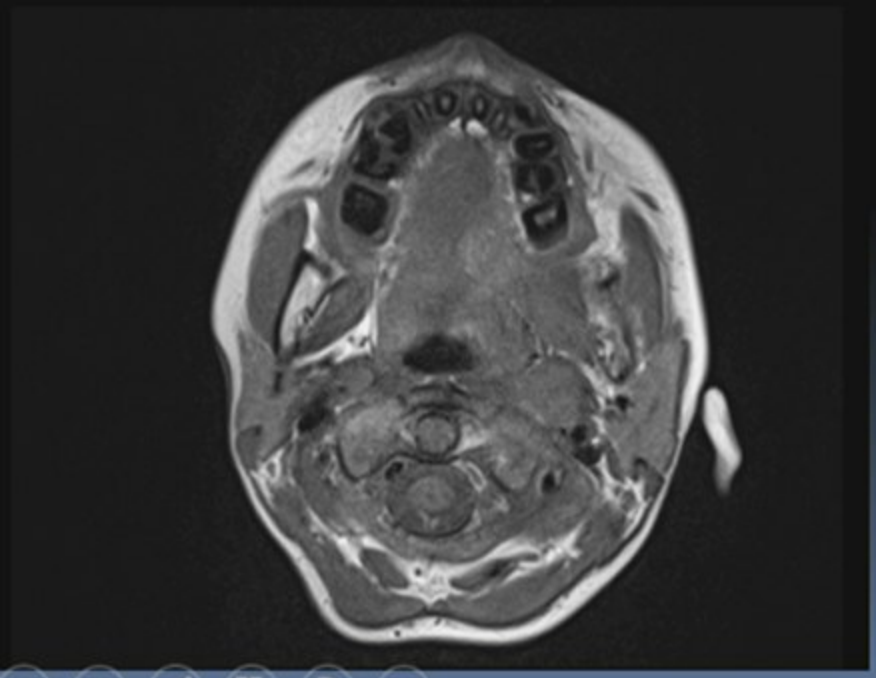

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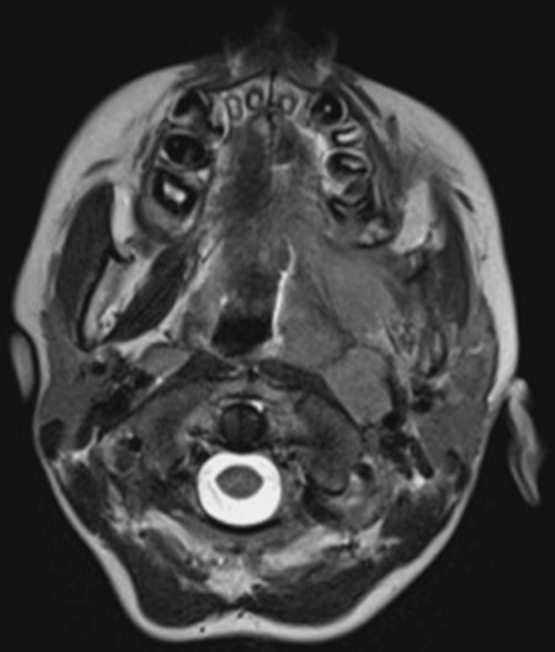

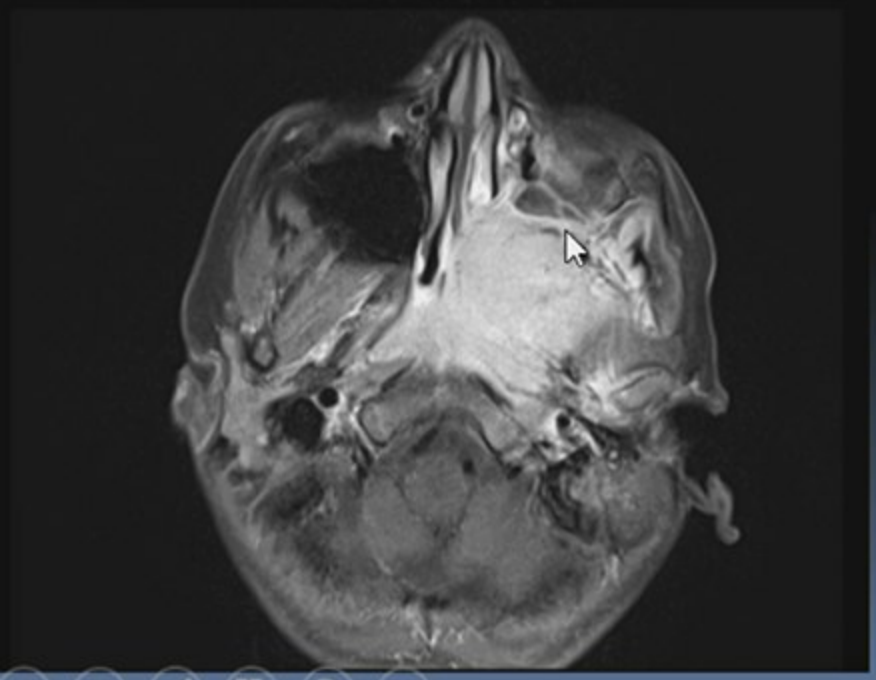

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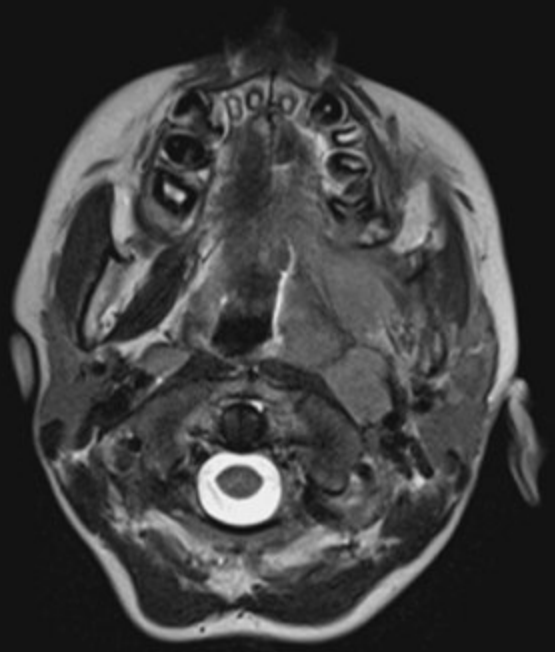

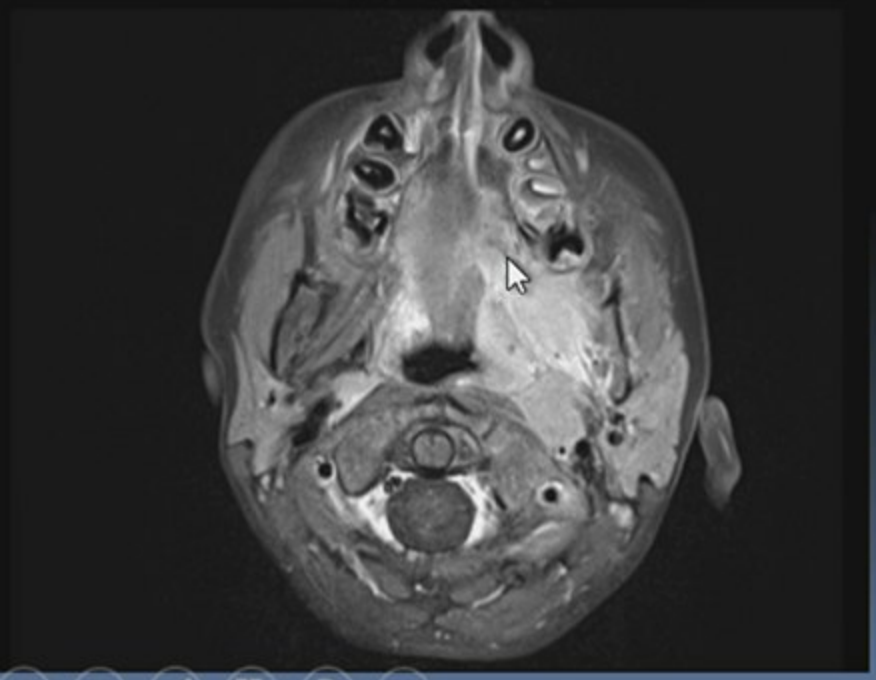

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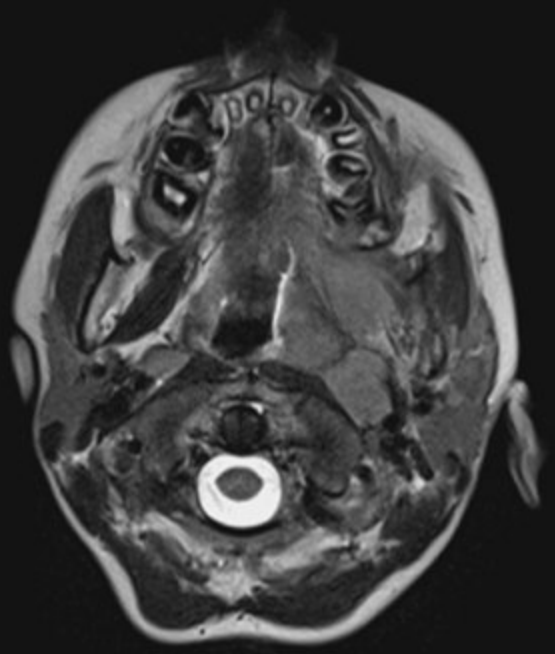

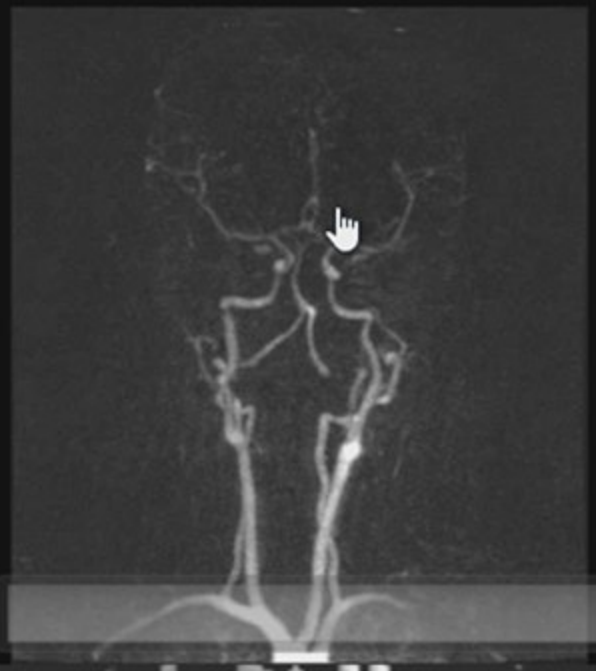

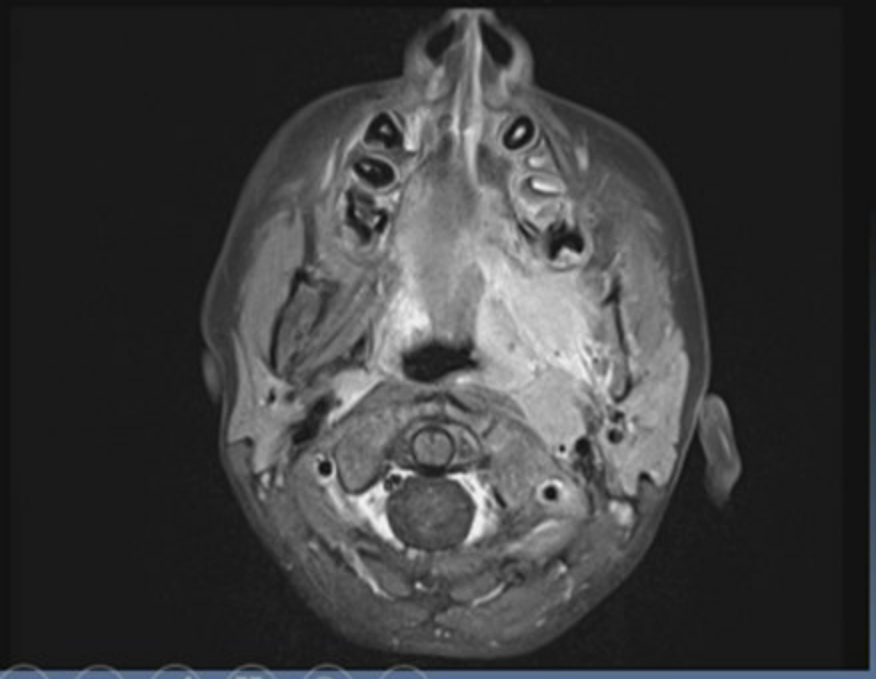

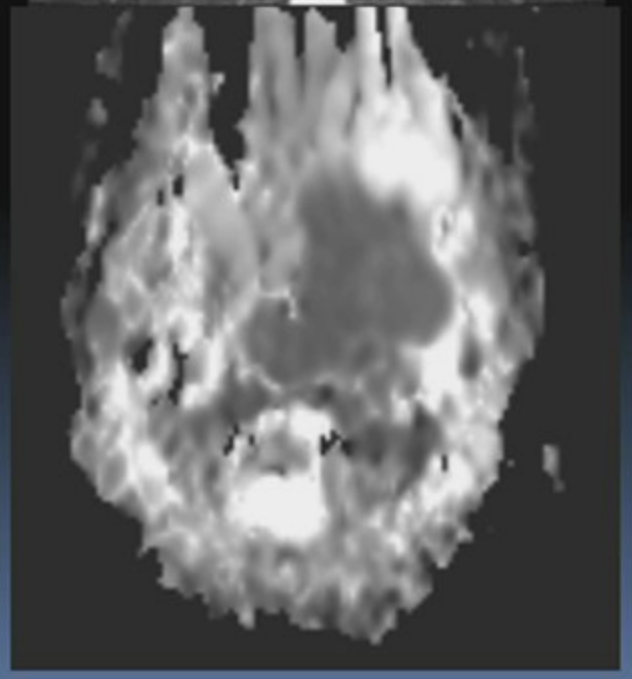

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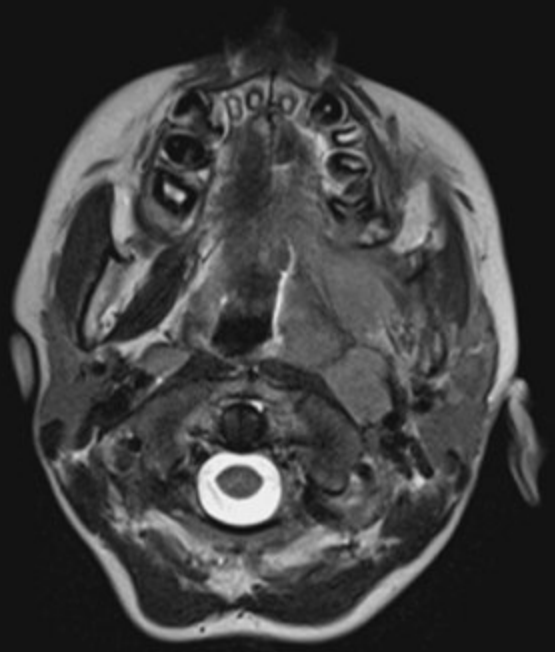

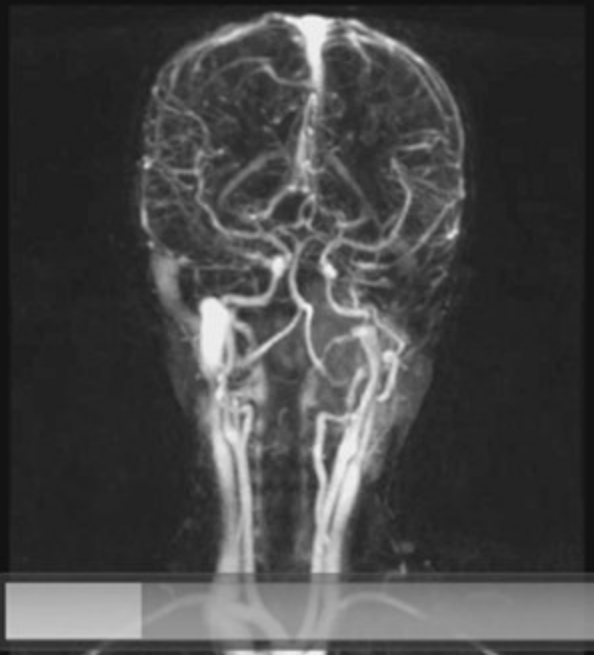

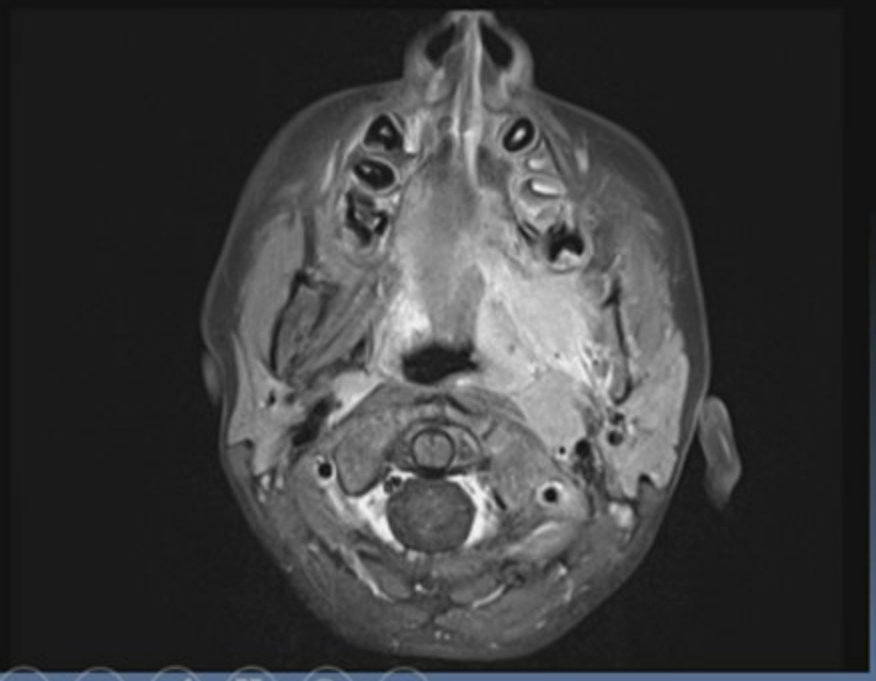

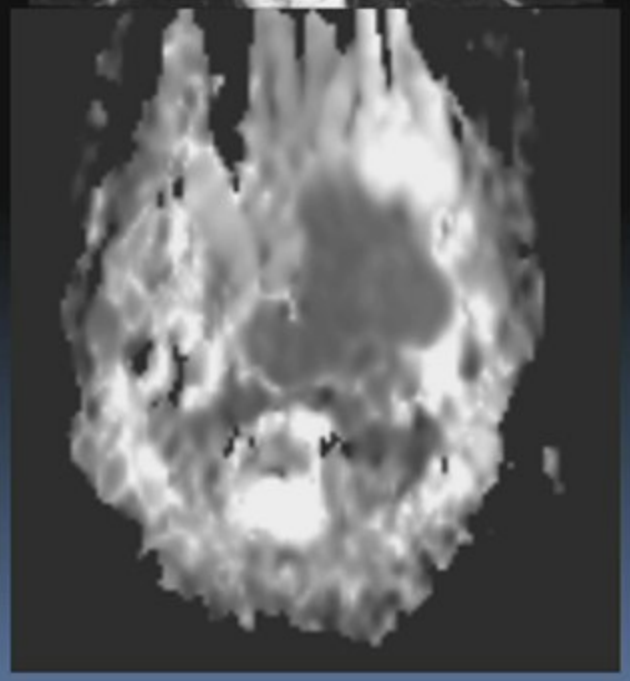

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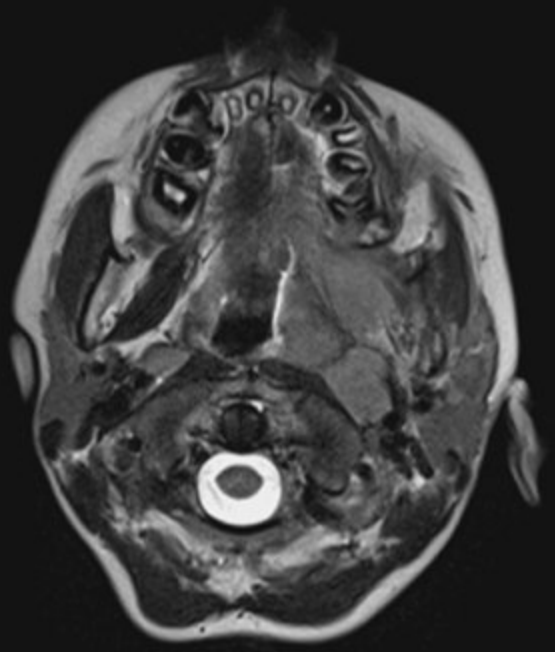

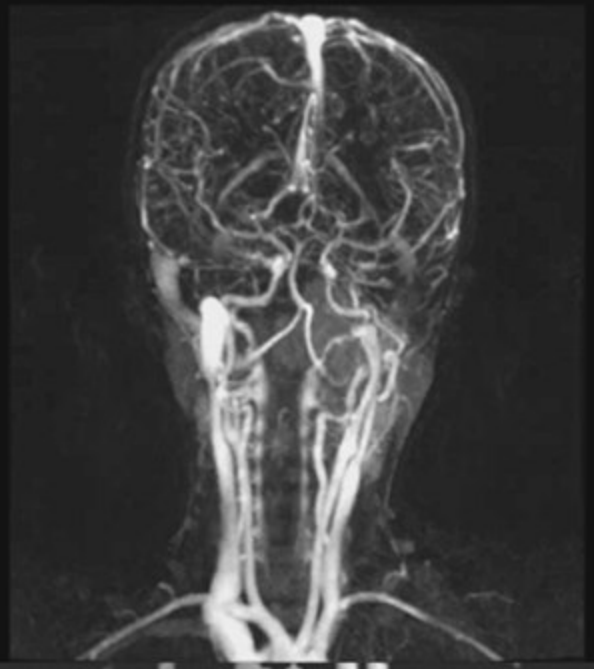

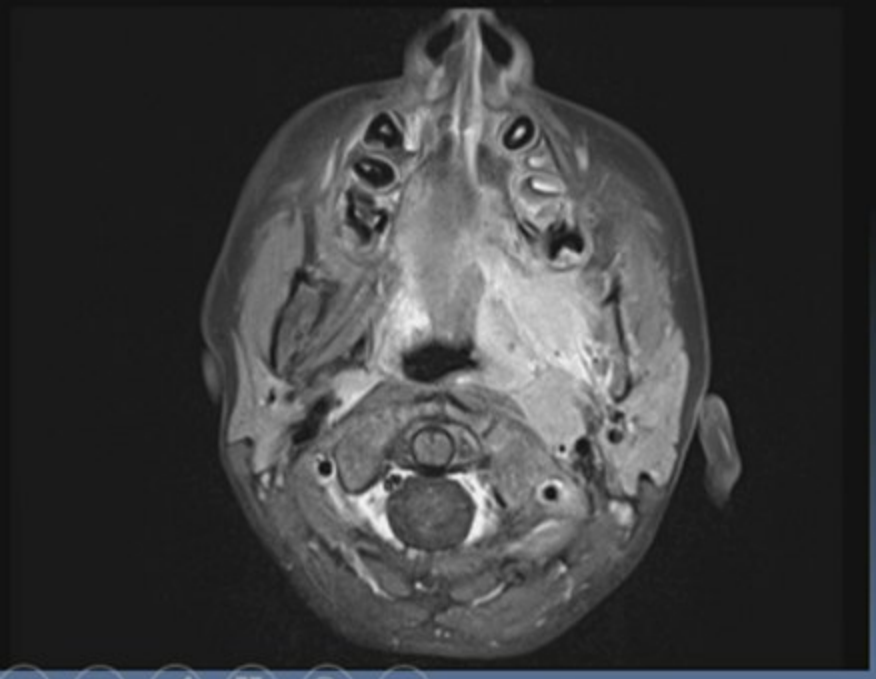

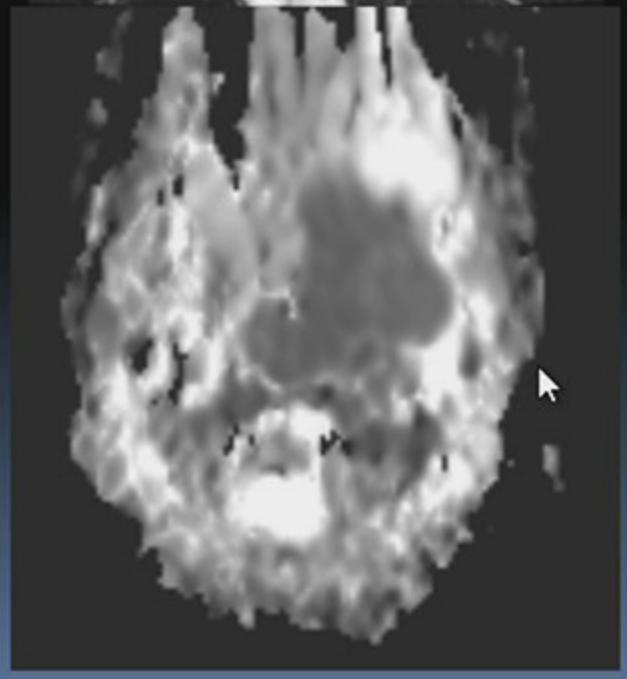

Pterigopalatin Fossa

- Maksiller sinüs duvarı posteromedialinde dar bir alan
- Baş boyun kanseri evrelemesinde ve tanısında yeri nedeni ile önemli
- Nazofarenkse sfenopalatin foromen ile bağlanır

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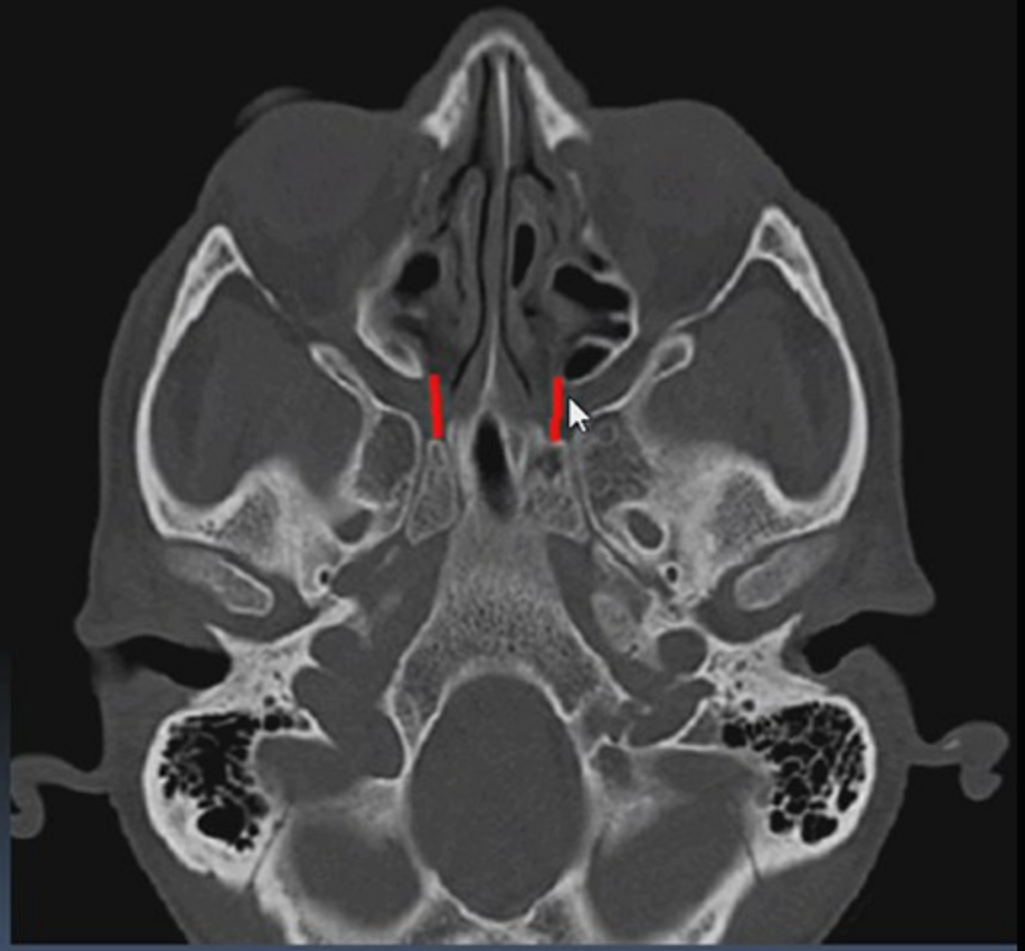

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[b]*Department of Radiology, Gazi University School of Medicine, Ankara, Turkey*

Table 1
Common lesions seen in pterygopalatine fossa according to the age

	Child	Adult
Neurogenic tumour	Neurofibroma	Meningioma
	Schwannoma	Neurofibroma
	Meningioma	Schwannoma
		Malignant schwannoma
Myogenic tumour	Rhabdomyoma	Leiomyoma
	Rhabdomyosarcoma	Leiomyosarcoma
Bone and cartilage tumour	Fibrous dysplasia	Chondroma
	Osteosarcoma	Chondrosarcoma
	Ewing sarcoma	Osteosarcoma
Lympho-hematopoietic tumour	Non-Hodgkin lymphoma	Non-Hodgkin lymphoma
	Granulocytic sarcoma	Plasmocytoma
	Langerhans cell histiocytosis	Granulocytic sarcoma
Epithelial tumour	Squamous cell carcinoma	Inverted papilloma
	Adenocarcinoma	Squamous cell carcinoma
		Basal cell carcinoma
		Melanoma
		Adenocarcinoma
		Adenoid cystic carcinoma
		Mucoepidermoid carcinoma
Vasogenic tumour	Juvenile nasopharyngeal angiofibroma	Angiosarcoma
	Vascular malformation	Hemangiopericytoma
	Hemangioma	Kaposi sarcoma
Inflammation	Inflamatory pseudotumour	Inflamatory pseudotumour
	Lymphoproliferative disorders	Lymphoproliferative disorders
		Wegener granuloma
		Sarcoidosis
Fibrous and adipose tumour	Lipoma	Lipoma
	Lipoblastoma	Fibroma
	Fibrosarcoma	Liposarcoma
	Synovial sarcoma	Fibrosarcoma
		Myxoma
		Malignant fibrous histiocytoma
		Synovial sarcoma

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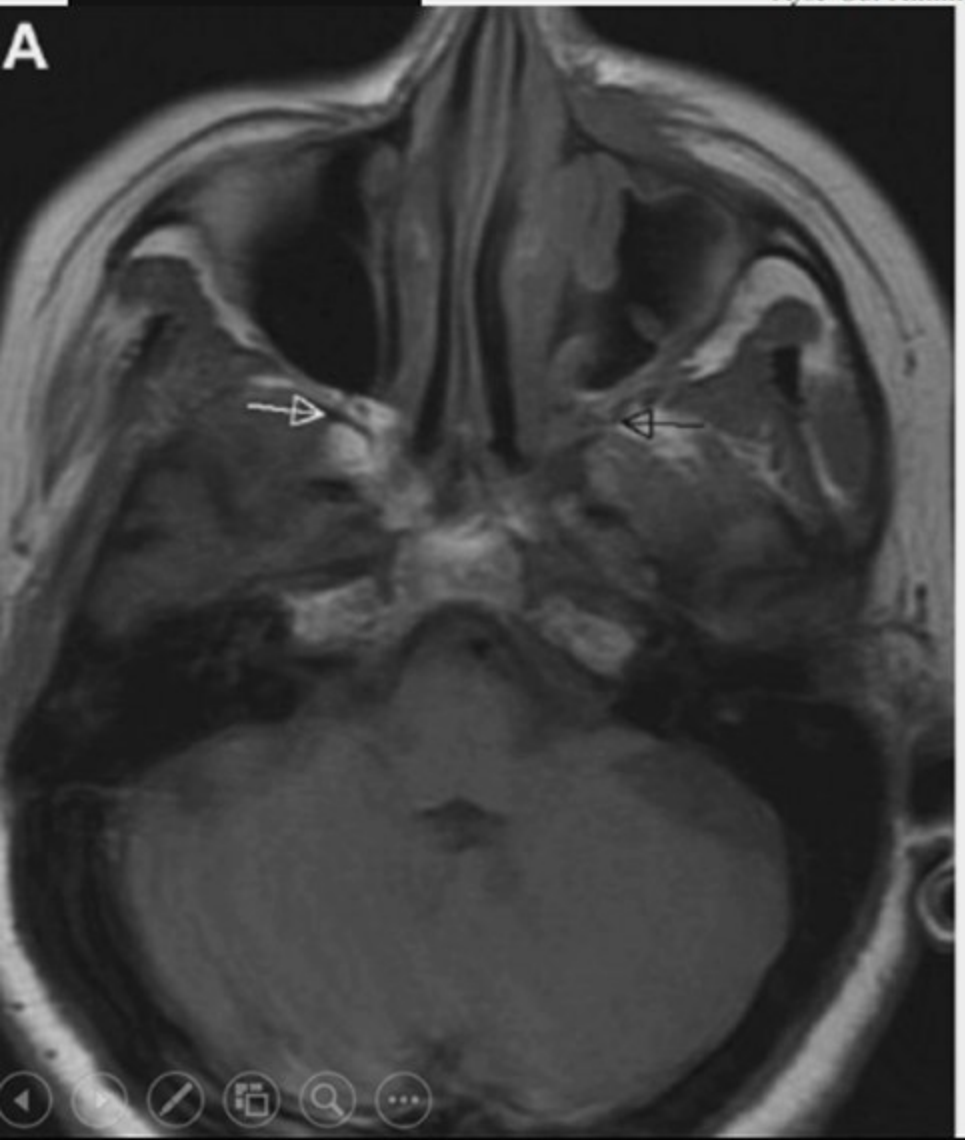

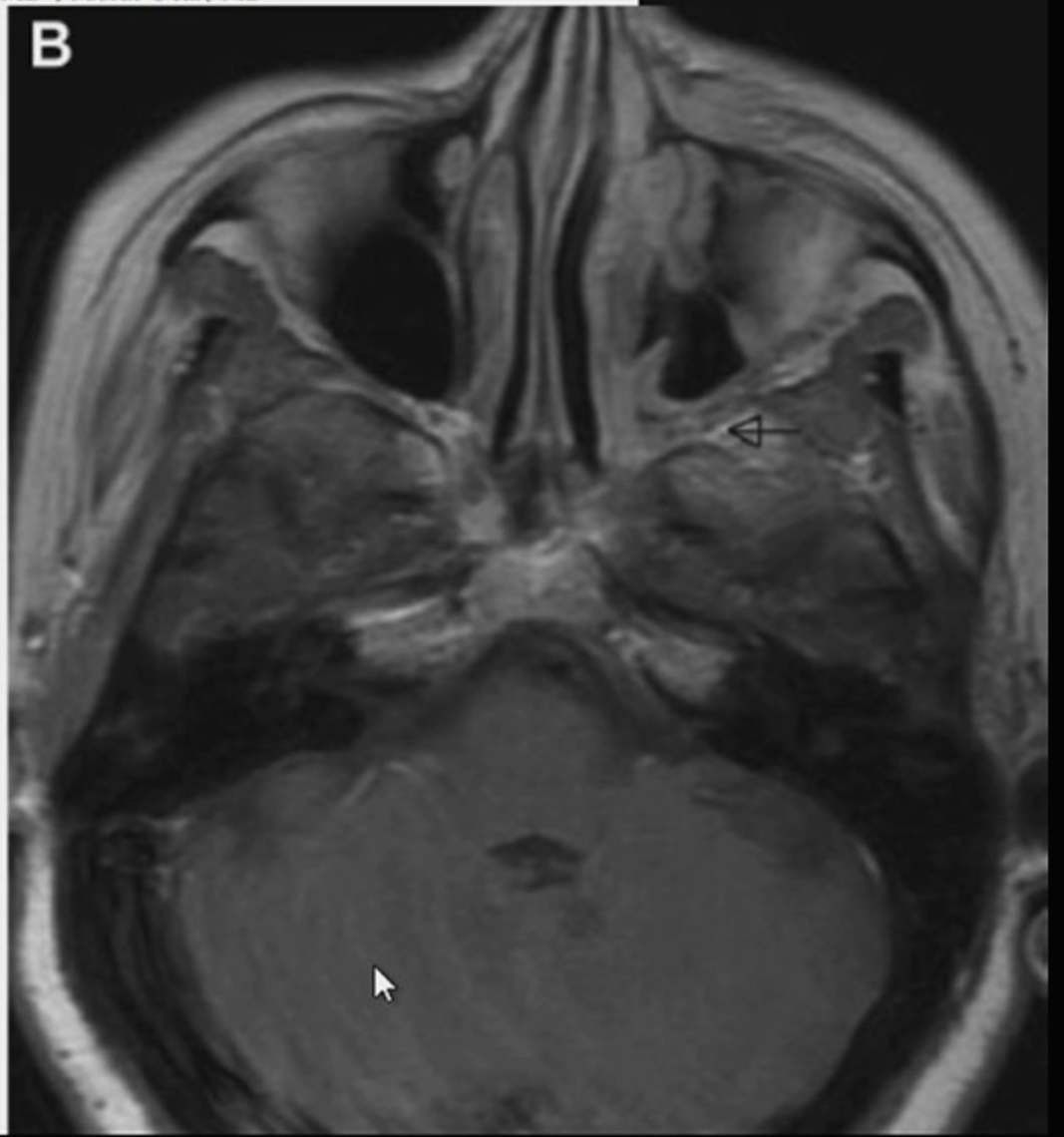

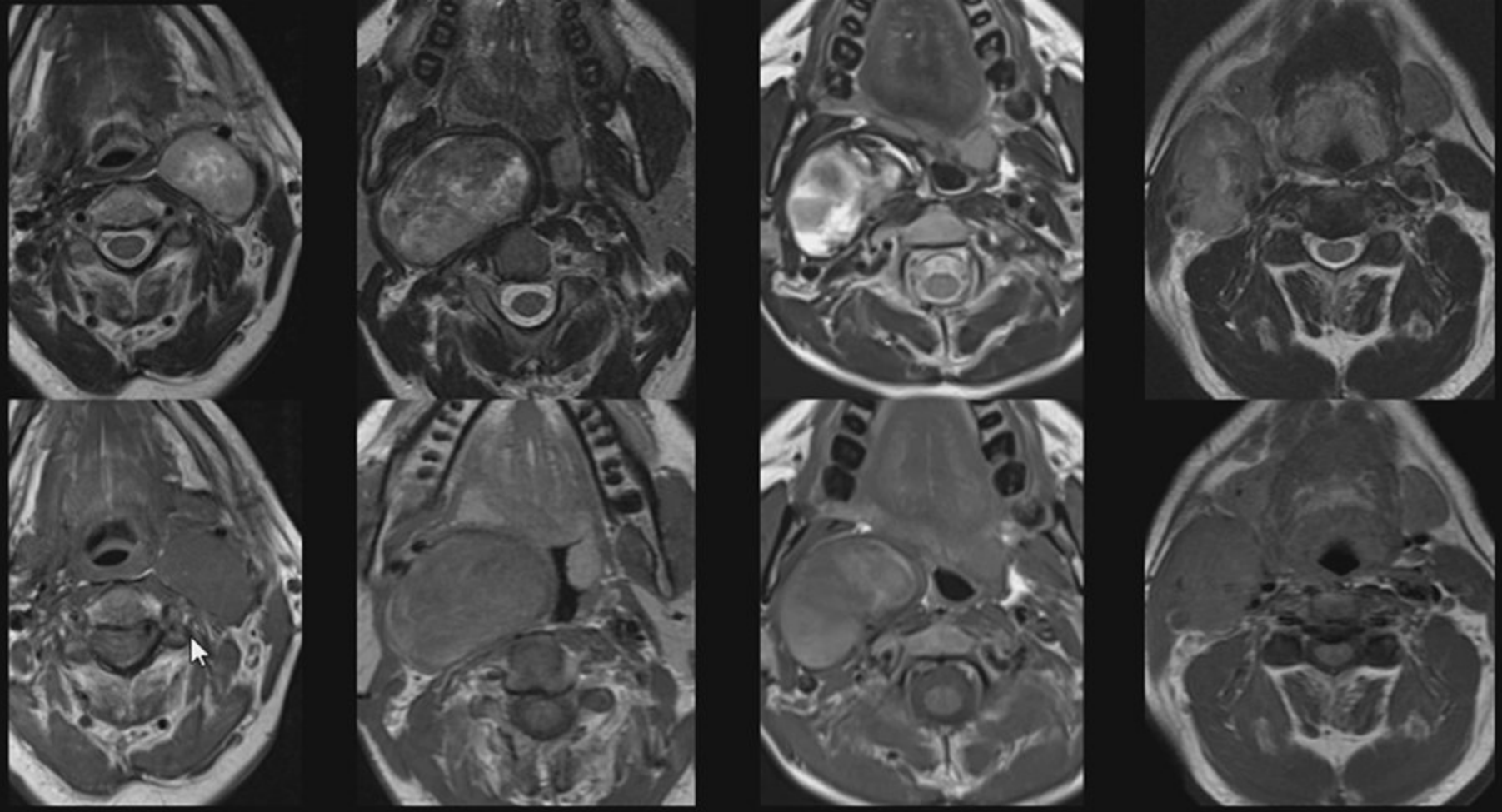

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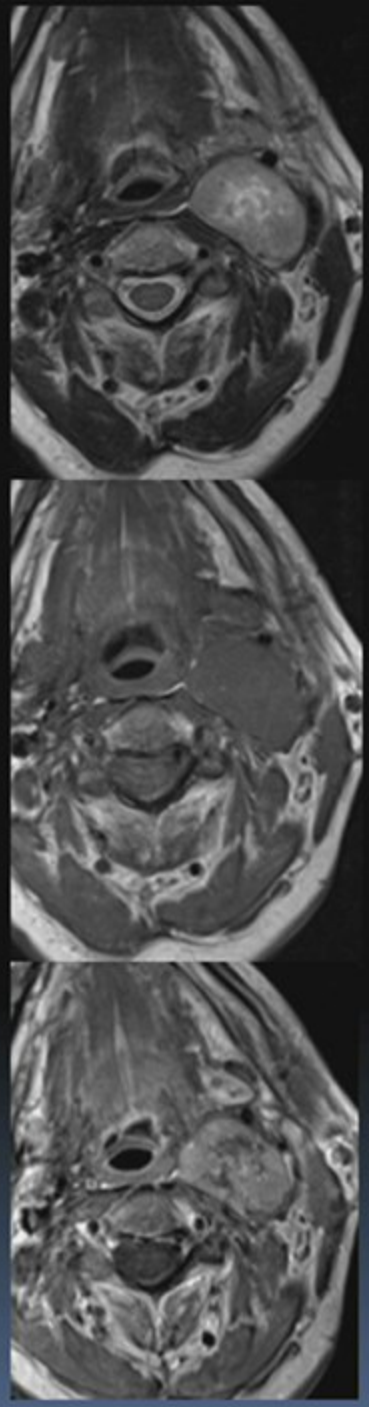
45 yaş erkek

28 yaş kadın

58 yaş erkek



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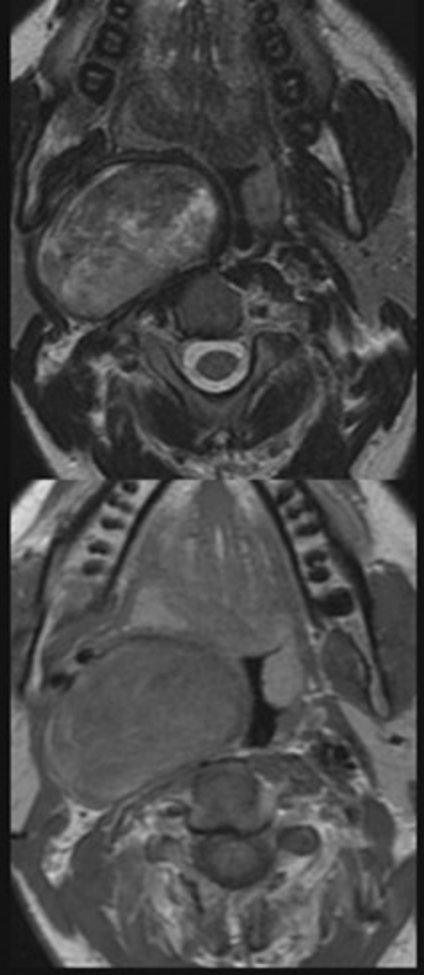

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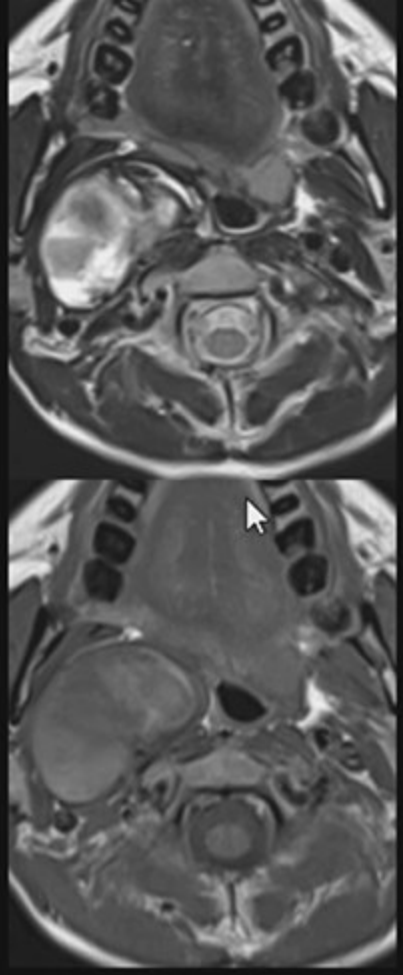

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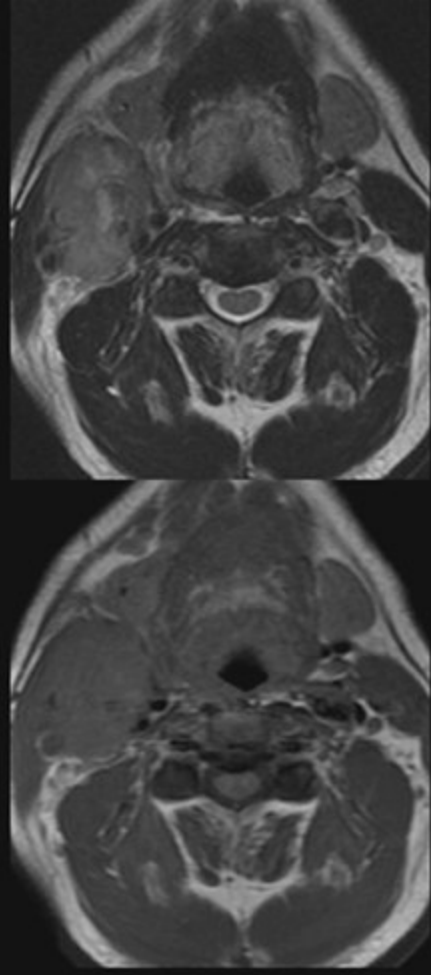

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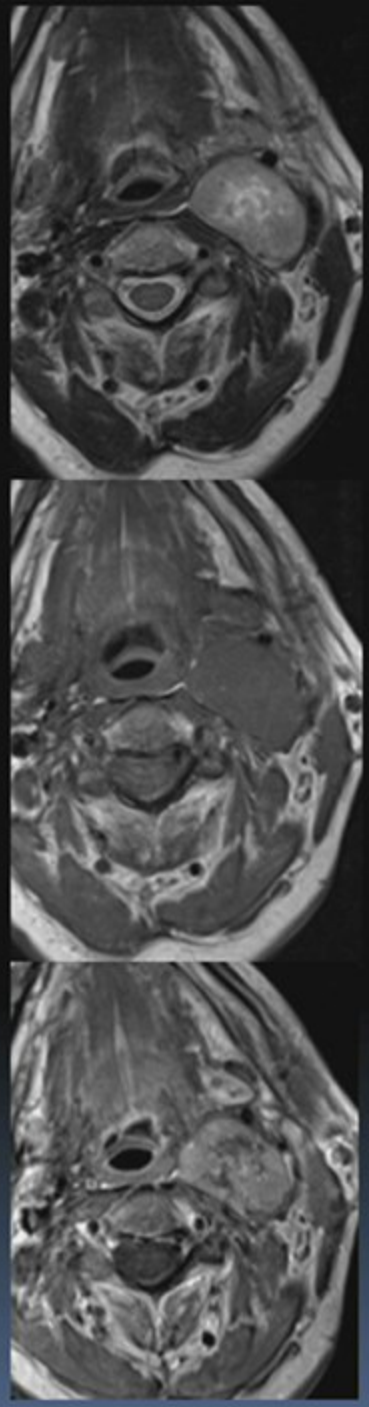

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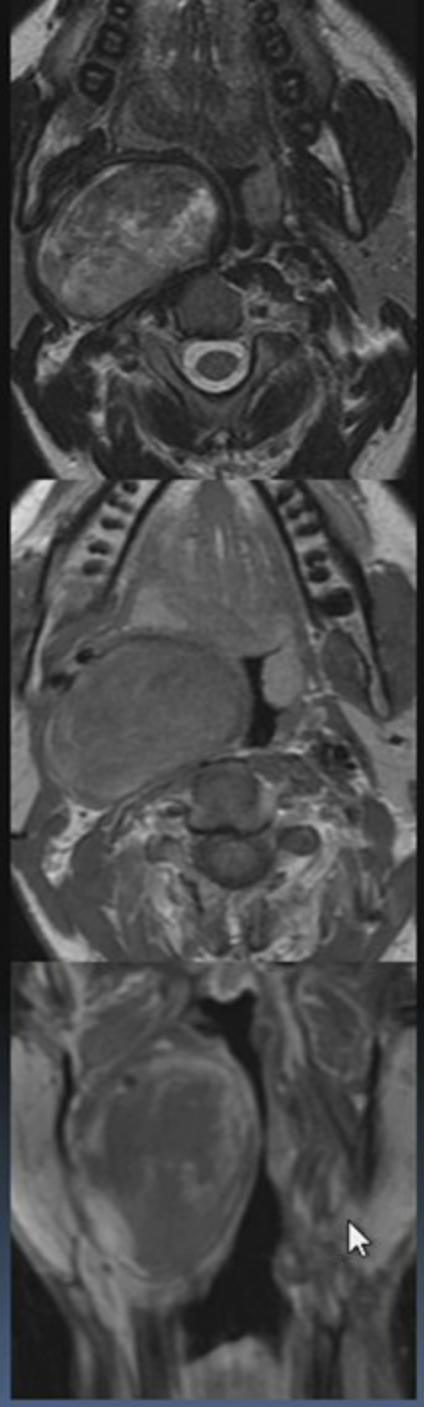

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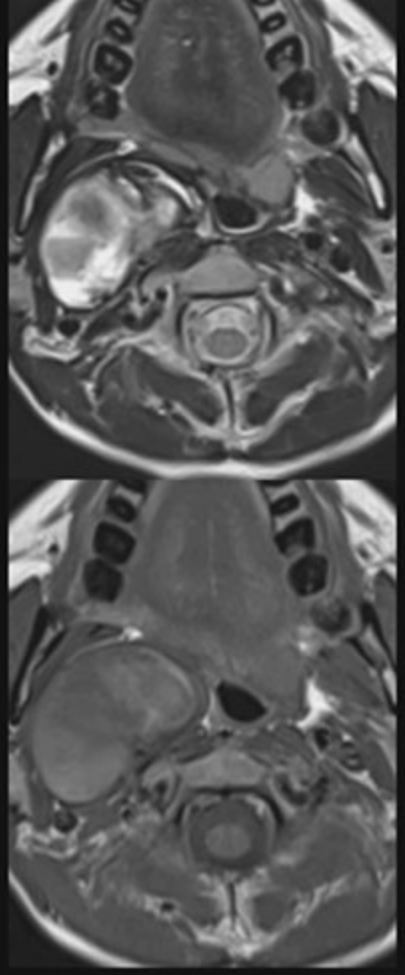

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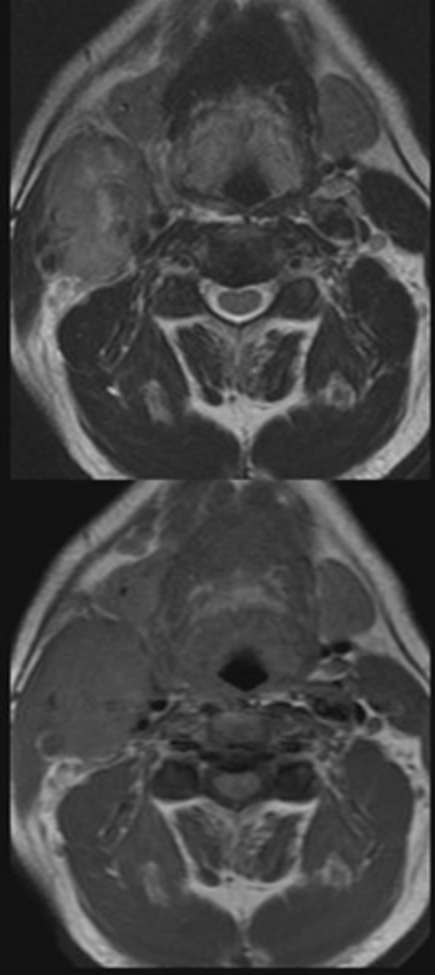

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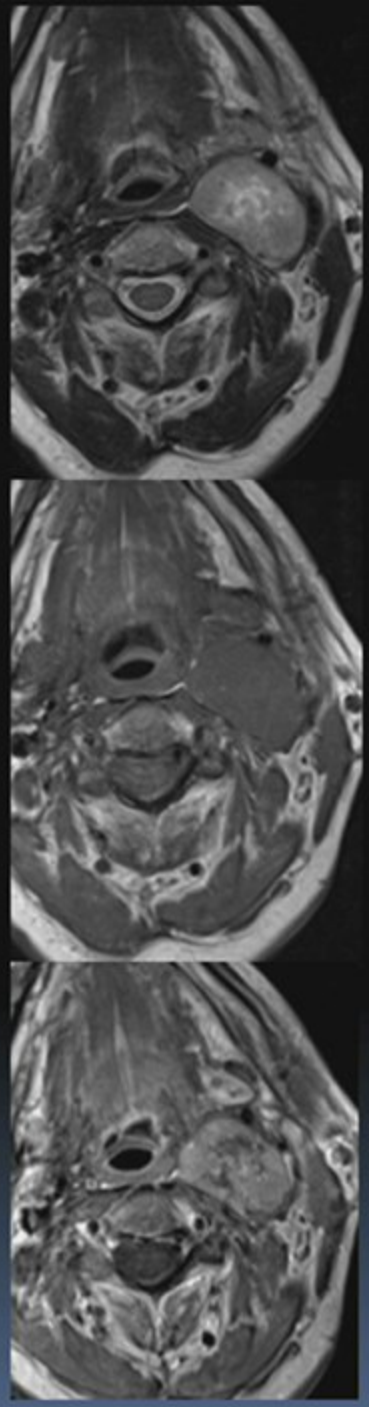

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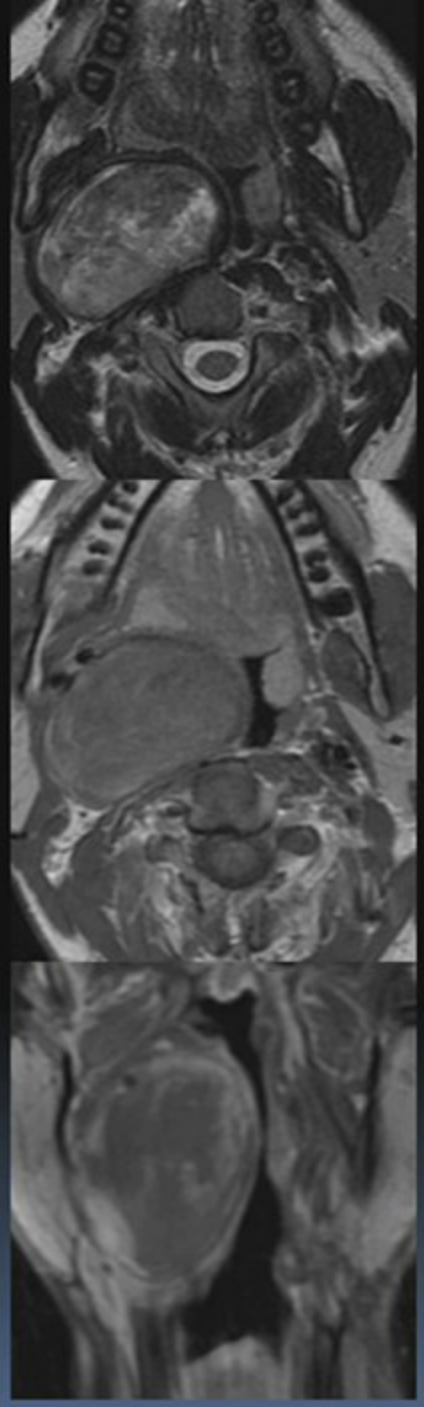

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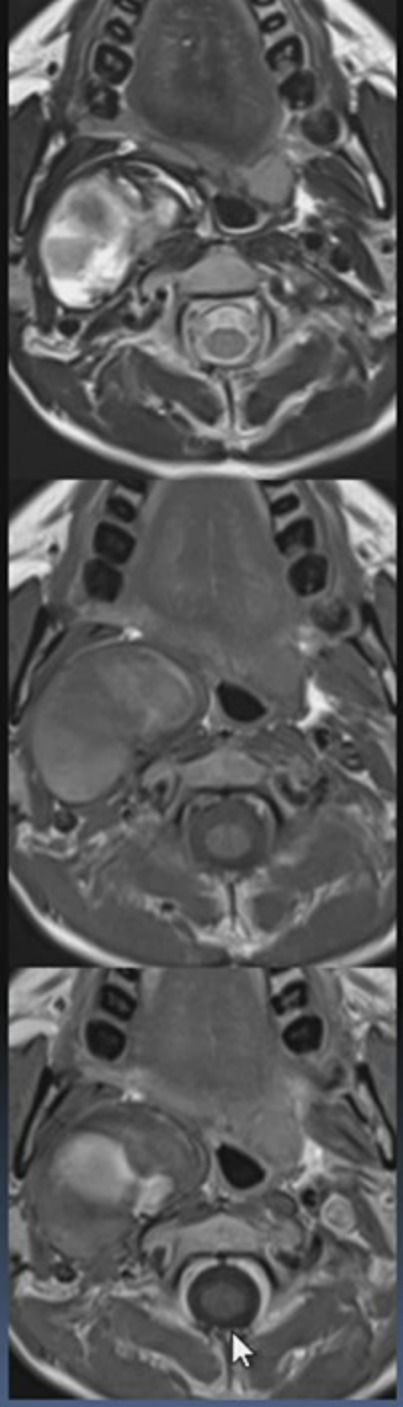

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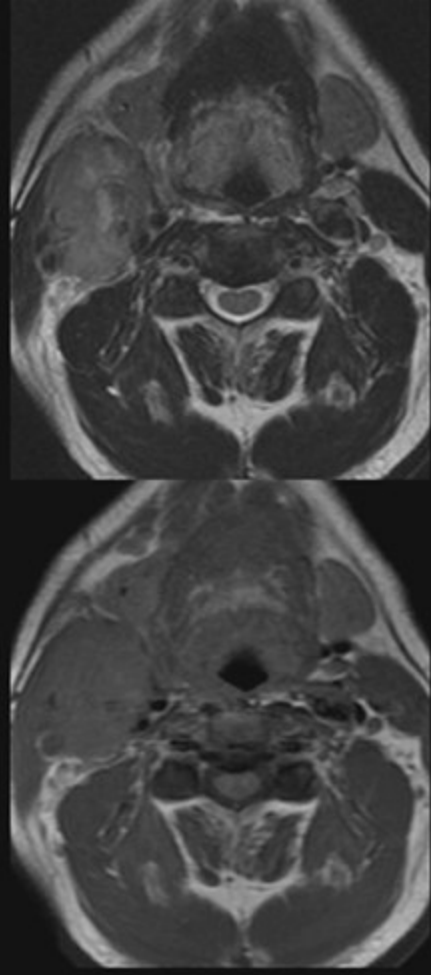

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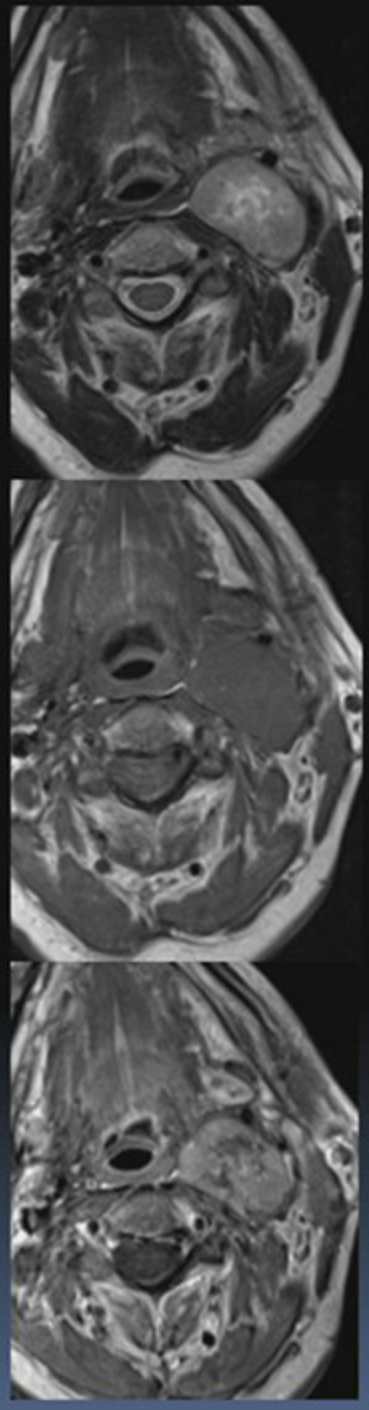

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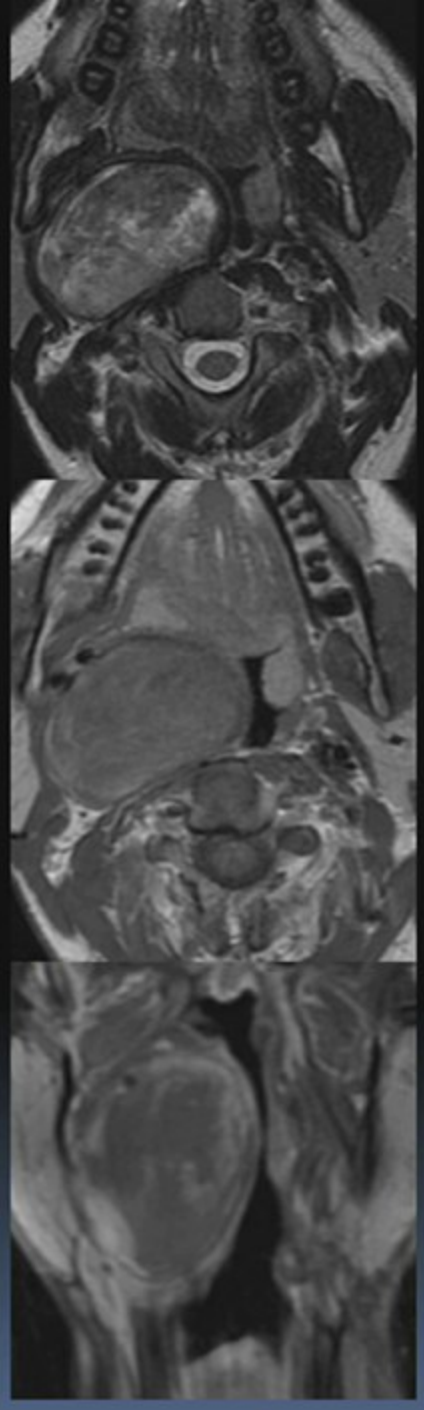

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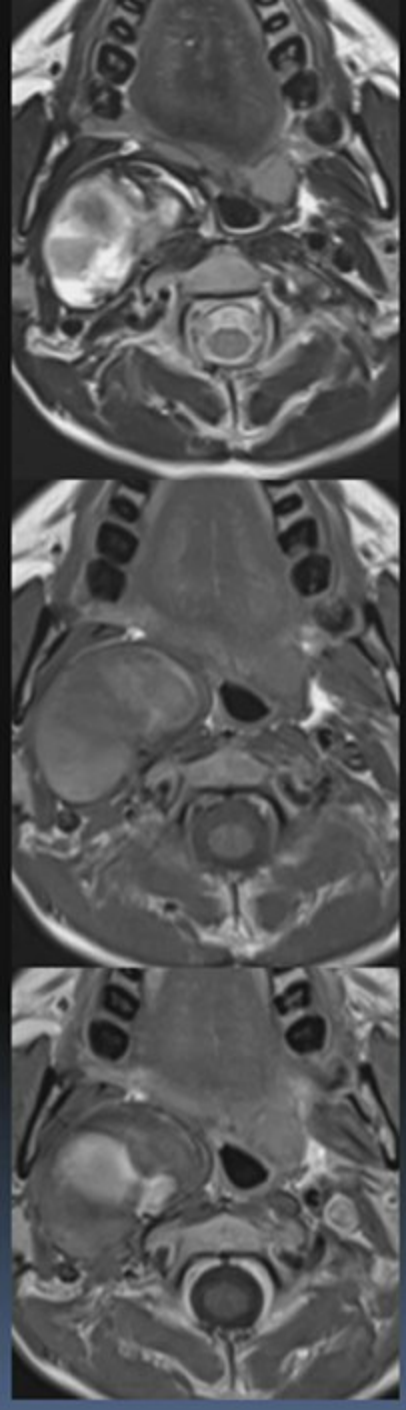

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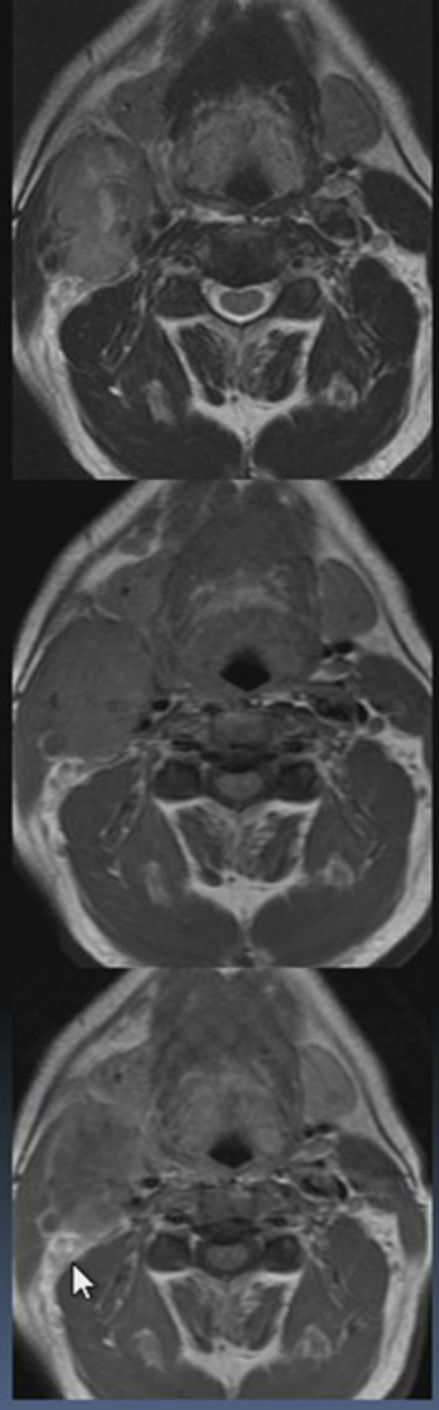

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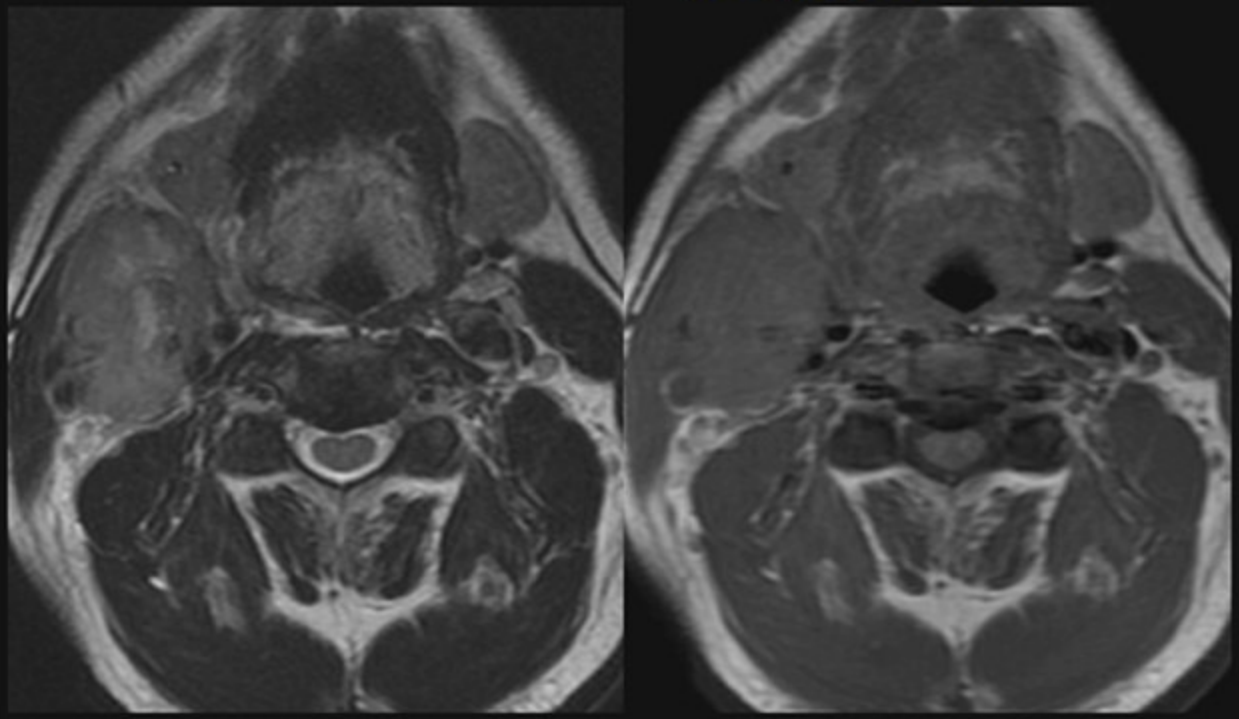

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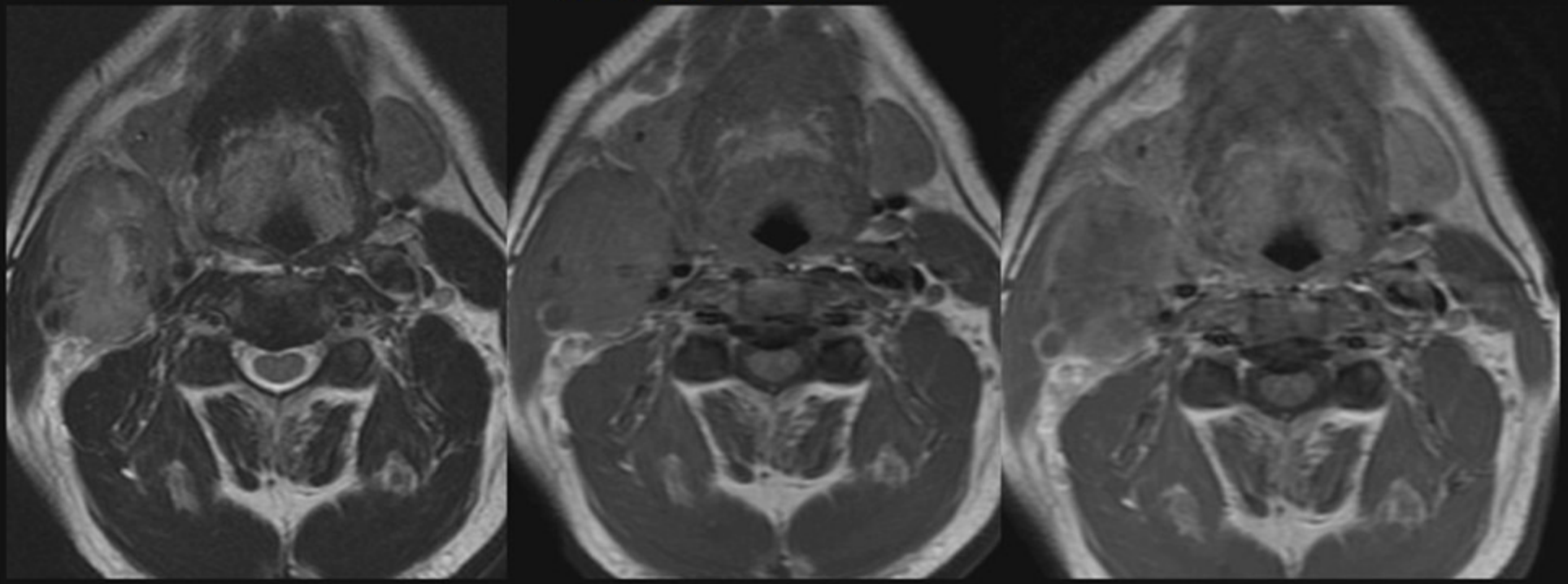

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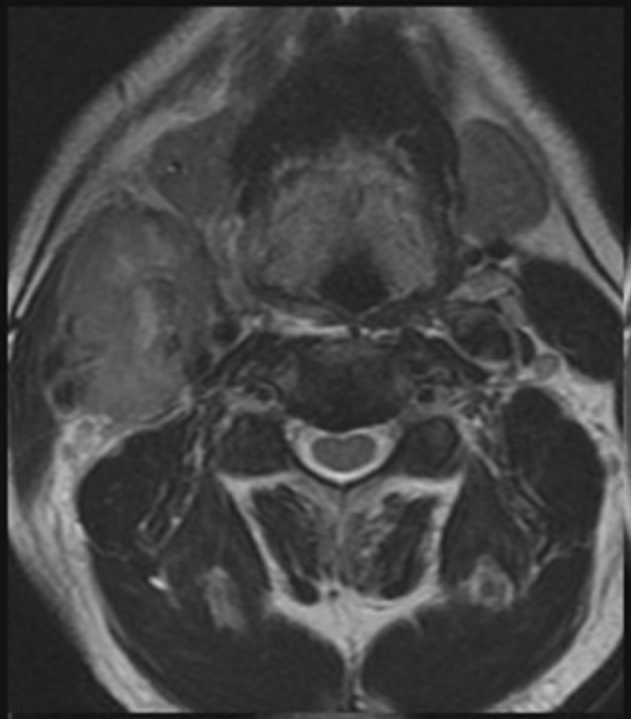

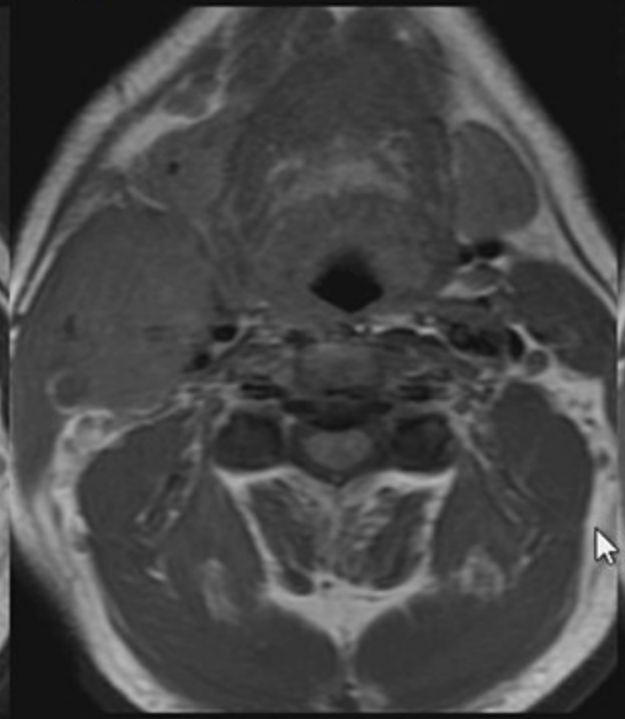

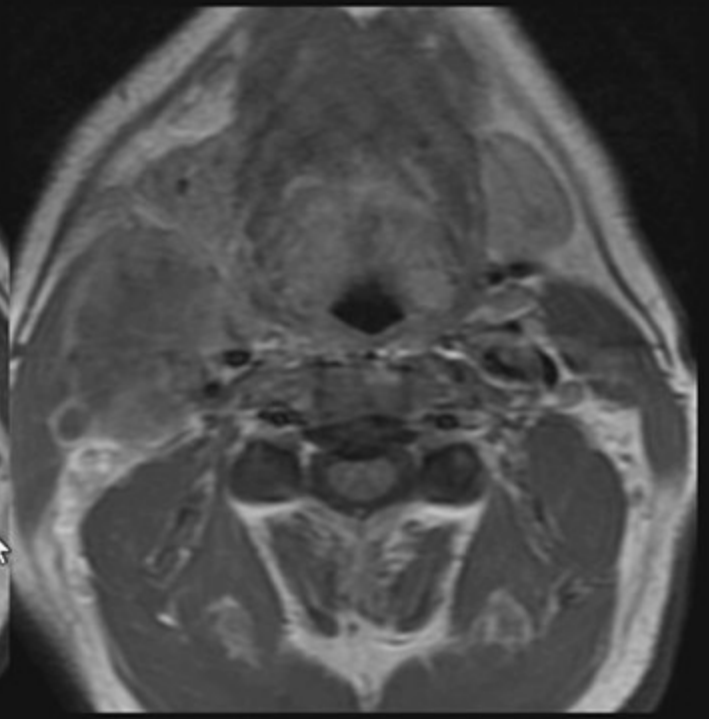

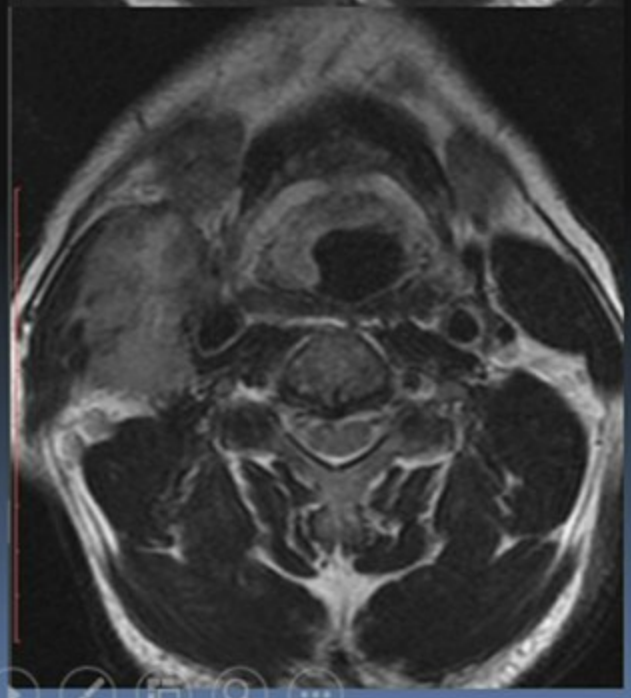

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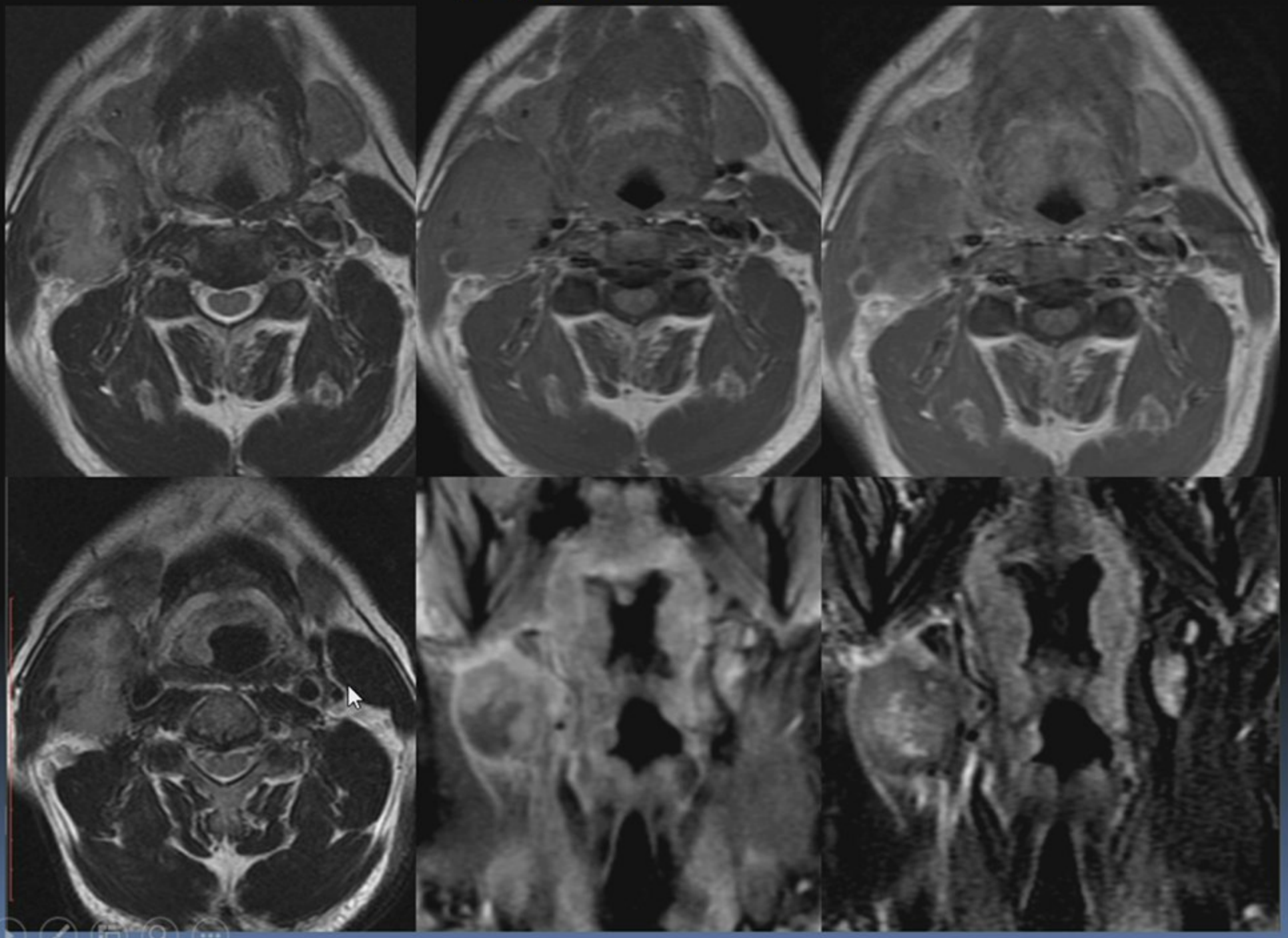

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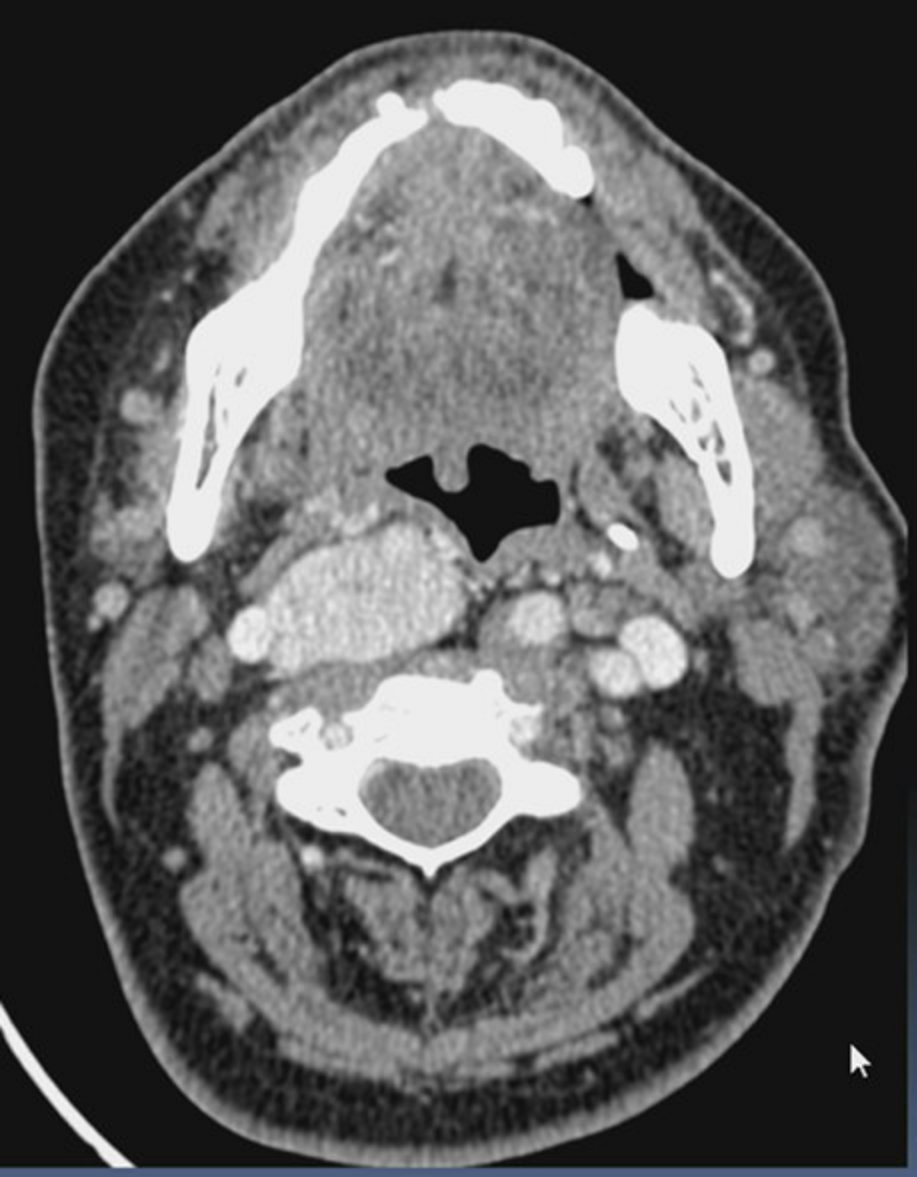

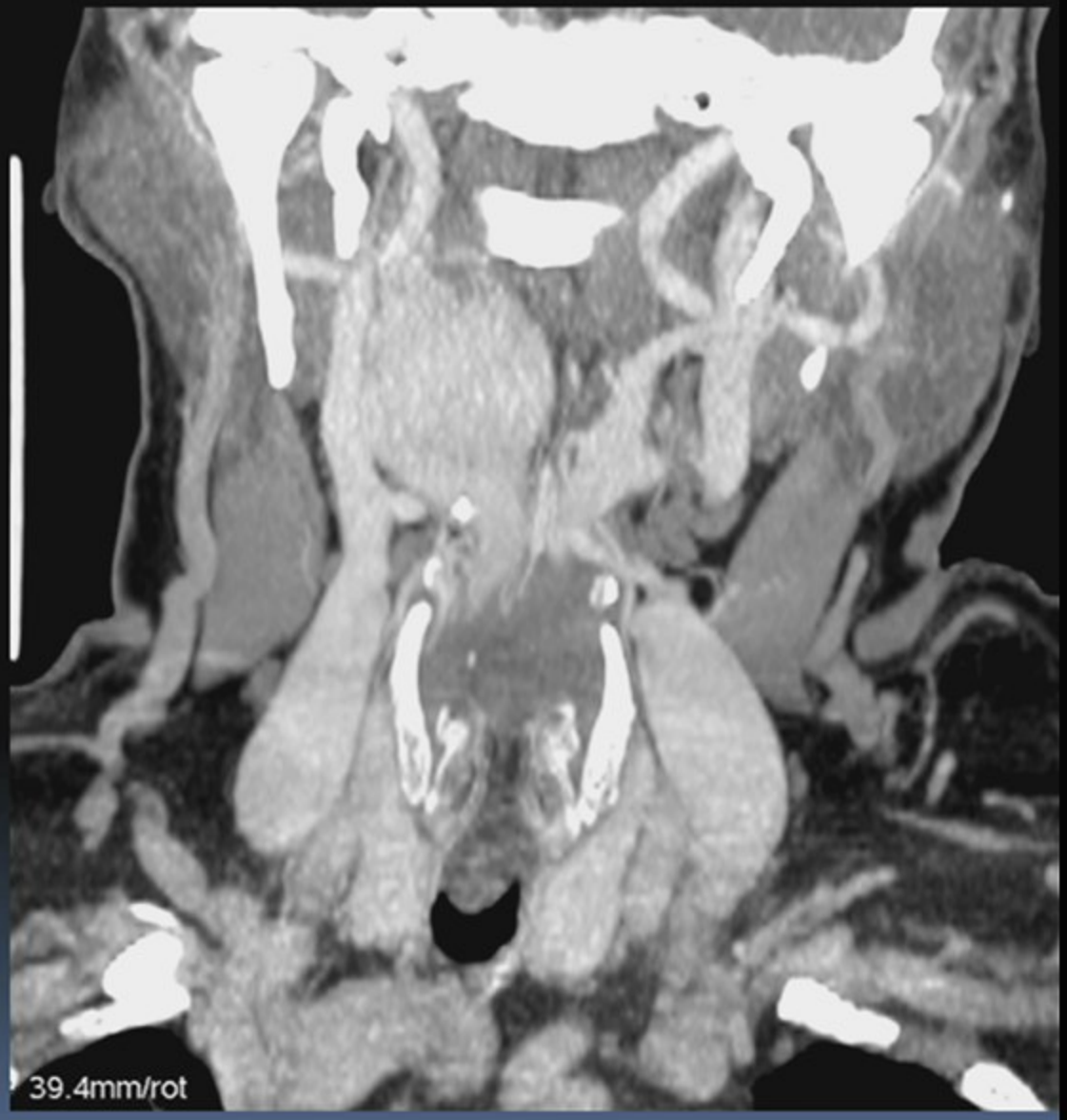

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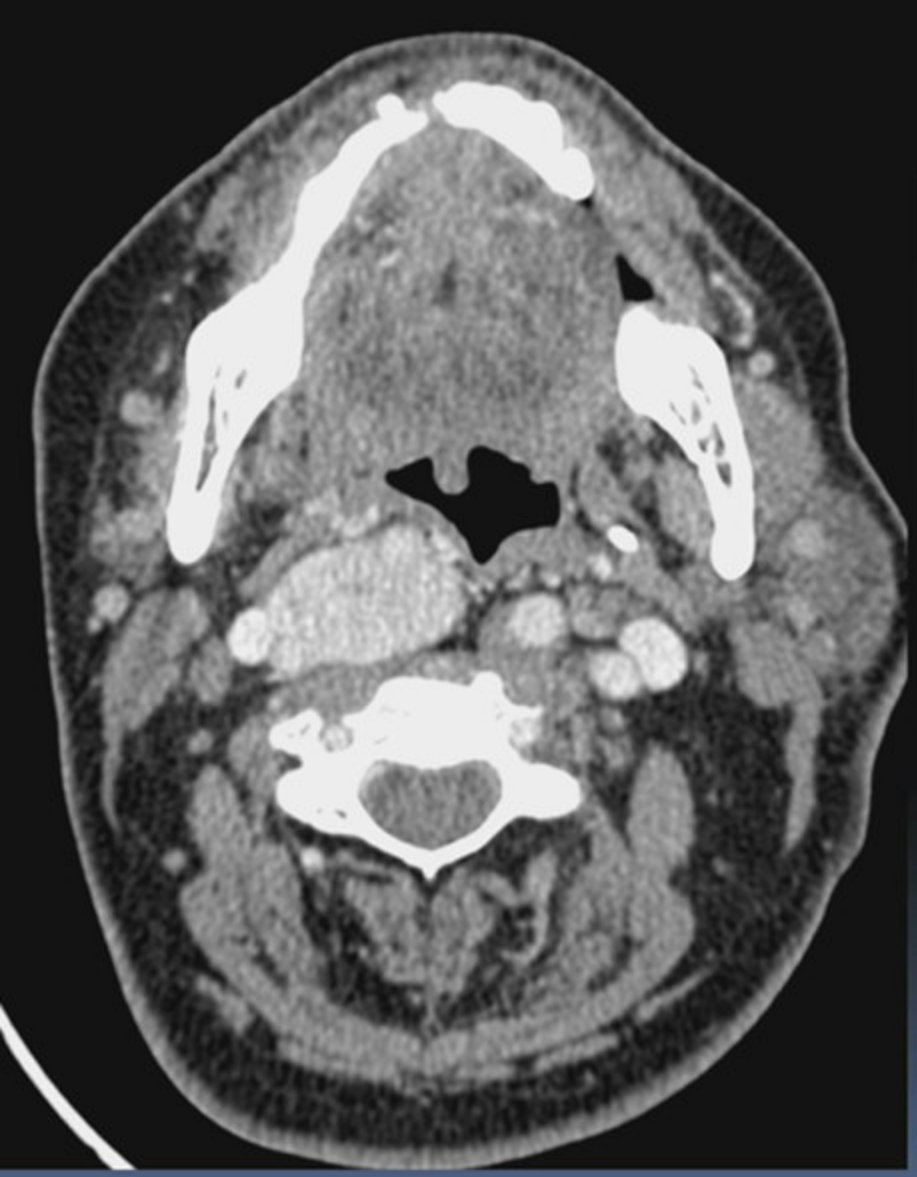
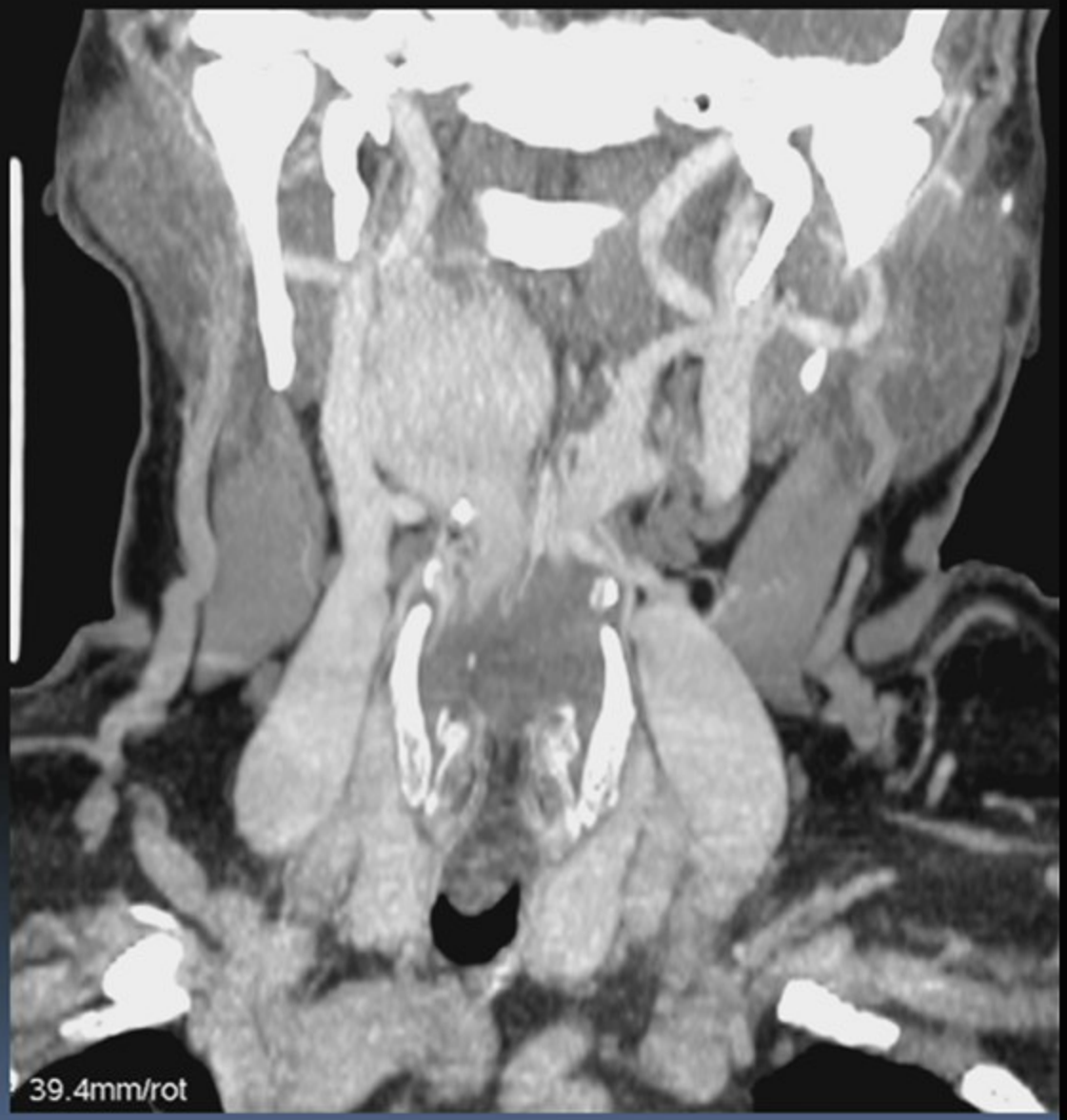
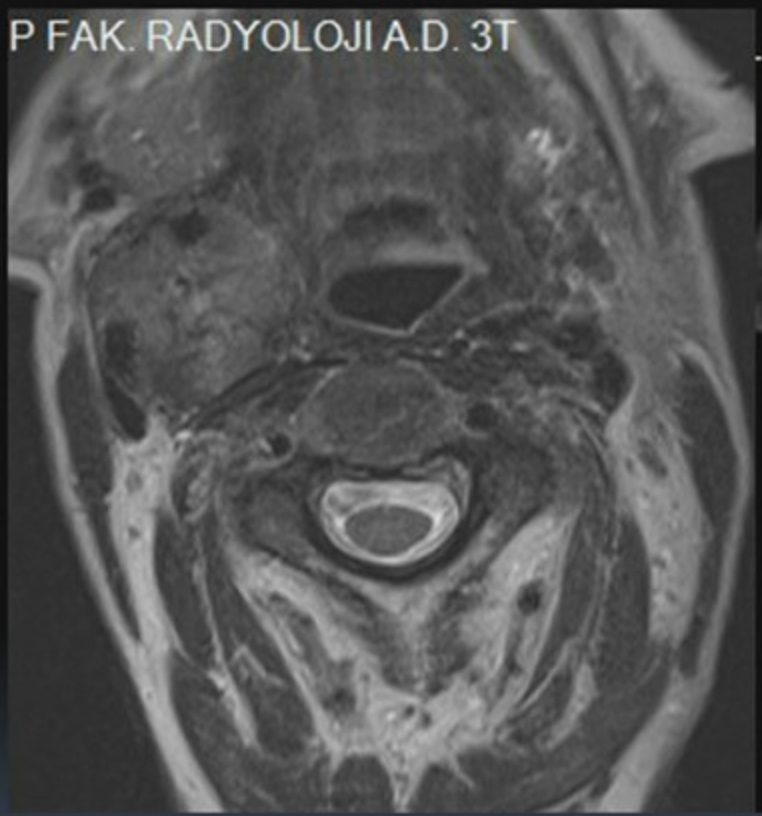




Paraganglioma-glomus karotikum

Paraganglioma

- "Primitive neural crest"'ten köken alan kemoreseptör hücreleri içeren "glomus body"(paraganglia) kökenli
- Karotid body >glomus timpanikum>glomus jugulare>glomus vagale
- Hipervasküler
- MR da tuz-biber görünümü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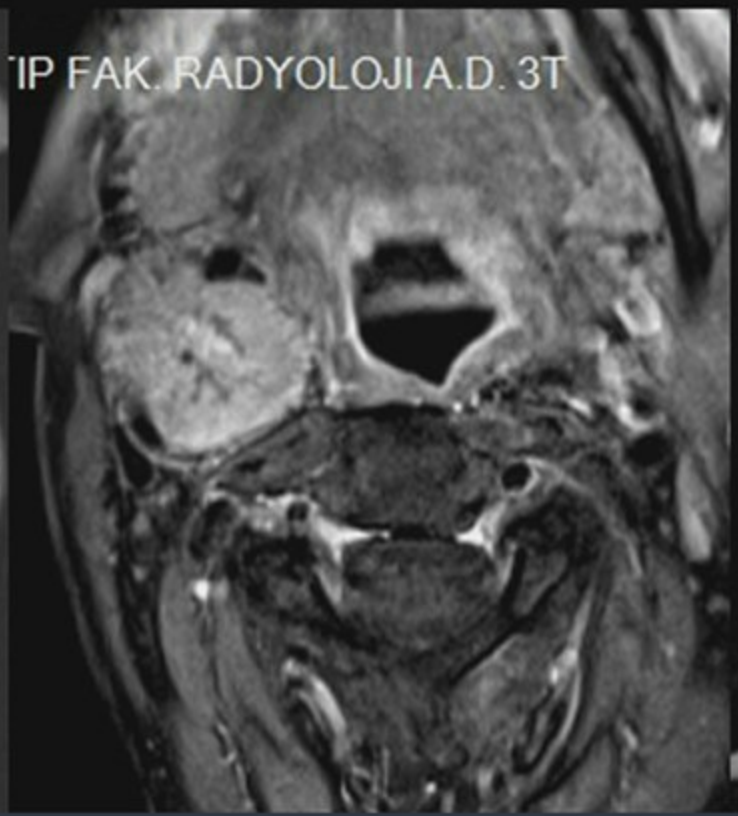
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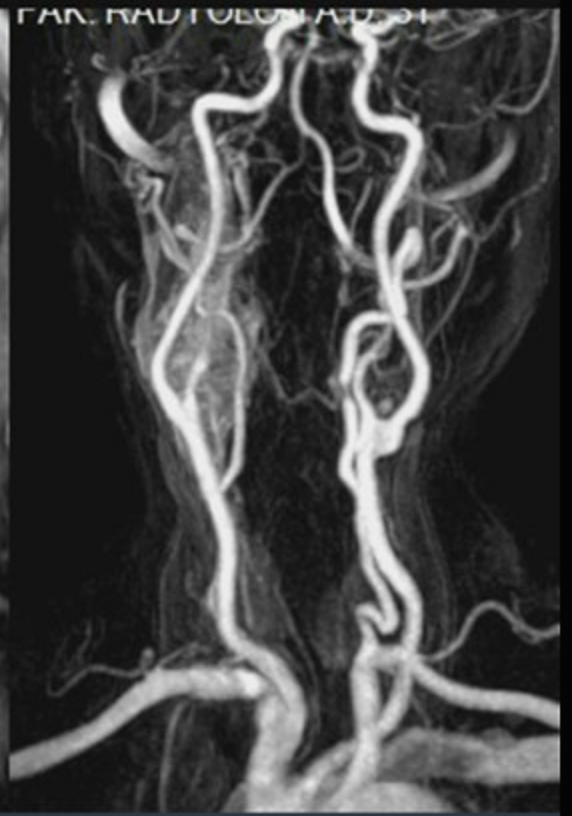

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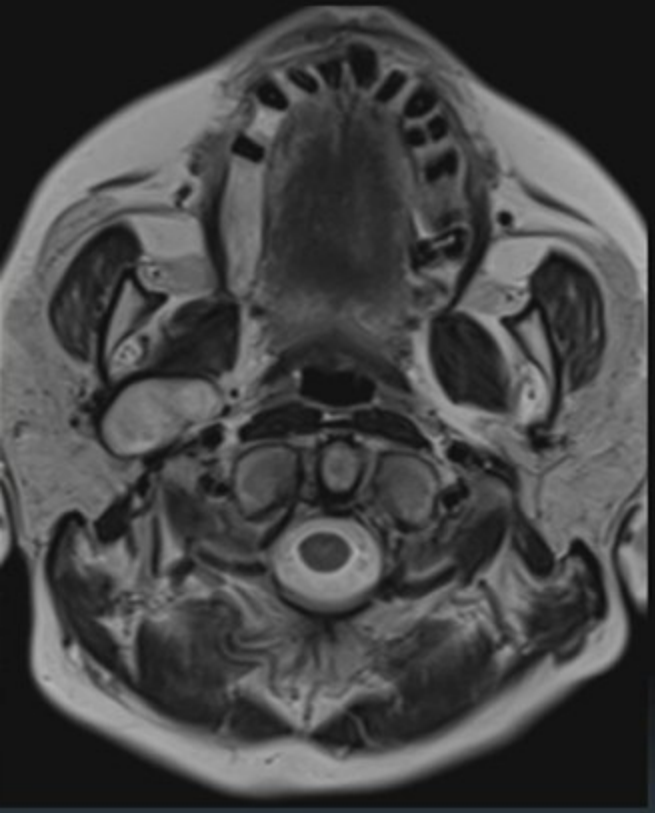

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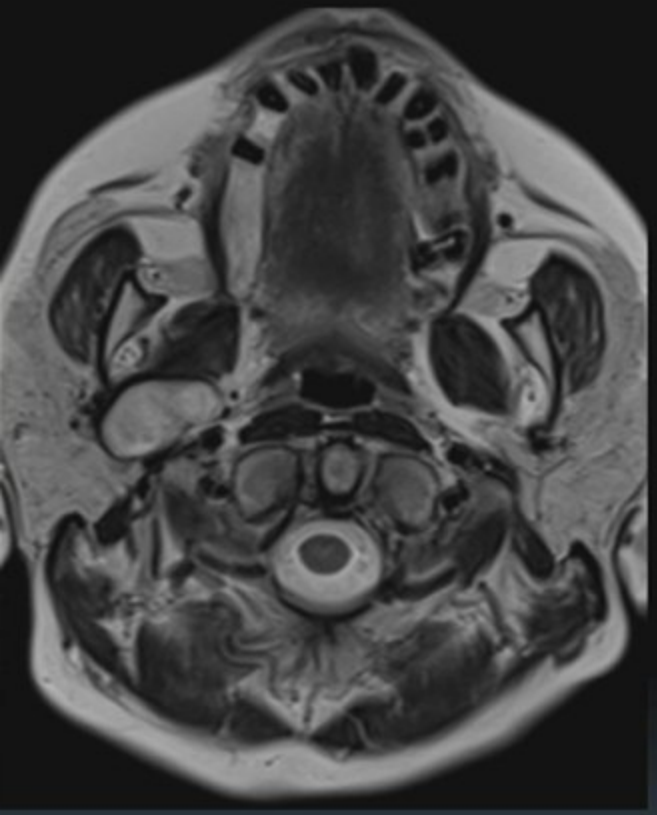

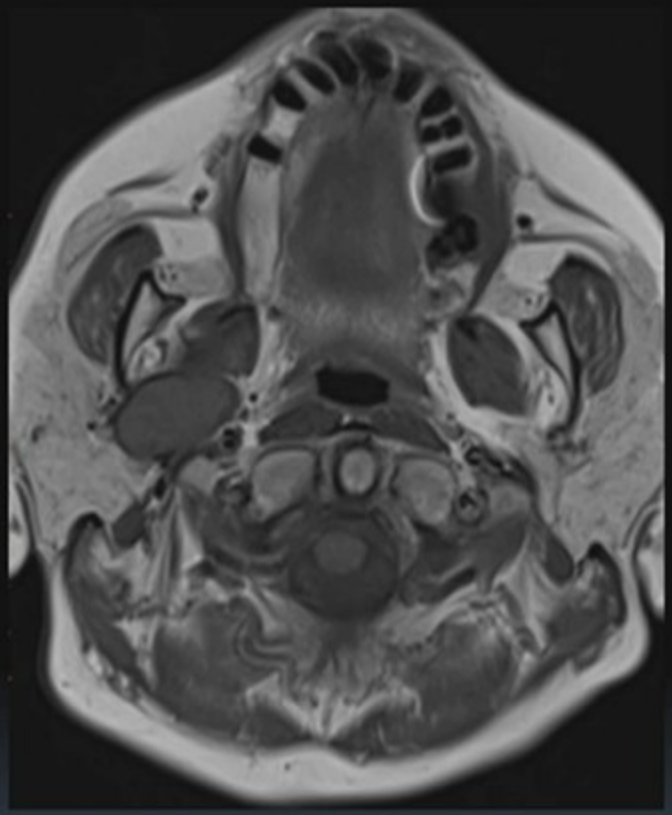

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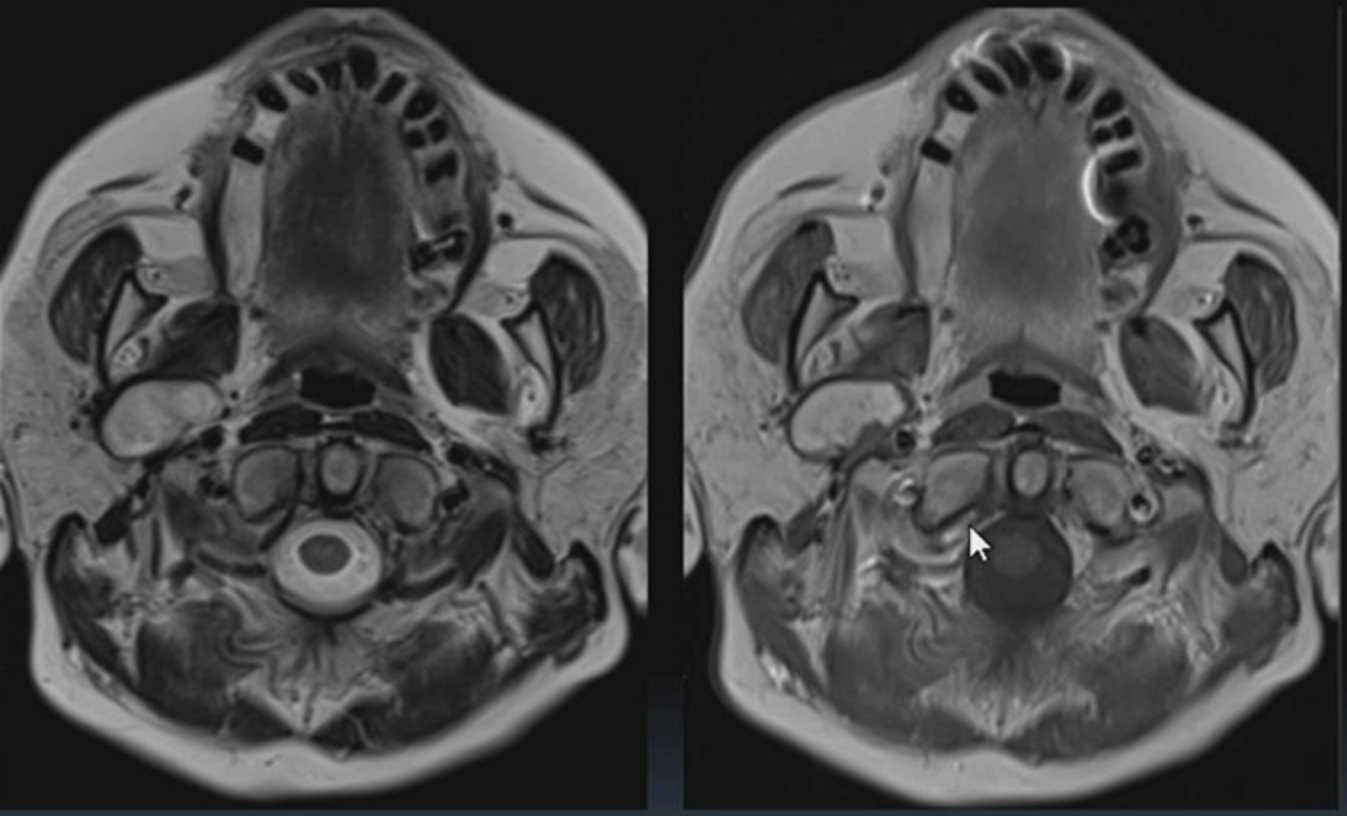

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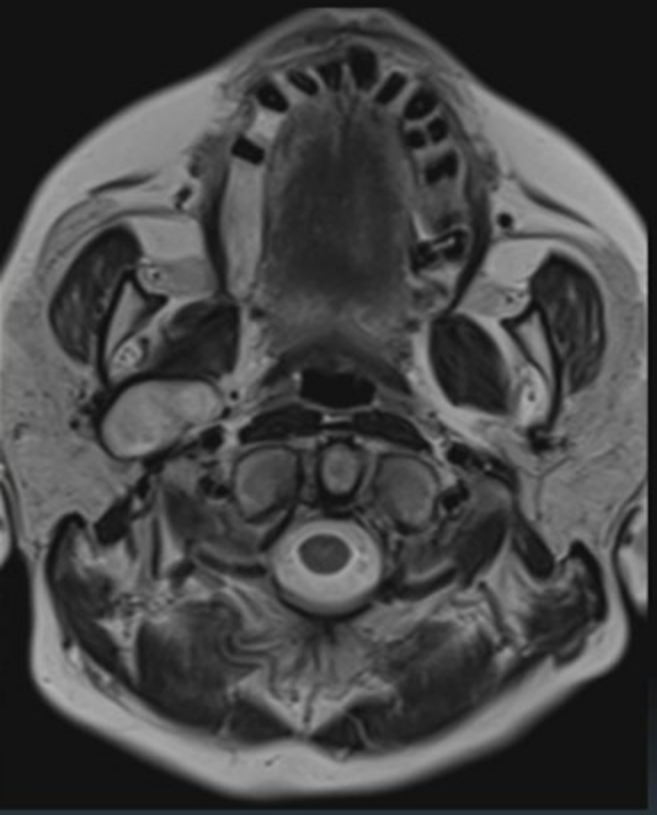

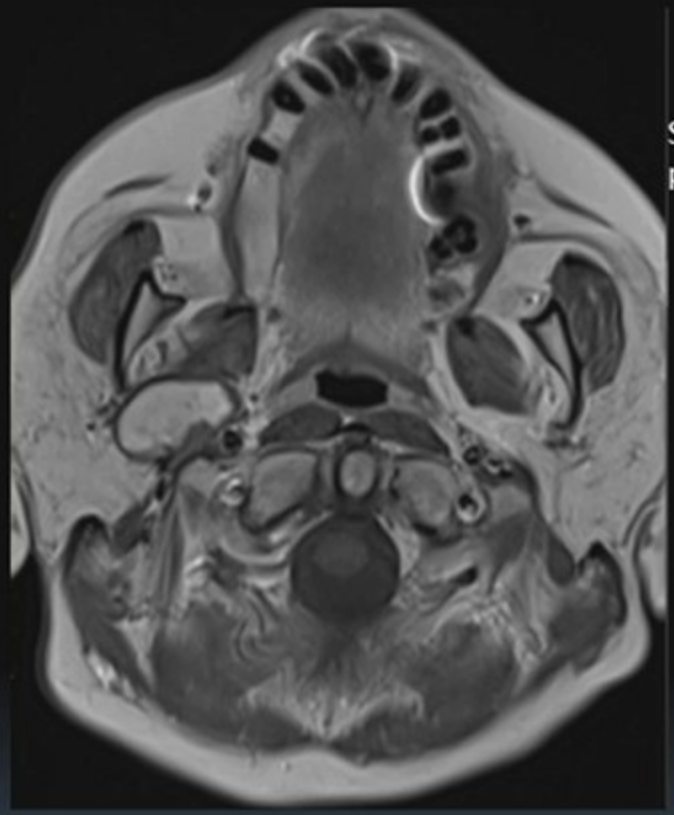

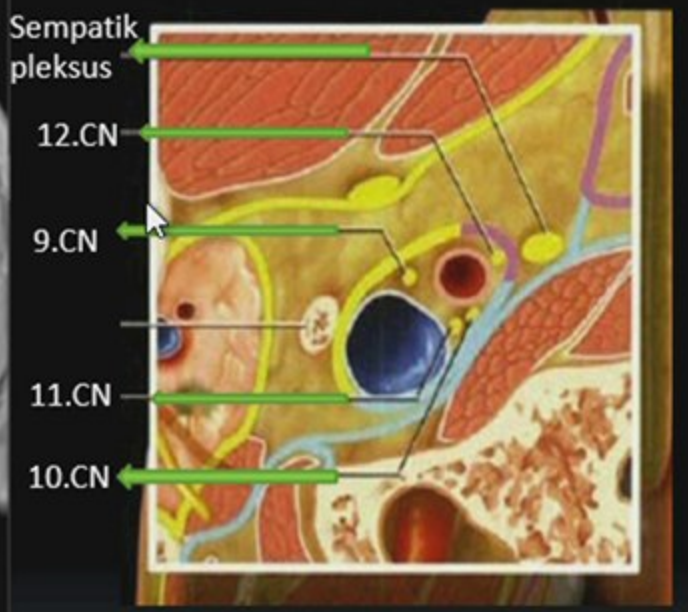

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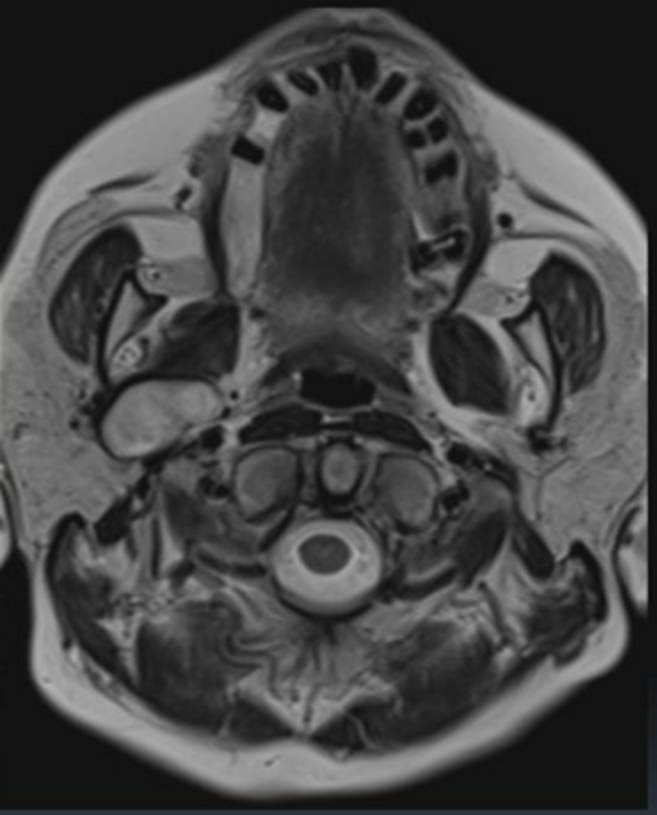

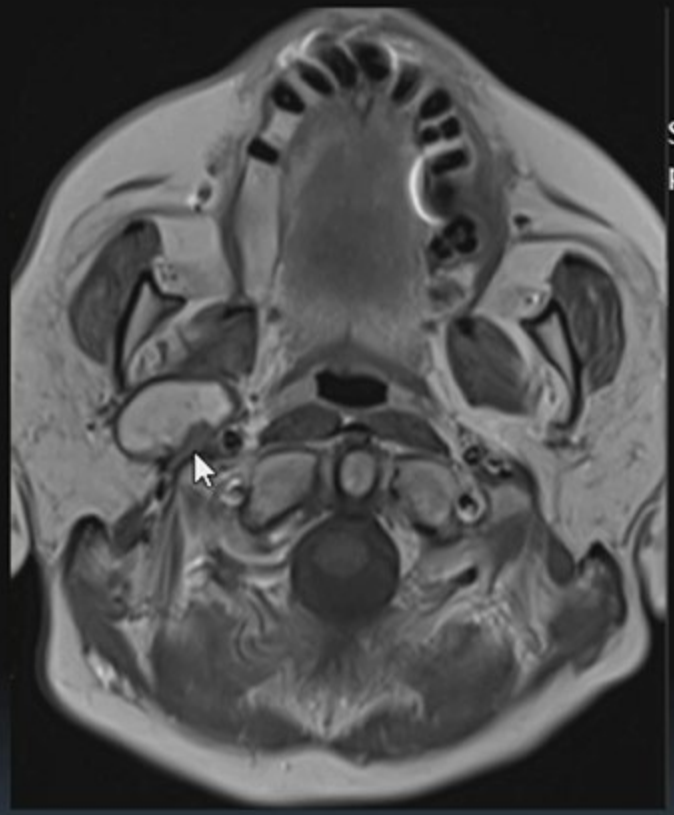

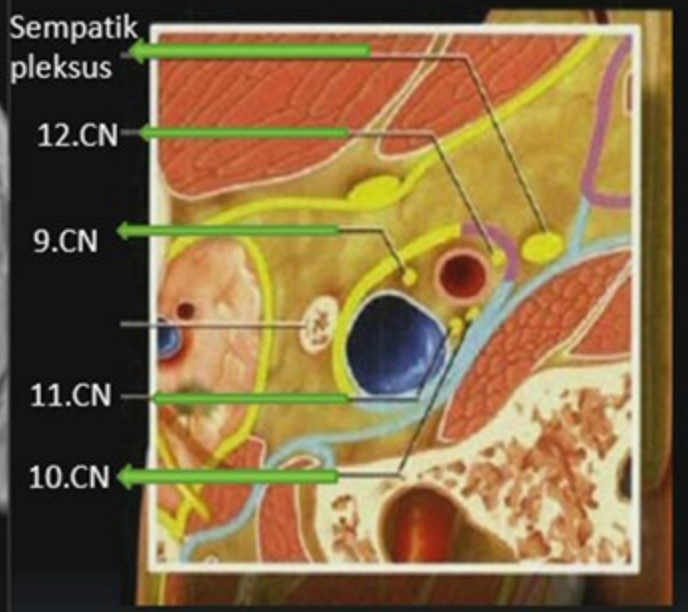

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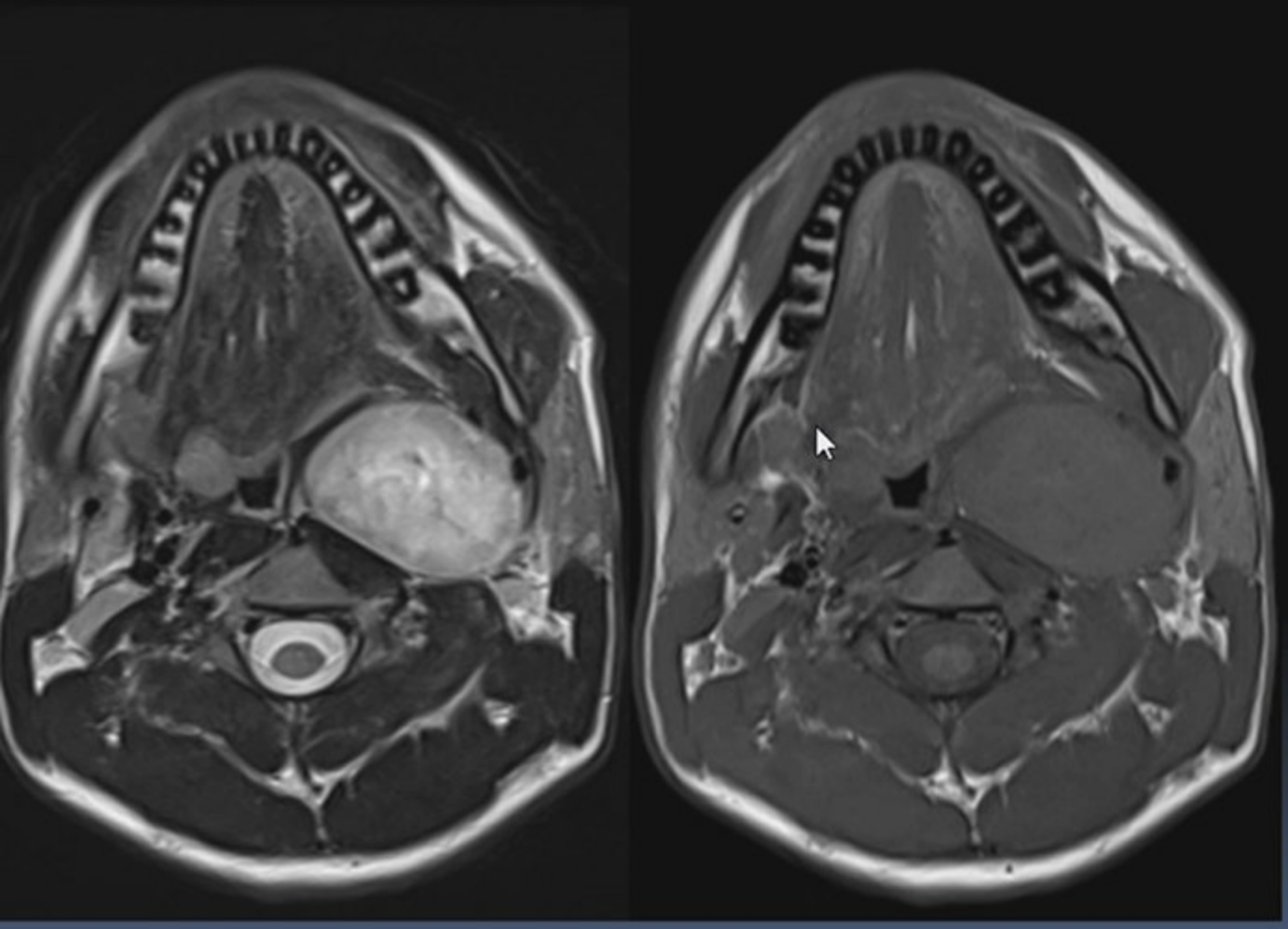

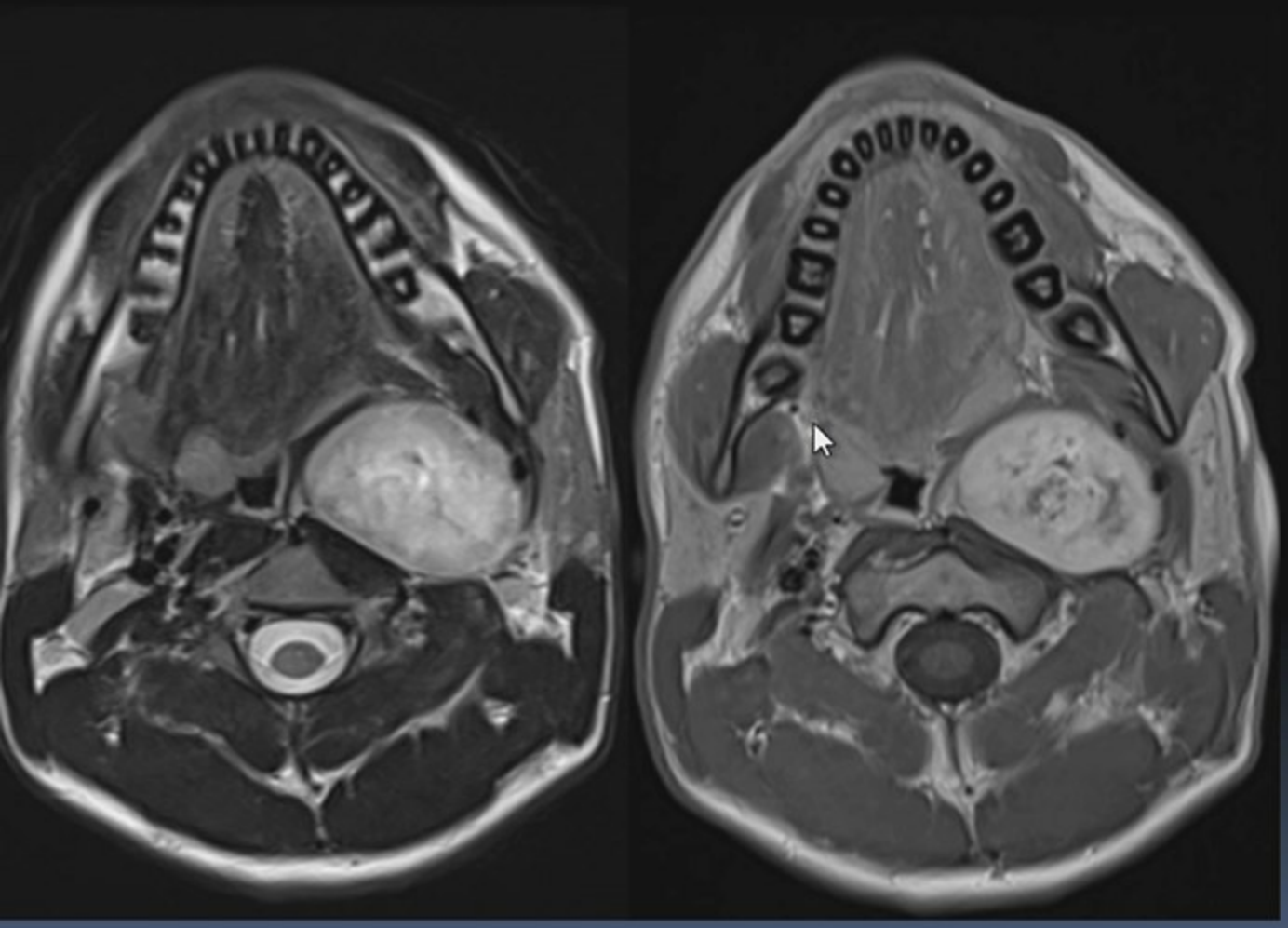

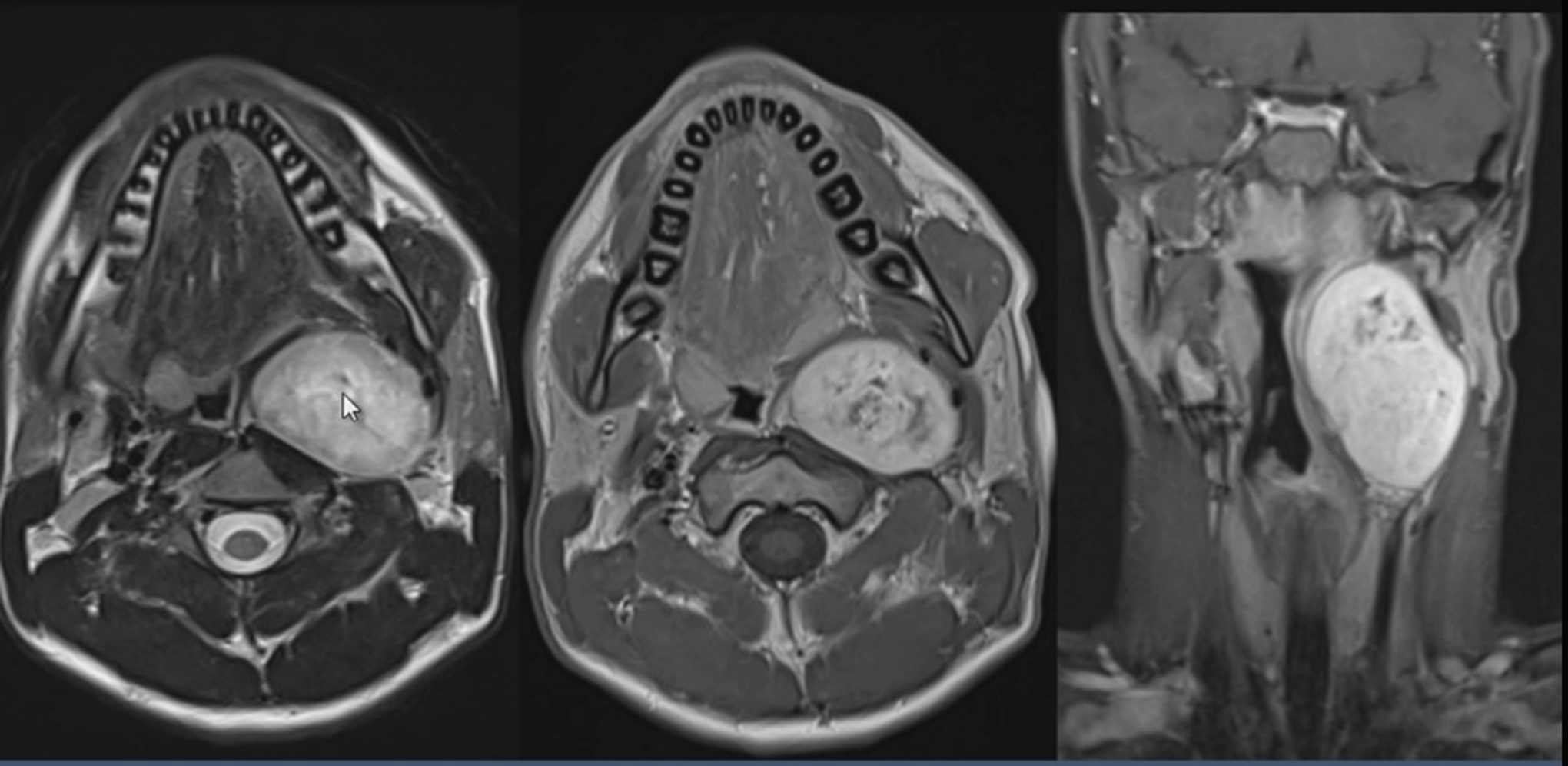

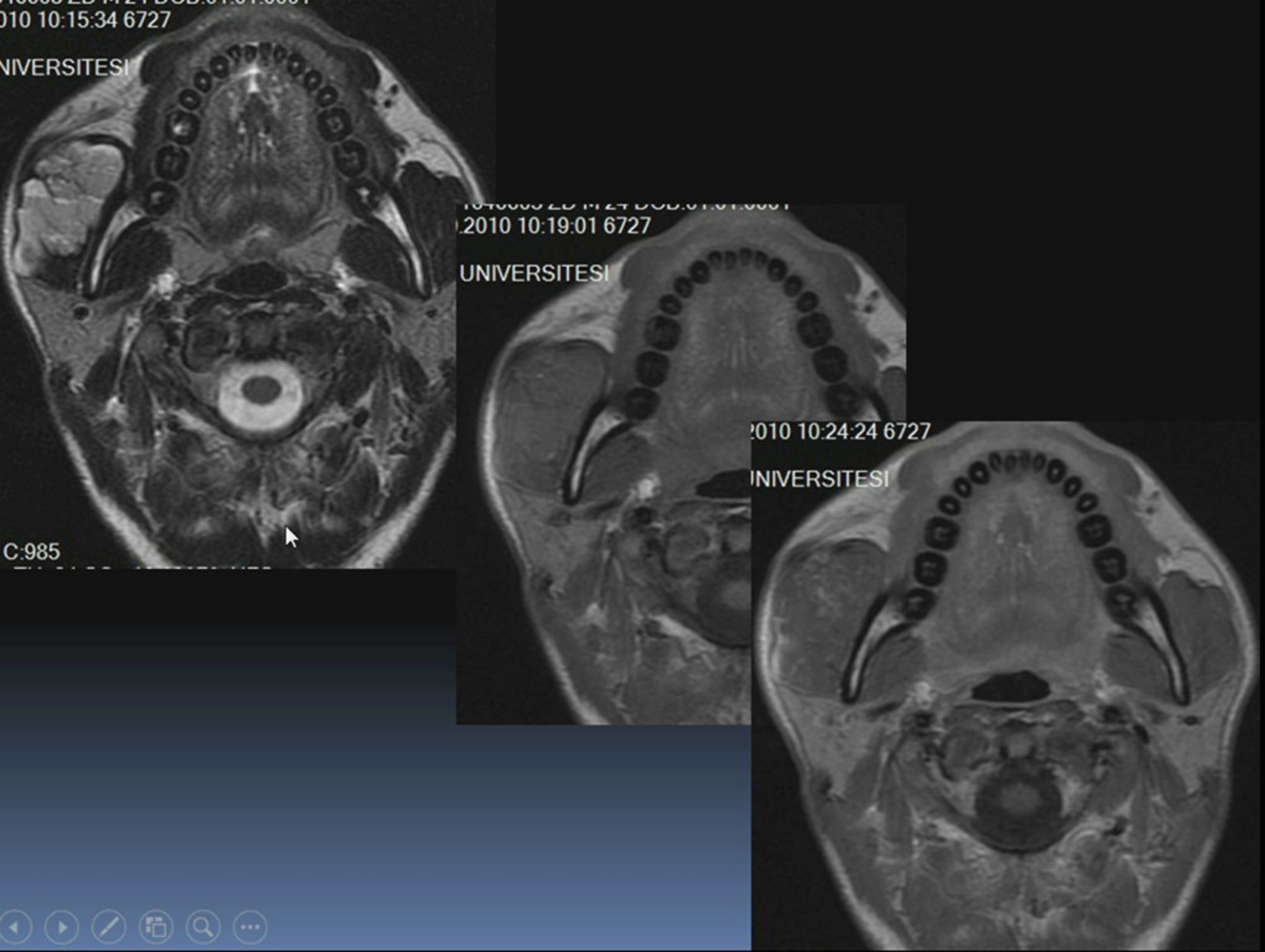
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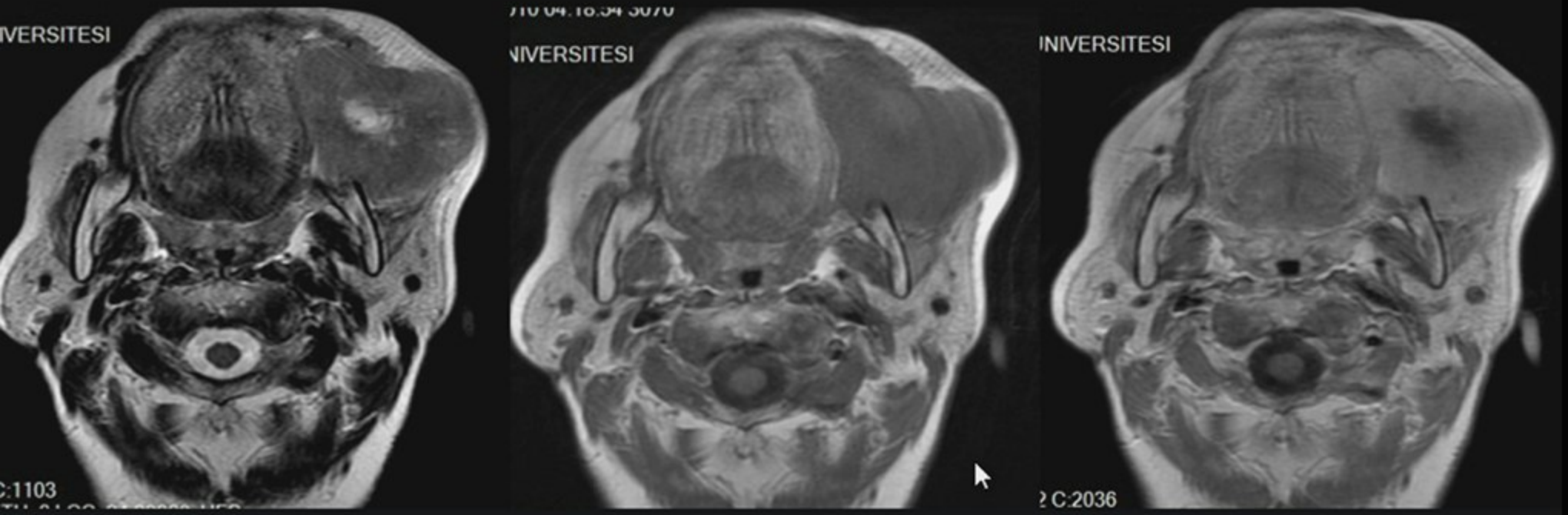
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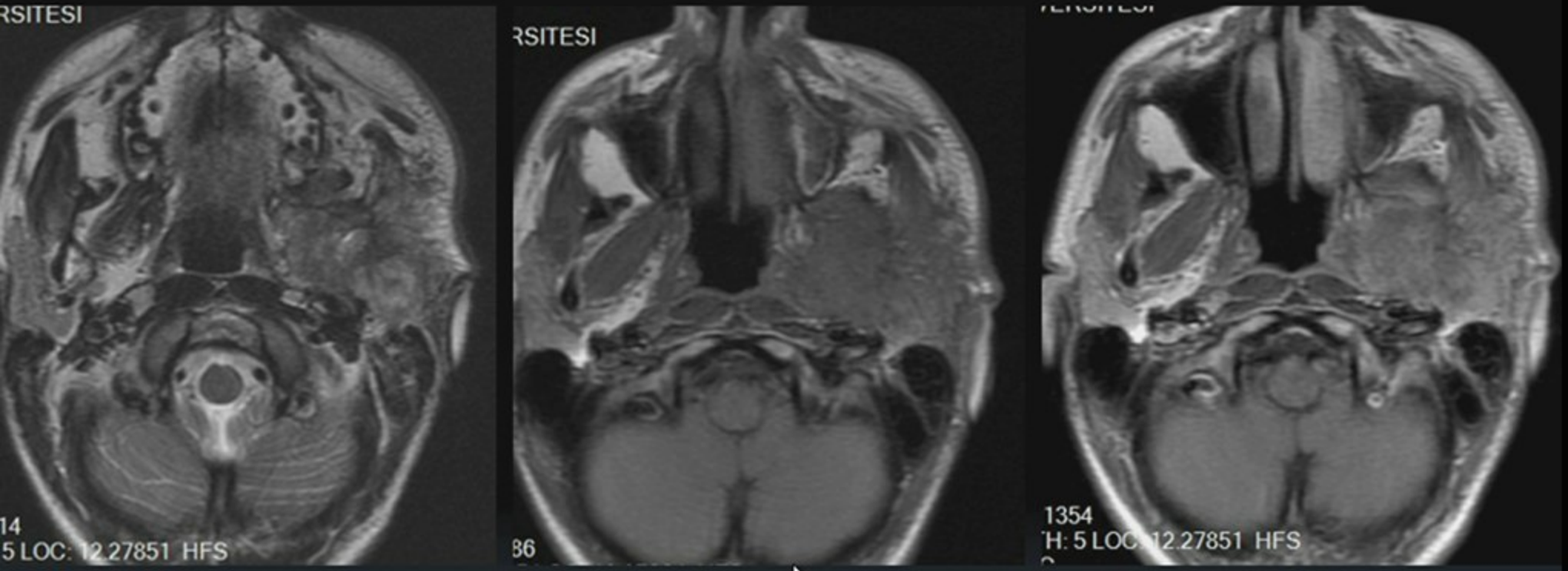
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86
1354
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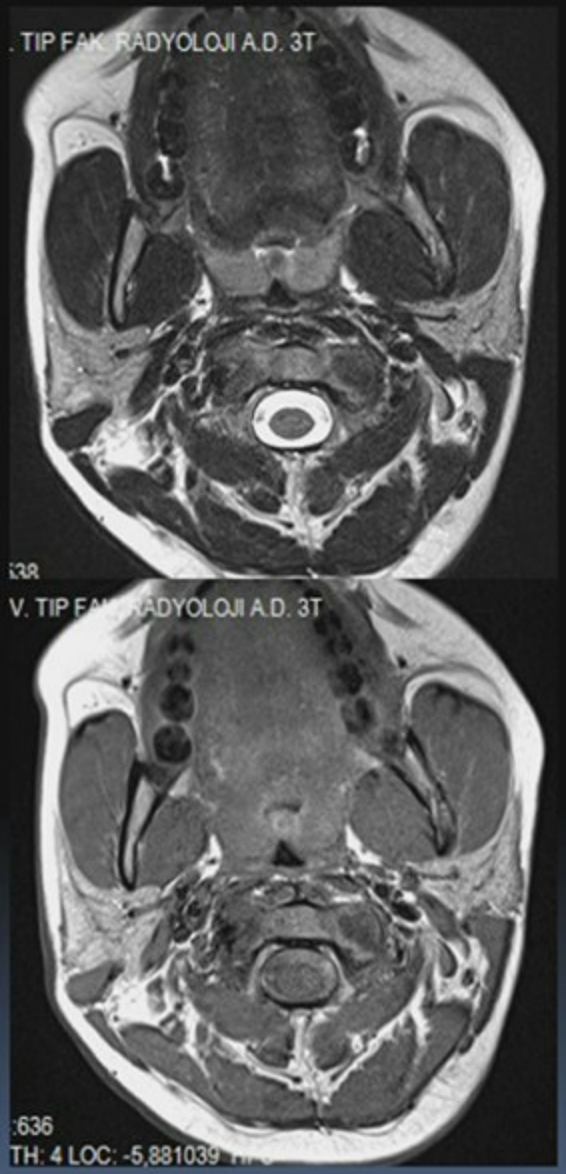
Mandibula Kaynaklı Osteosarkoma

- Nadirdir
- Uzun kemik lezyonlarına göre daha yaşlılarda
- Kraniofasyal vakaların %50'si çeneden
- %25 öncesinde RT alan hastalarda
- Paget, fibröz displazi, enkondroma, multipl ekzositozlar zemininde de gelişebilir

16 yaş, kadın, yüzde şişlik



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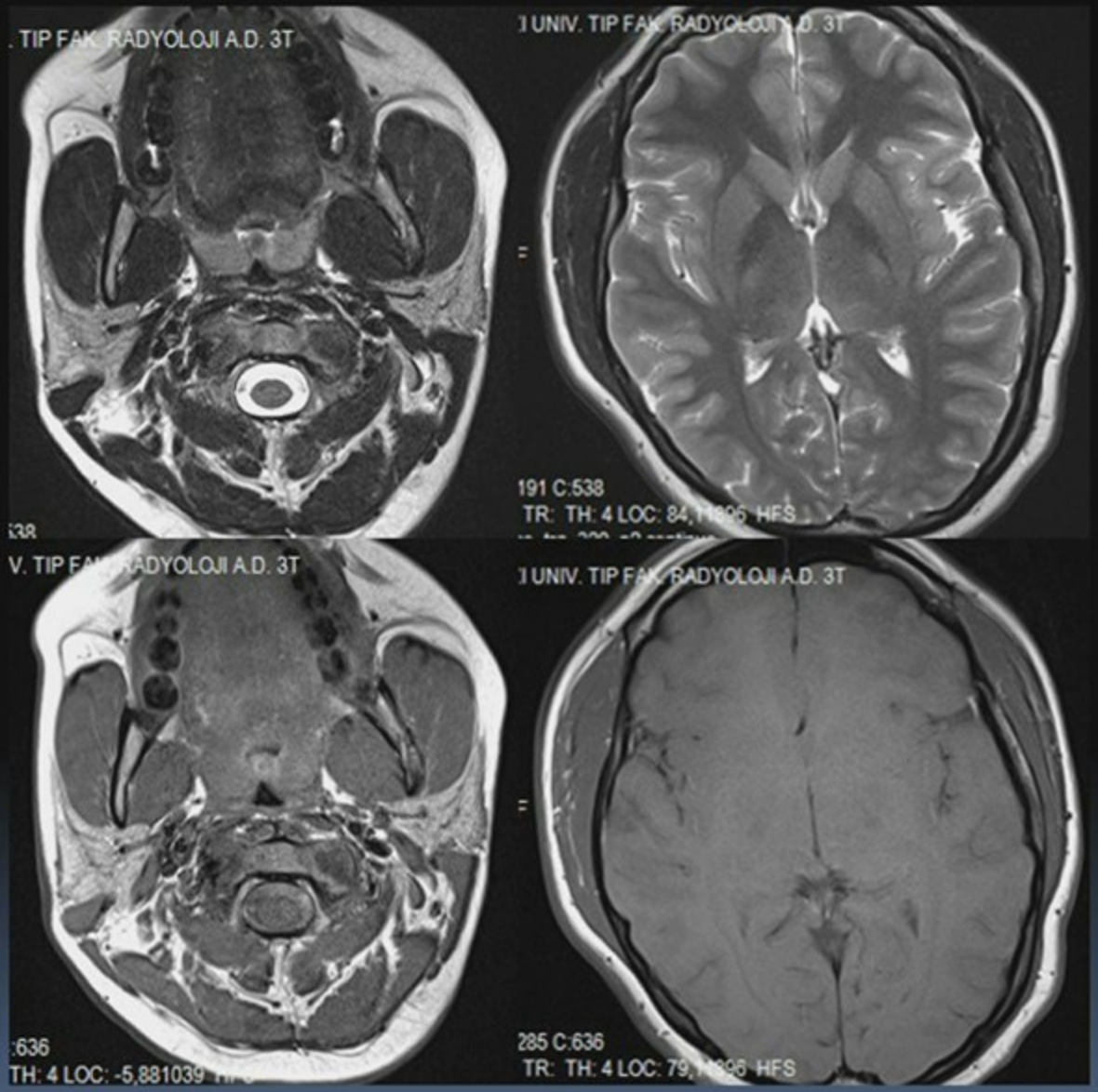

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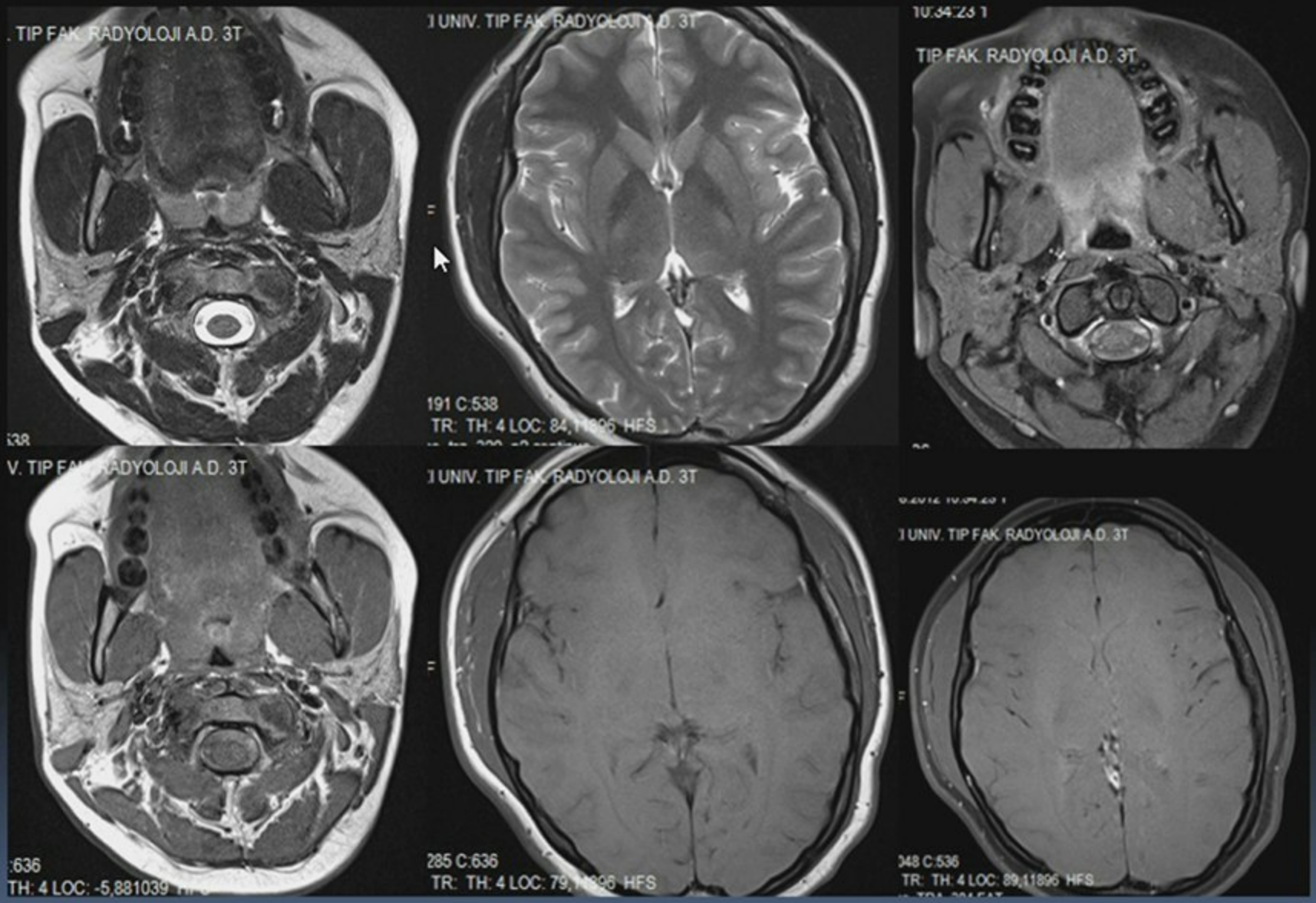

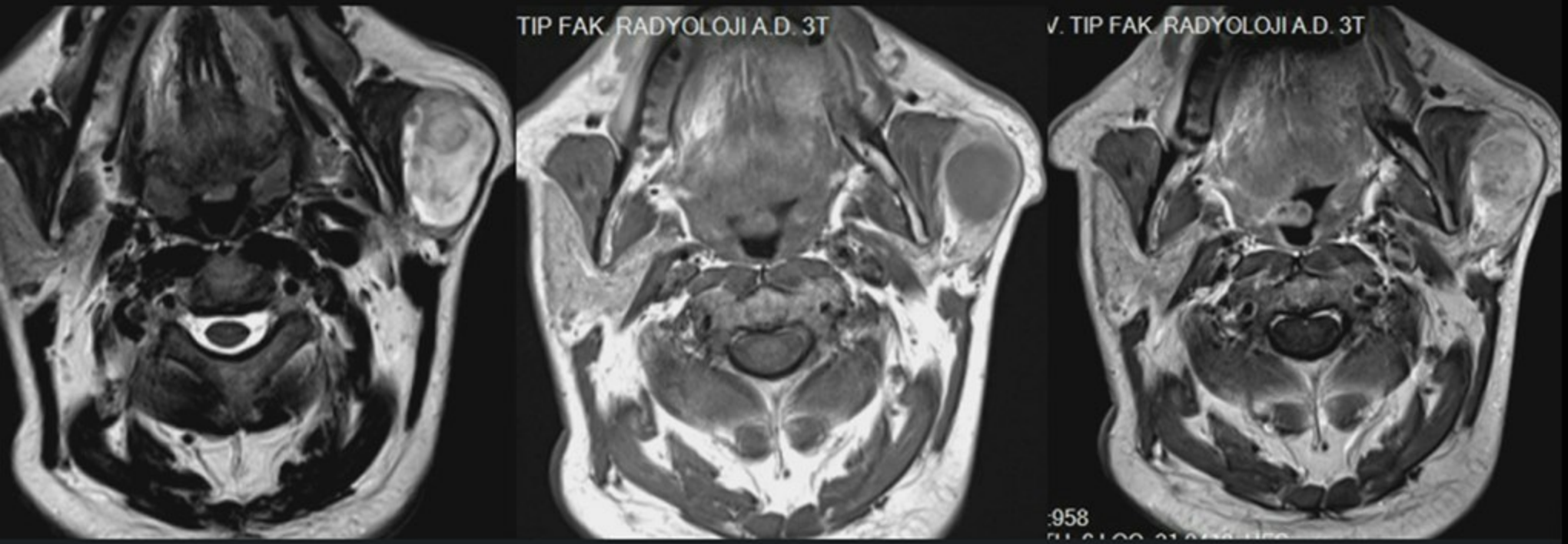
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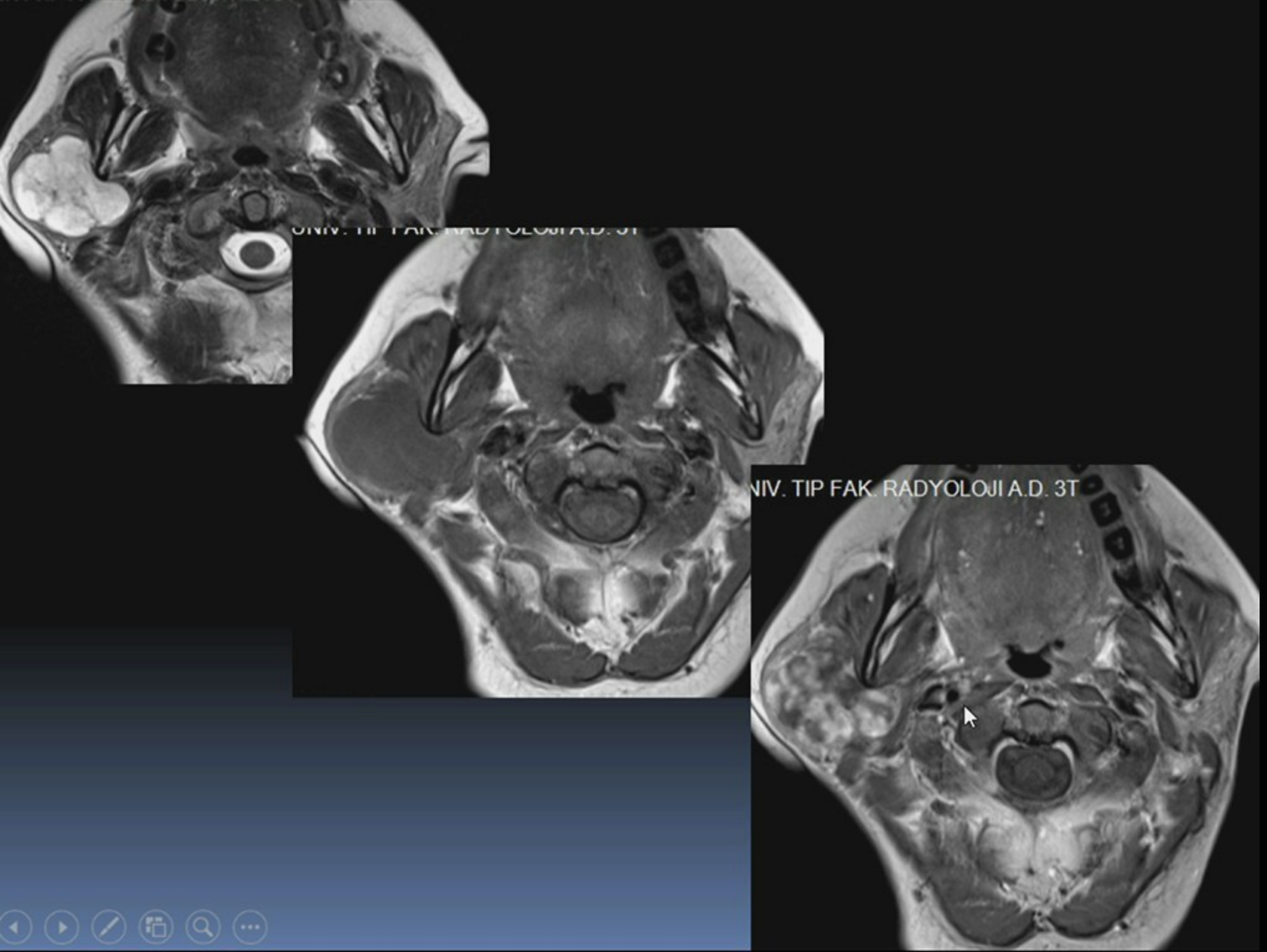
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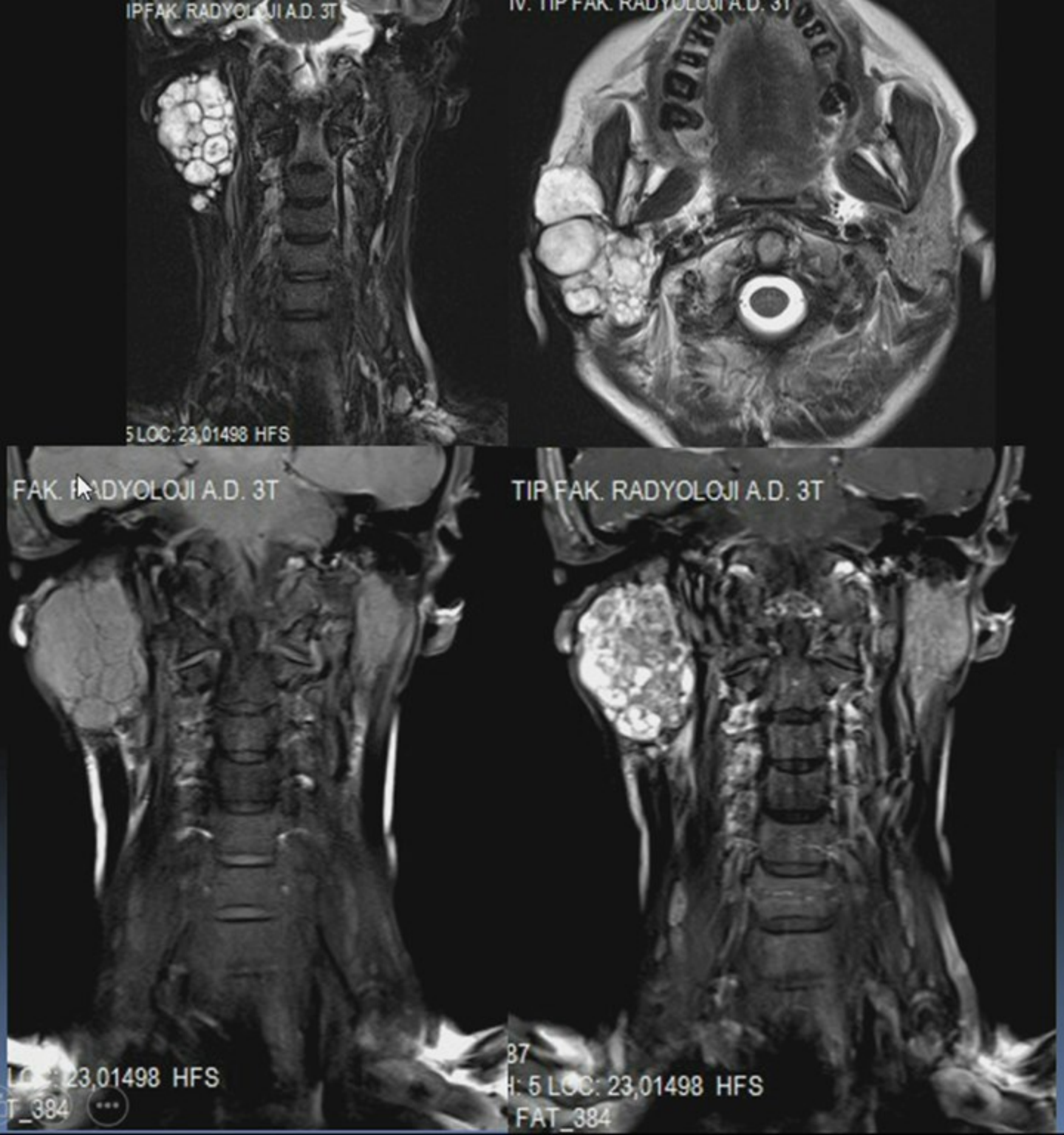
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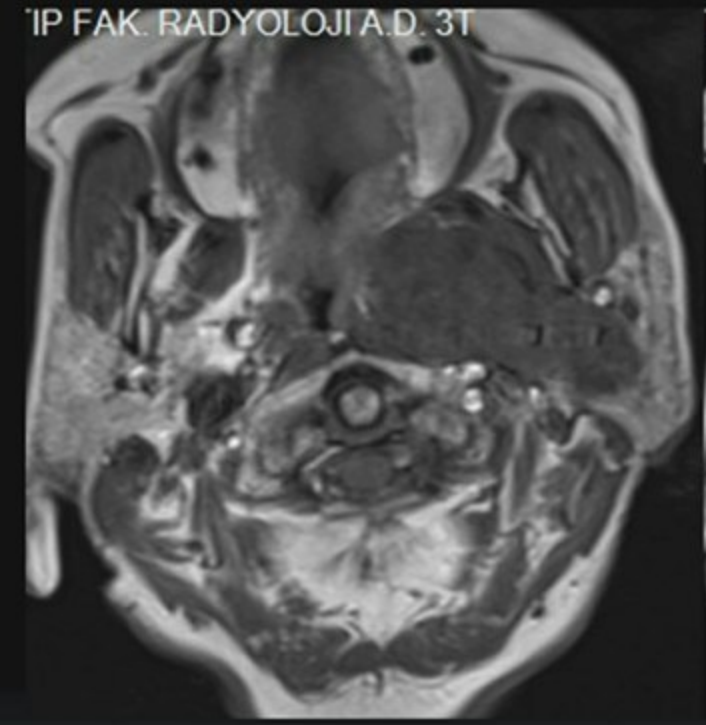
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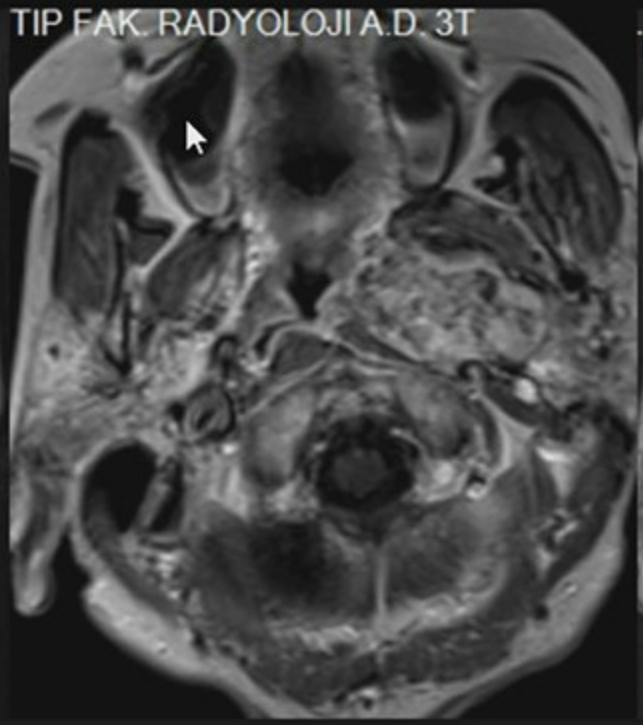
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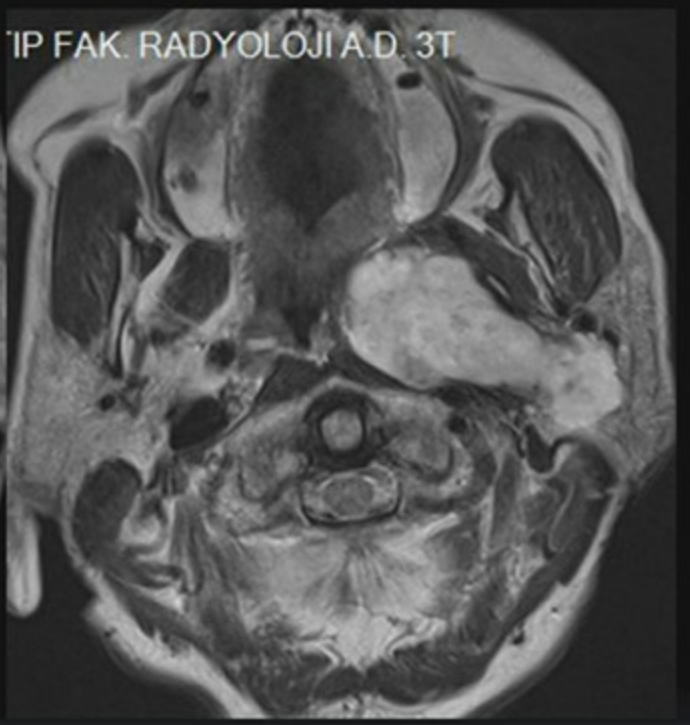
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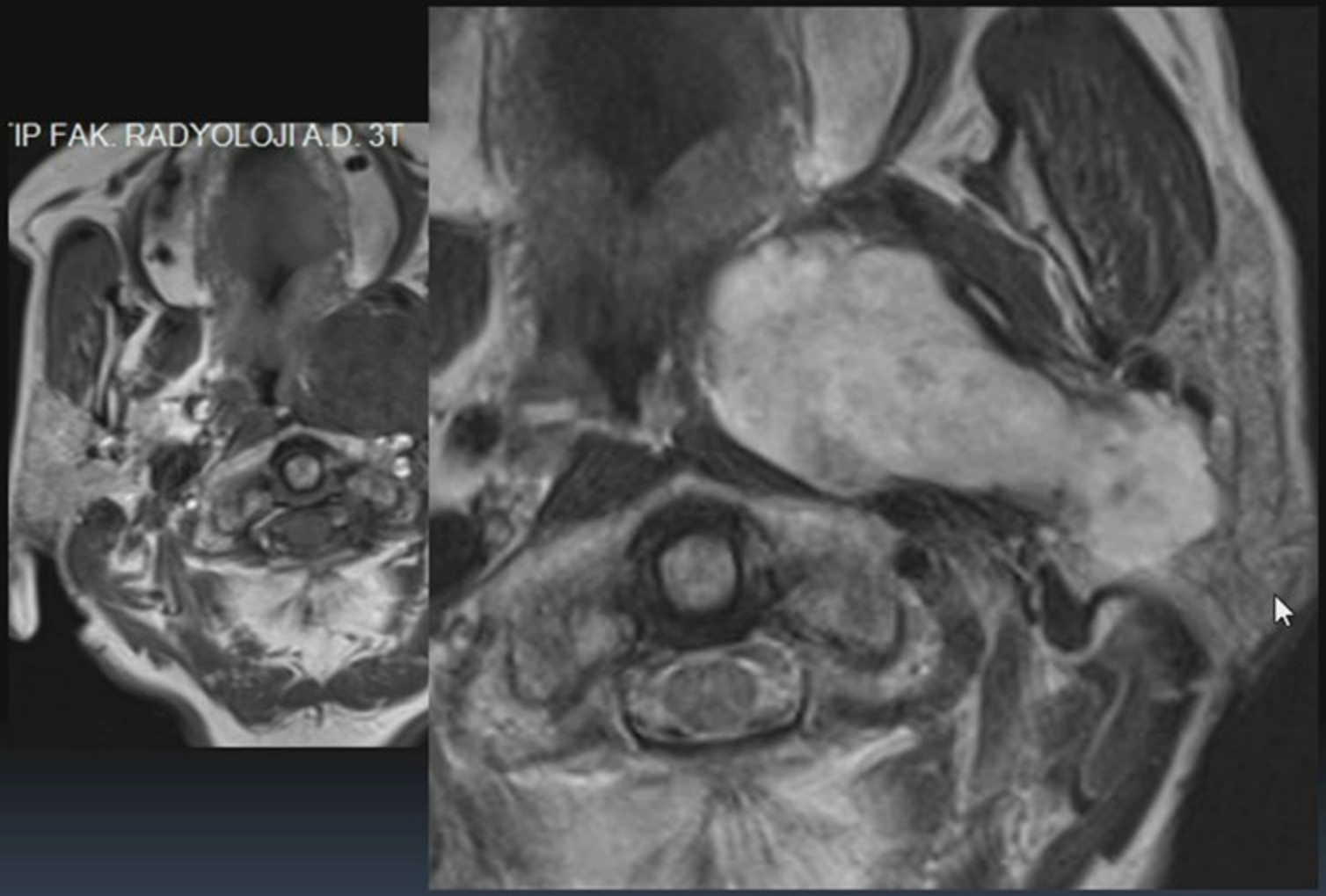
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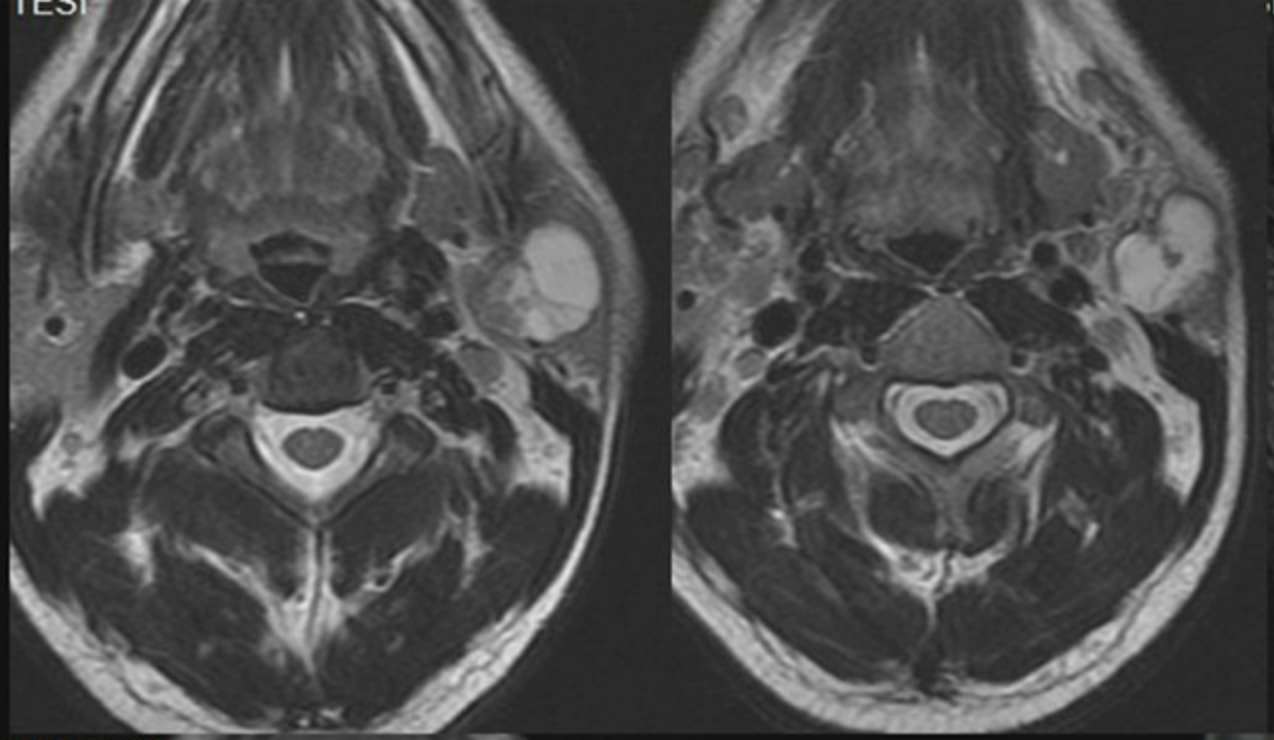

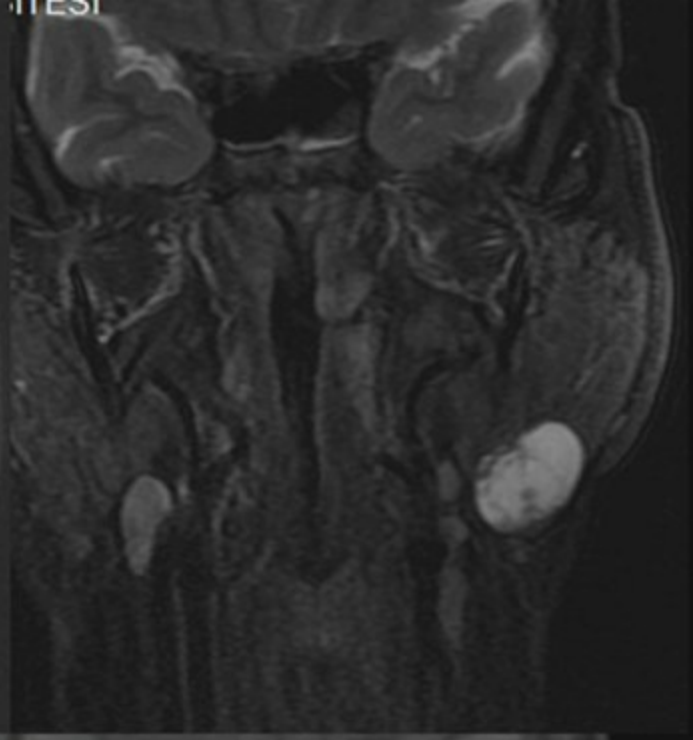
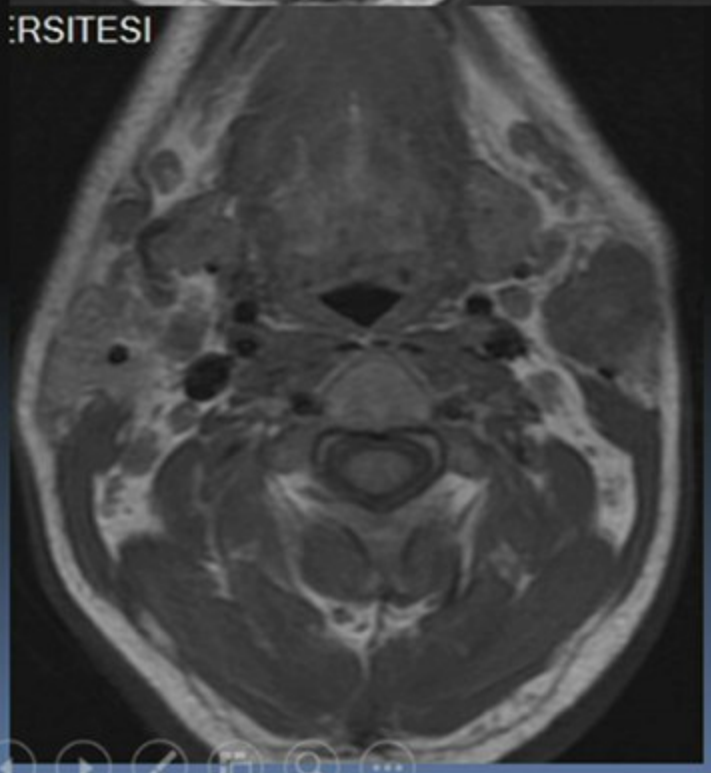
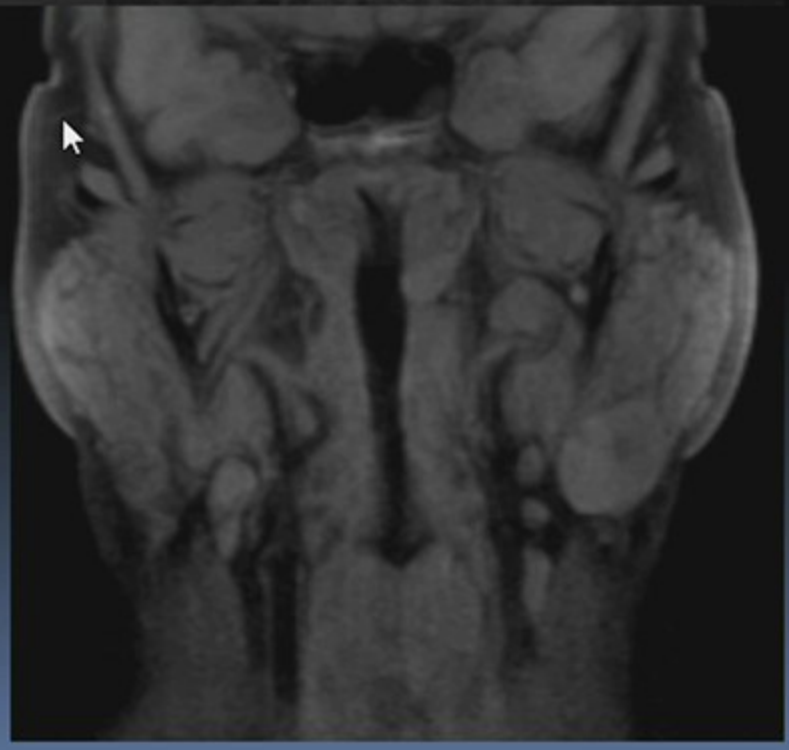

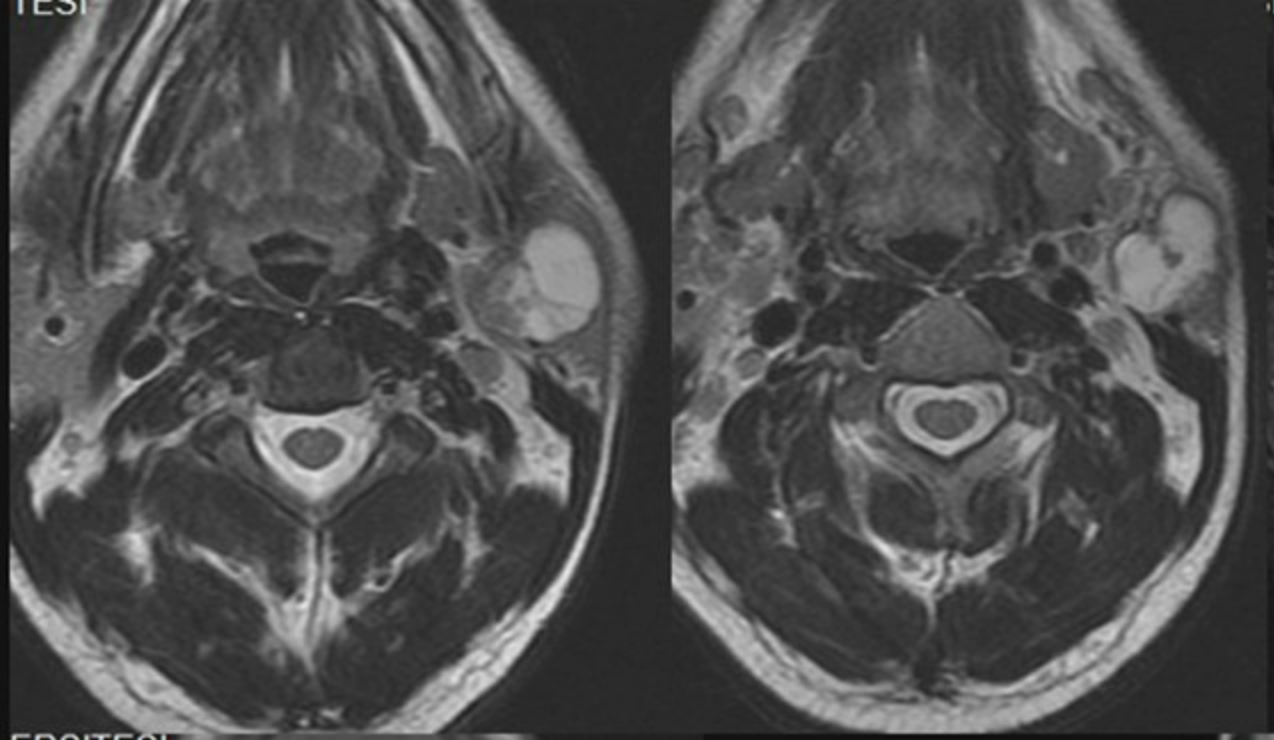

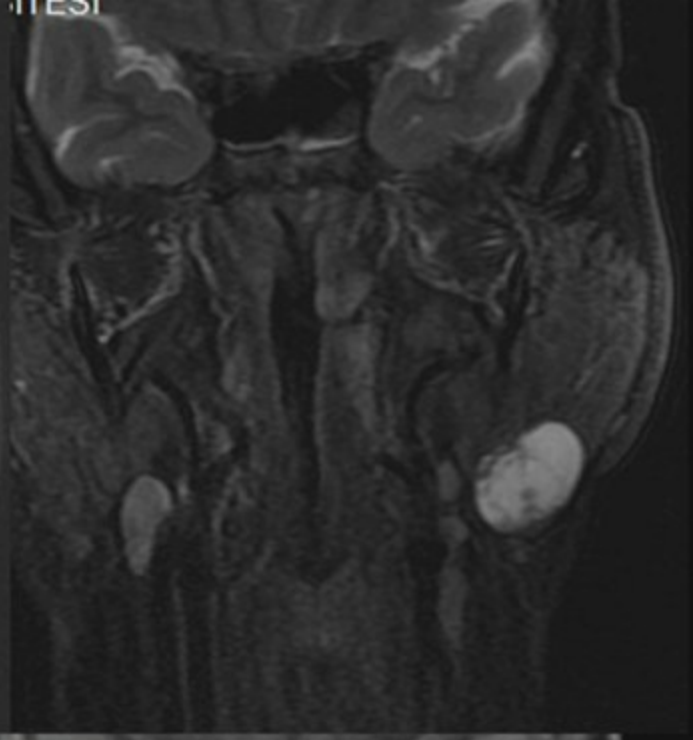

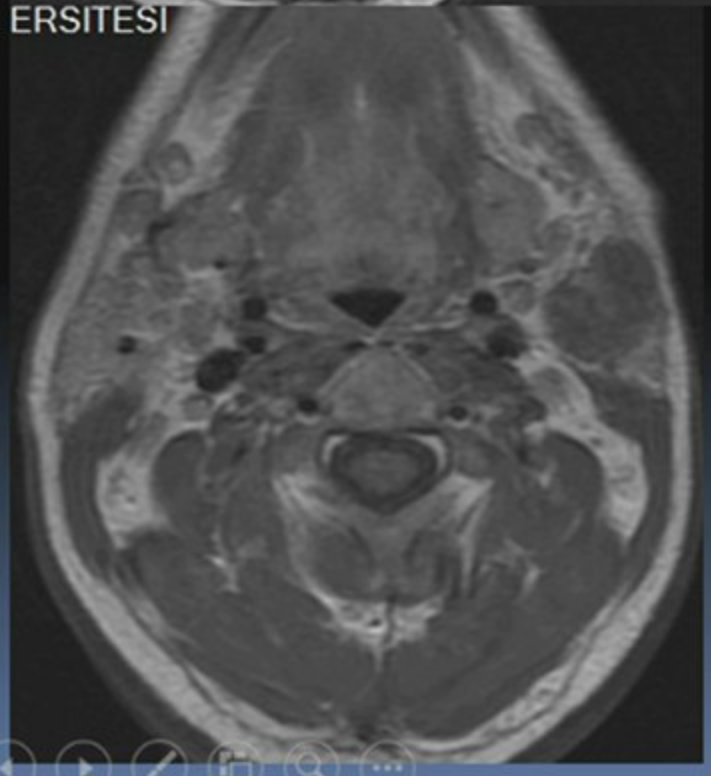

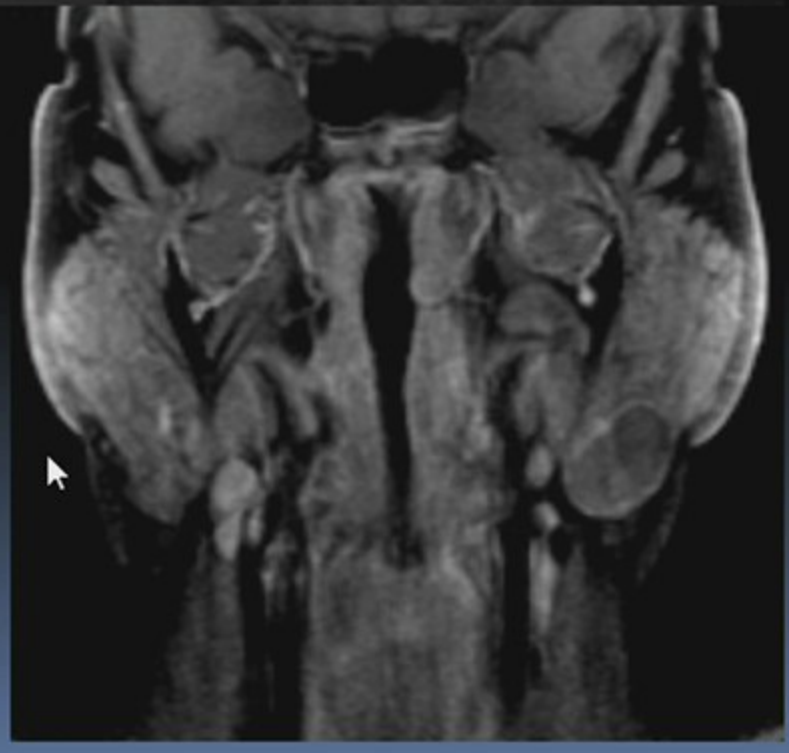

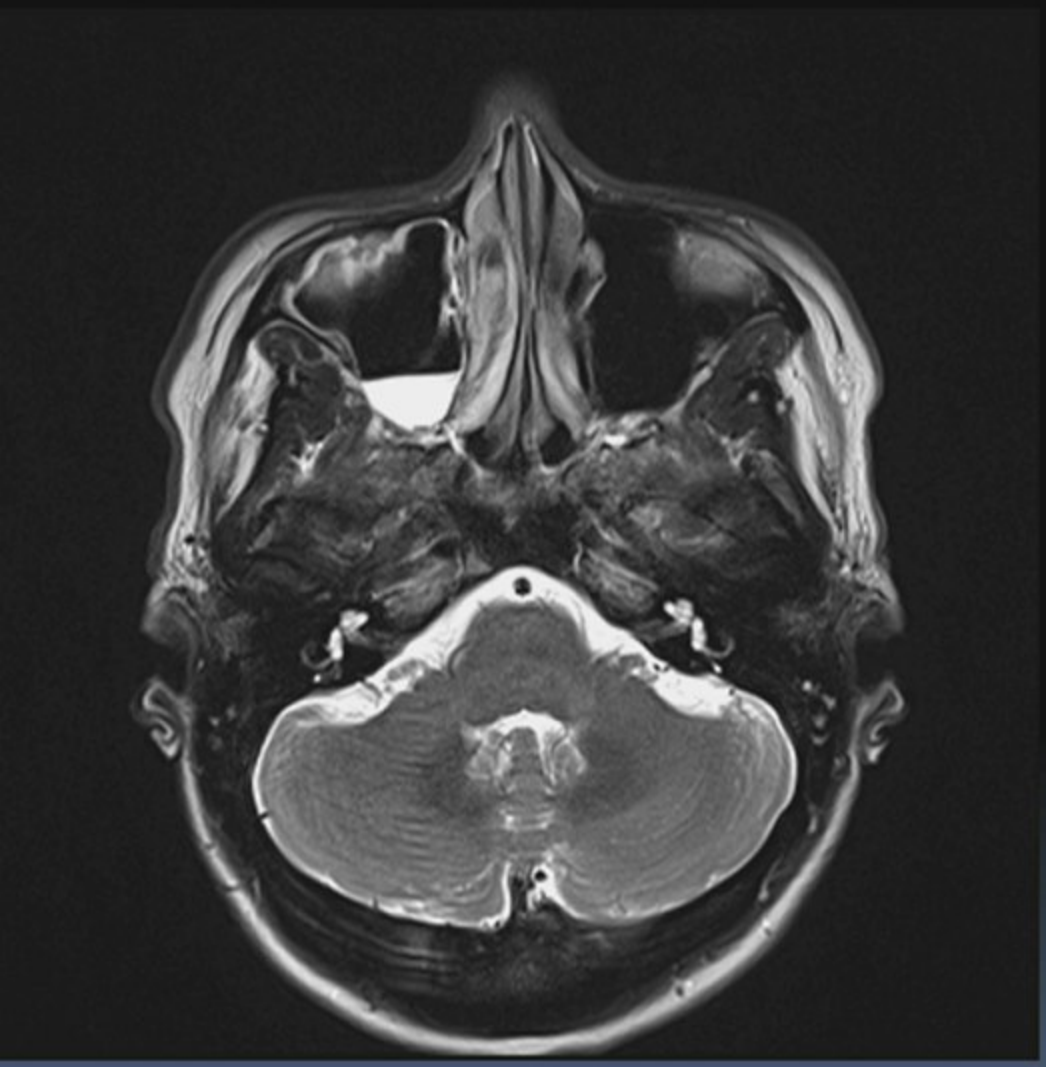

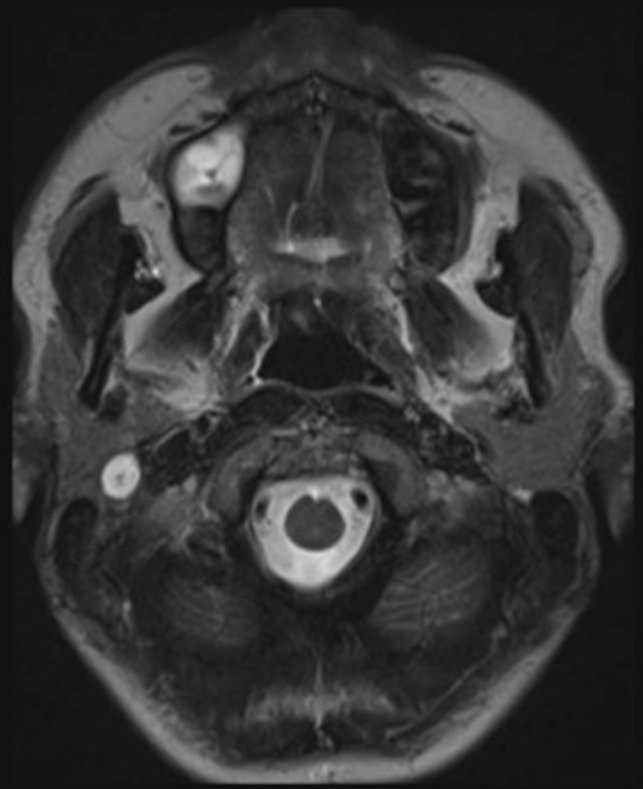

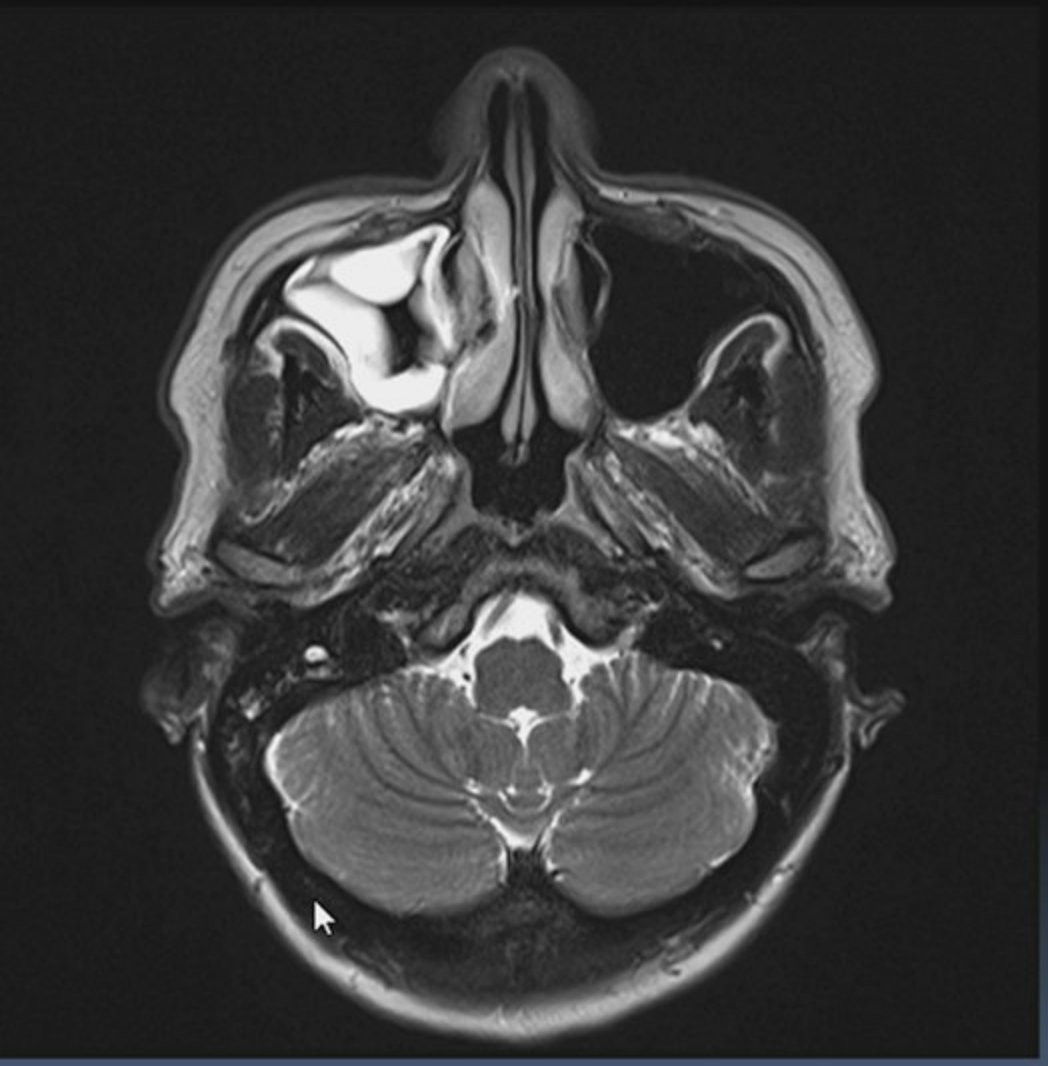

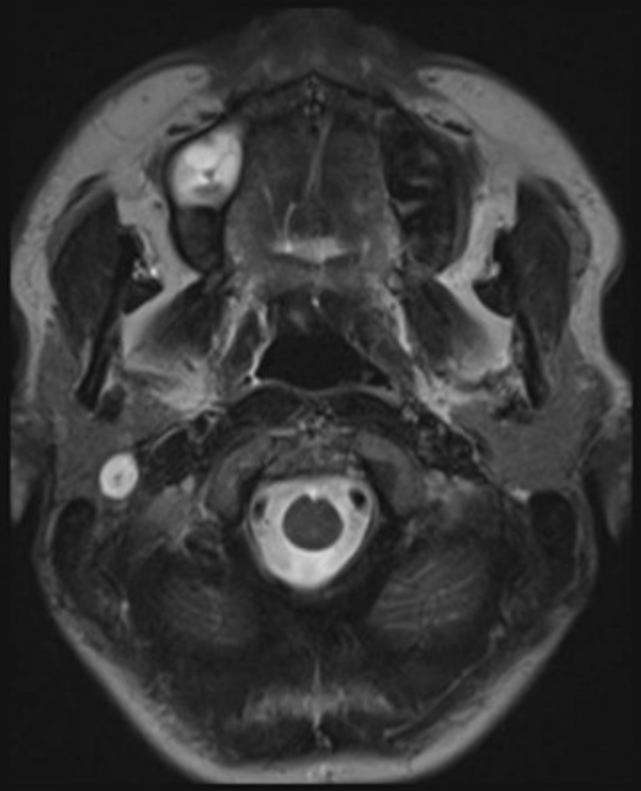

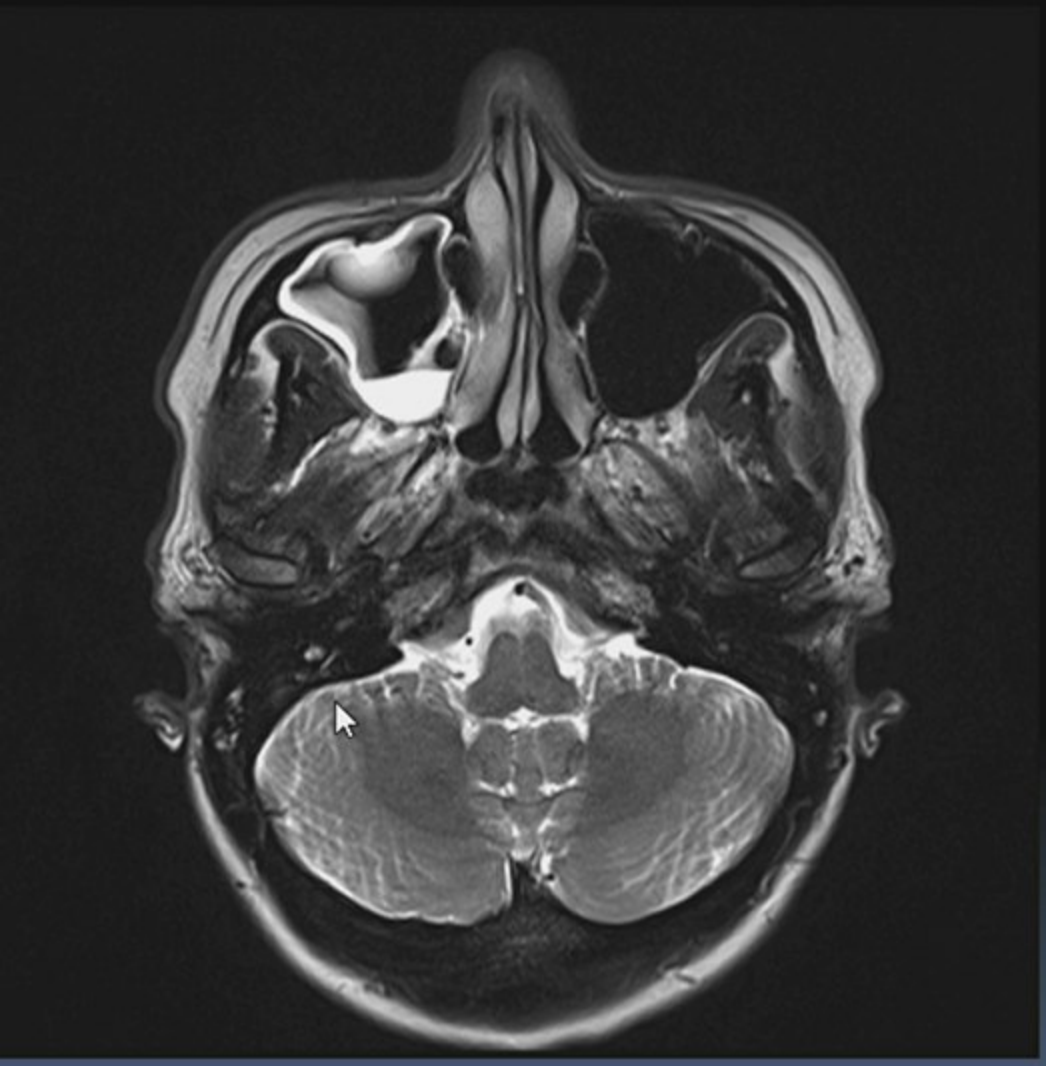

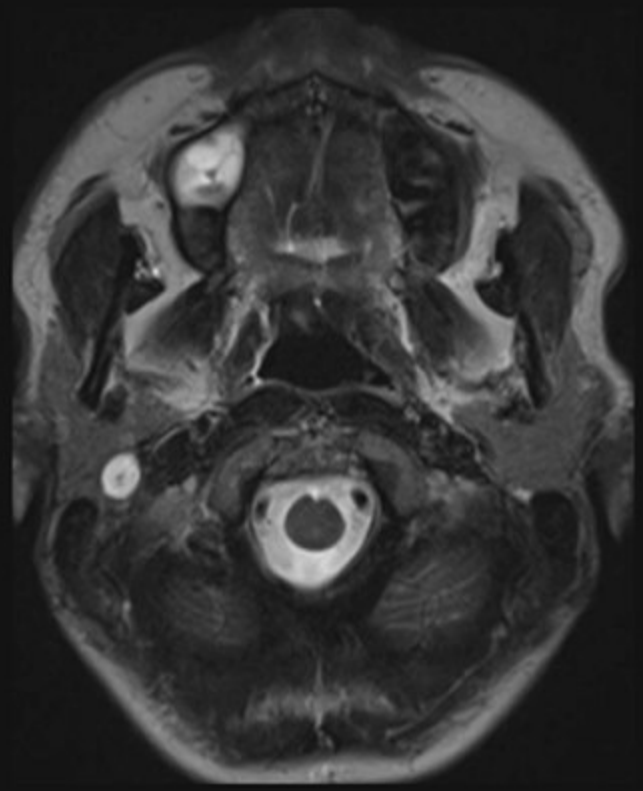

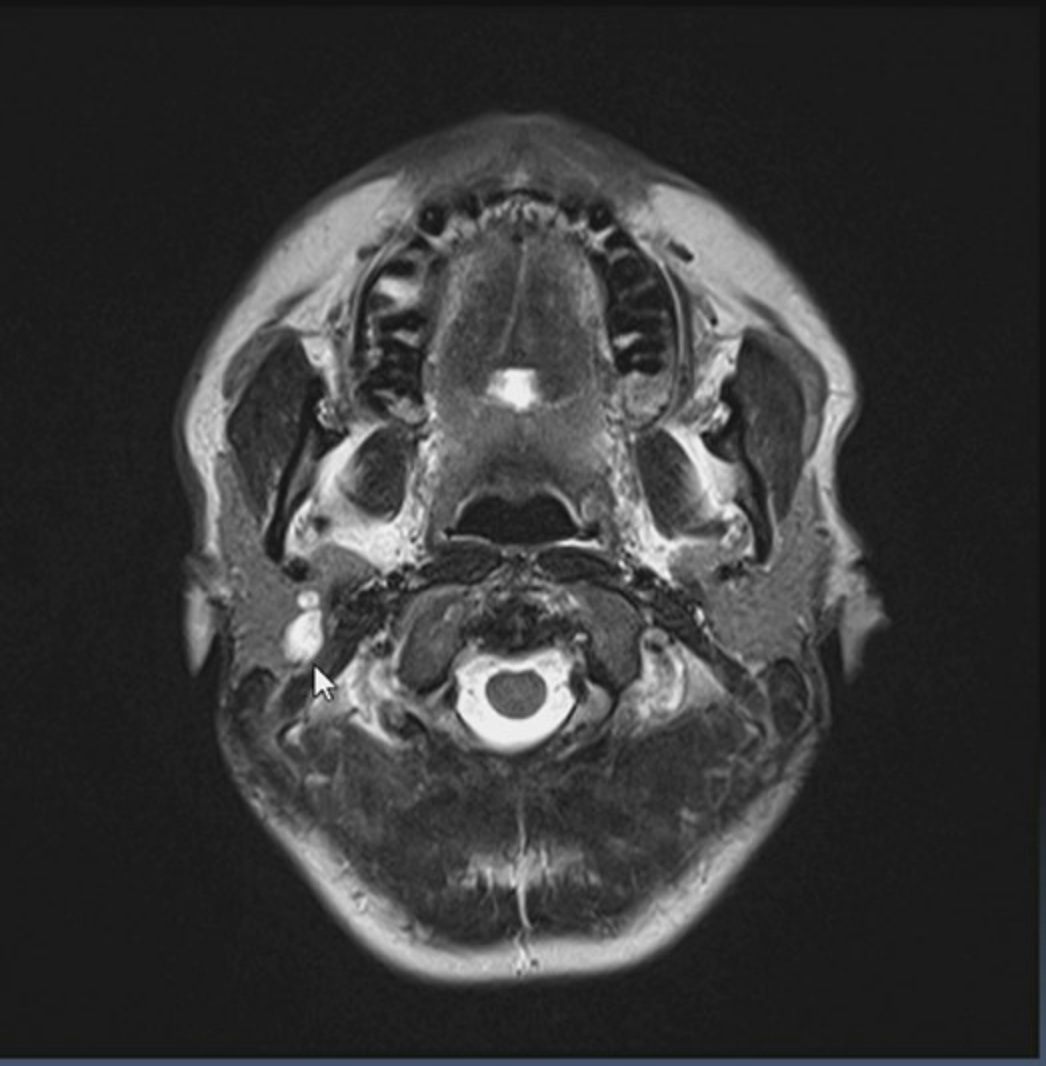

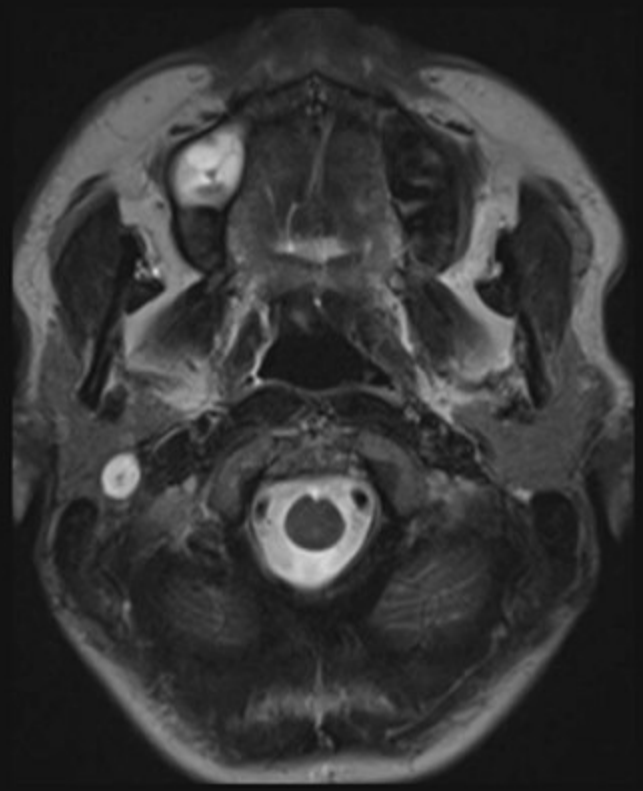

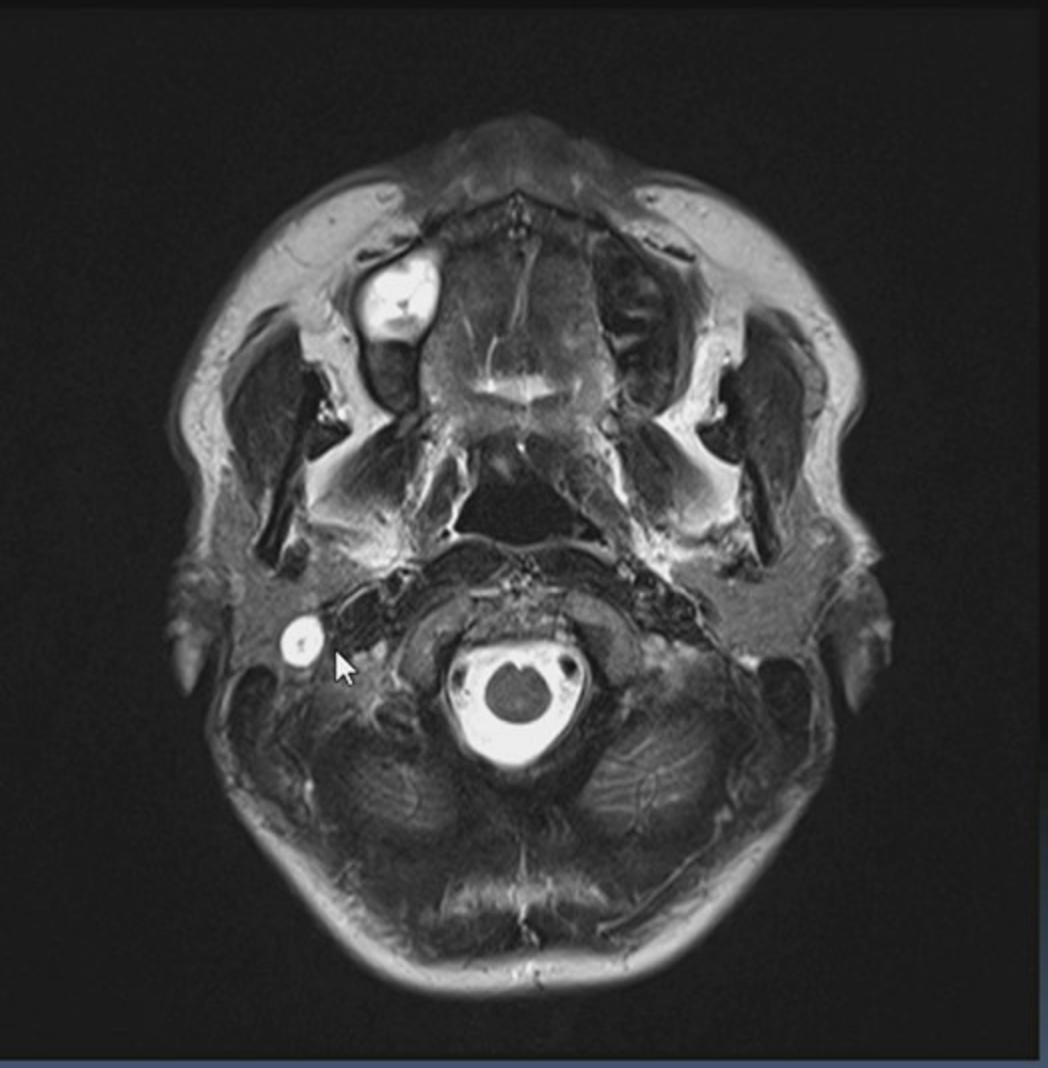

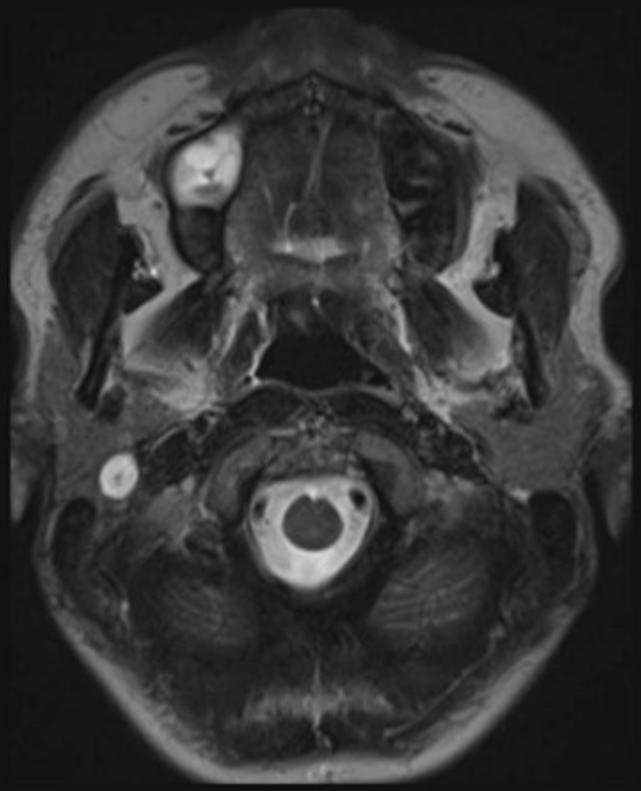

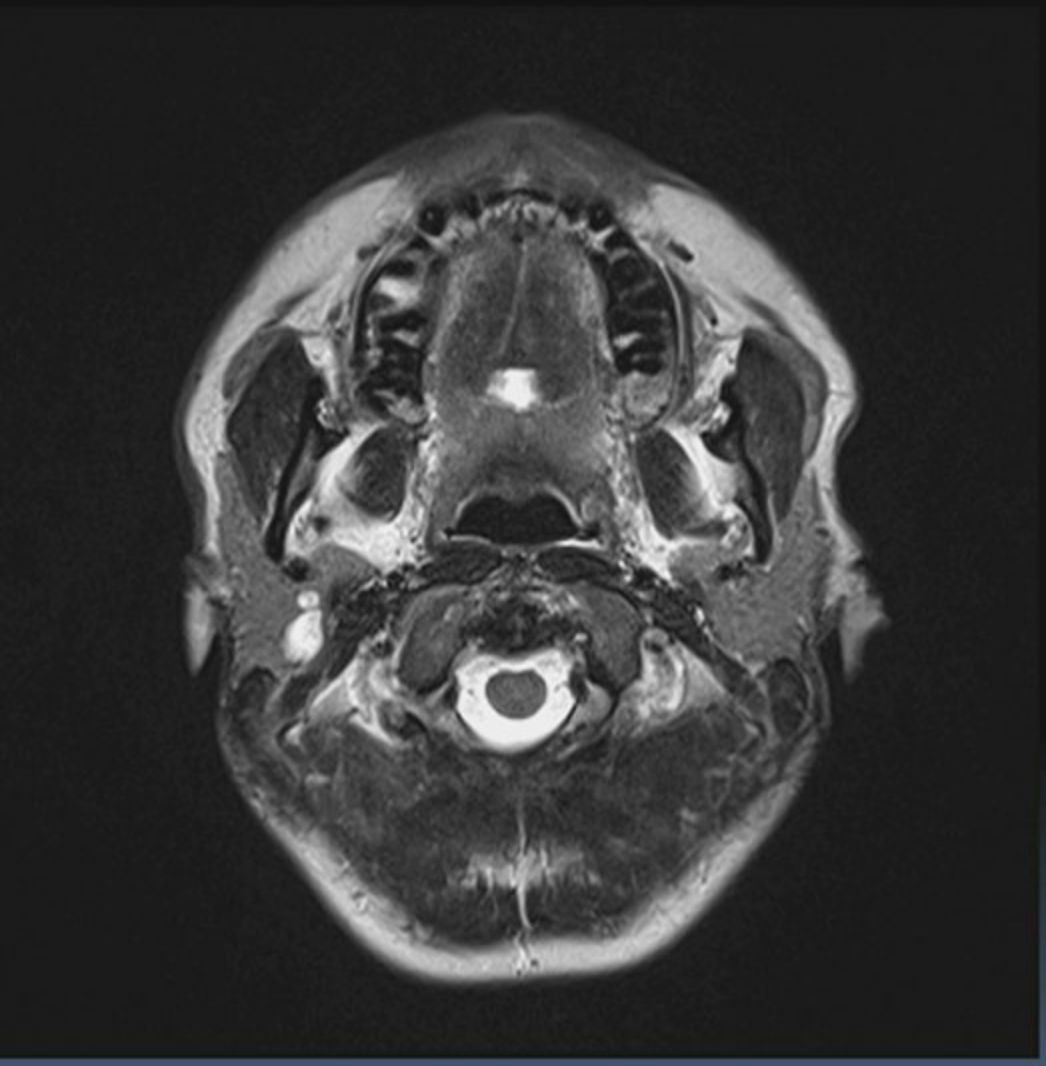

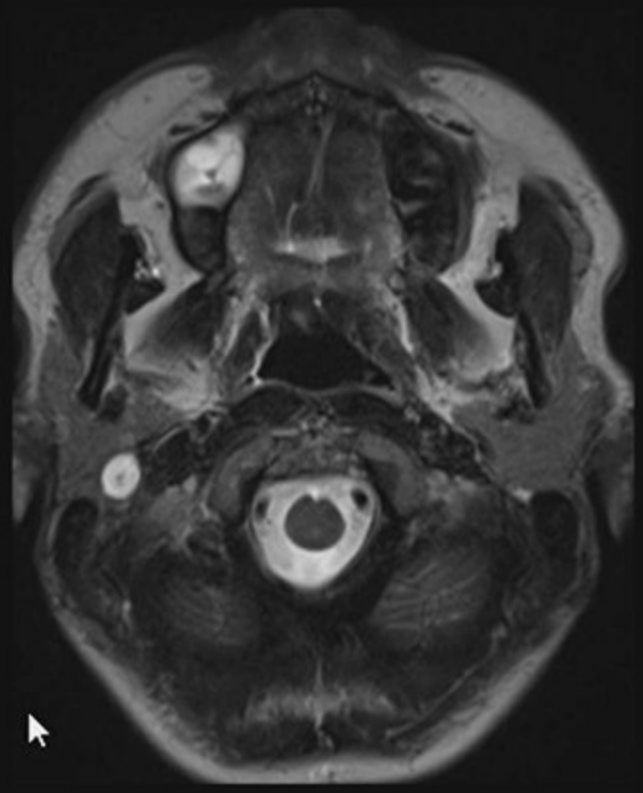

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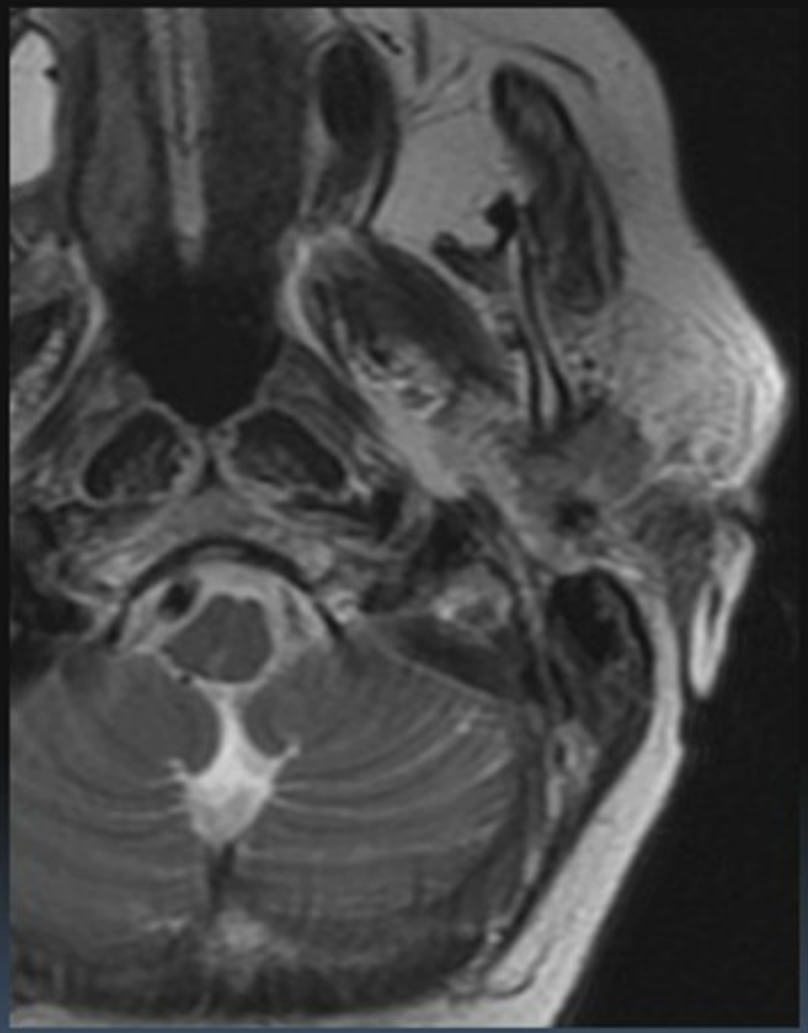

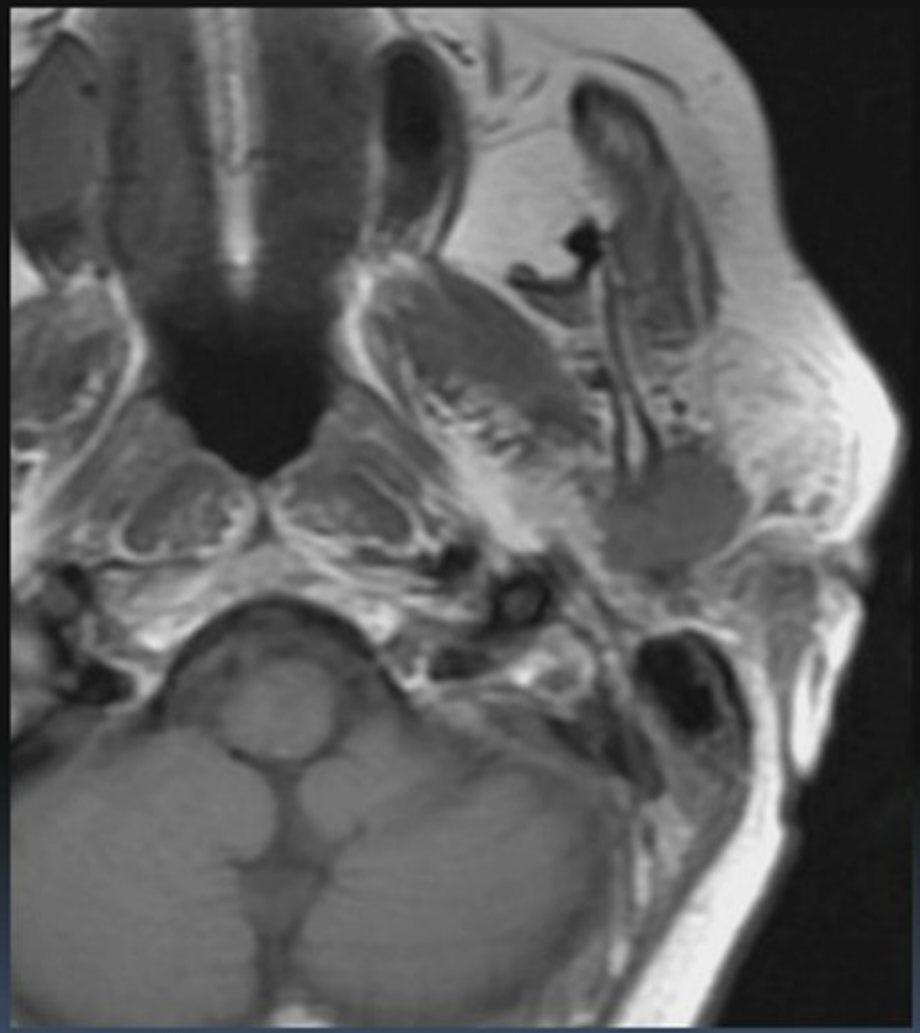

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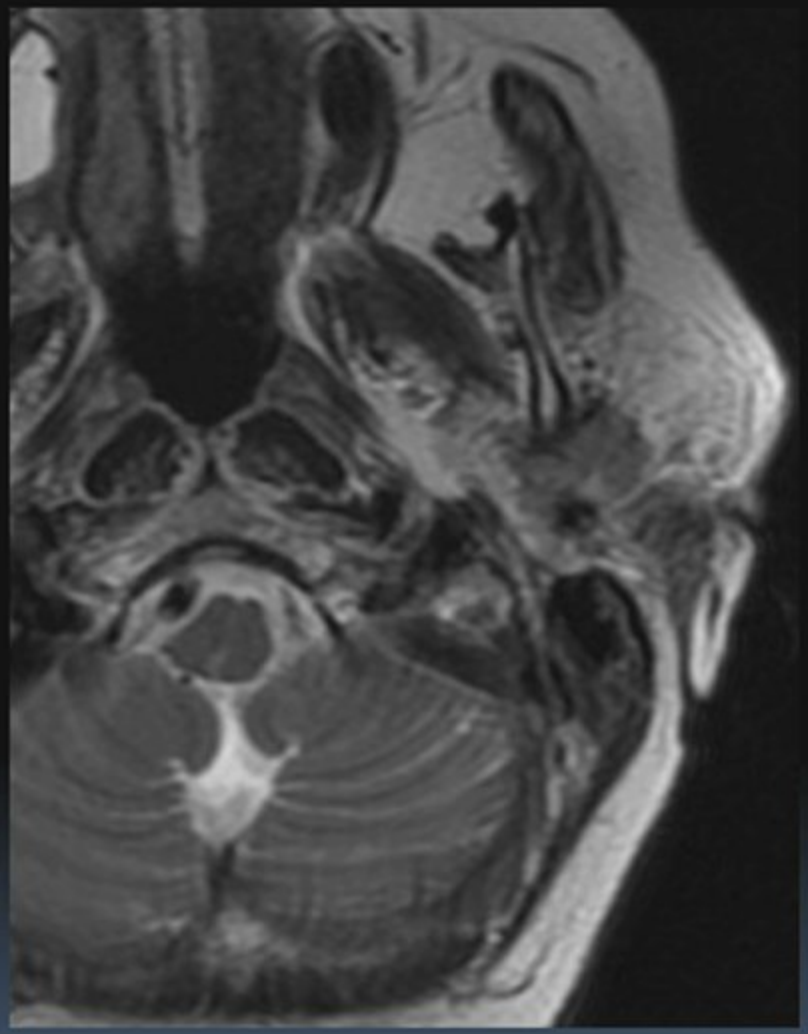
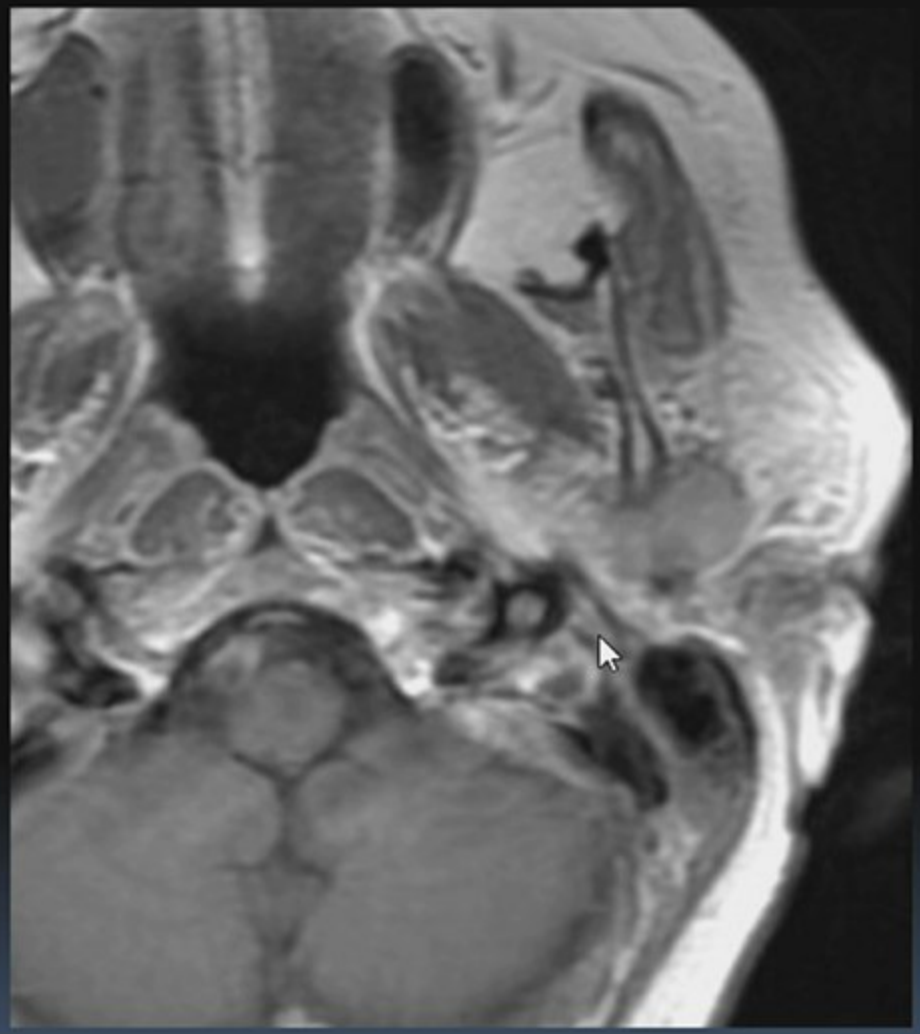
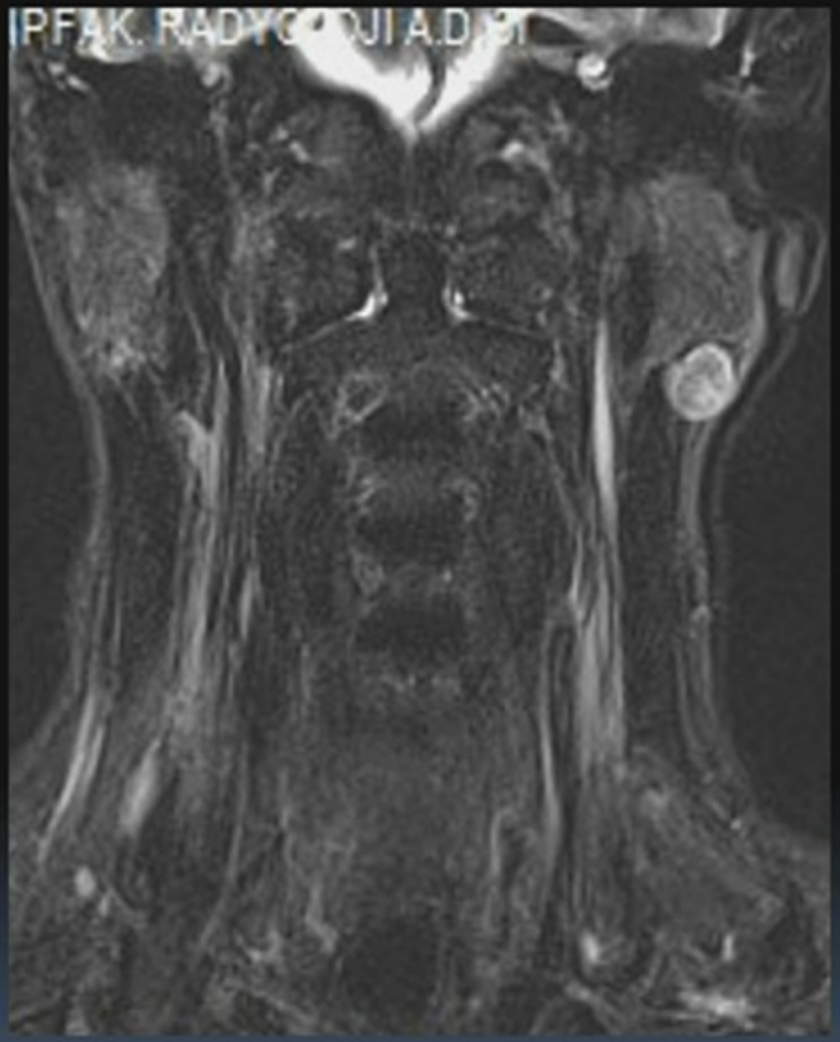


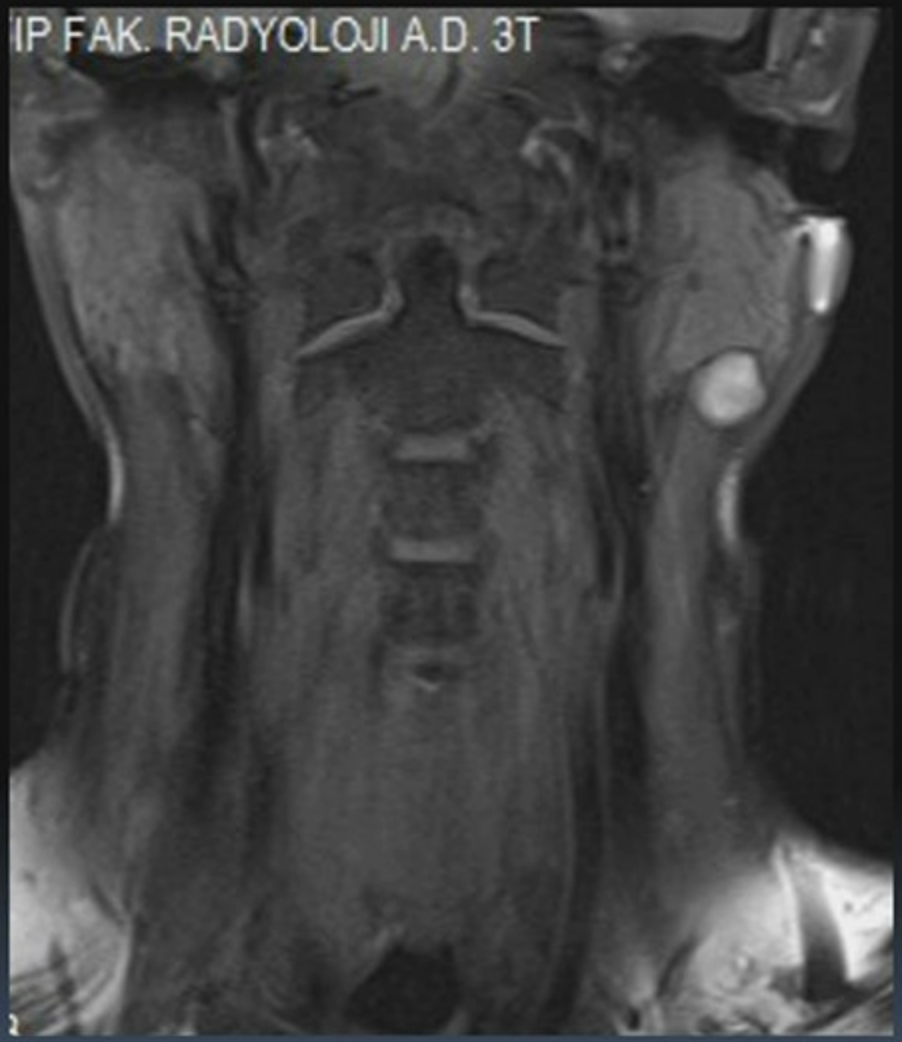


Cerrahi bir atasözü

"Tüm parotid kitleleri çıkartılmalıdır"

45 yaş erkek





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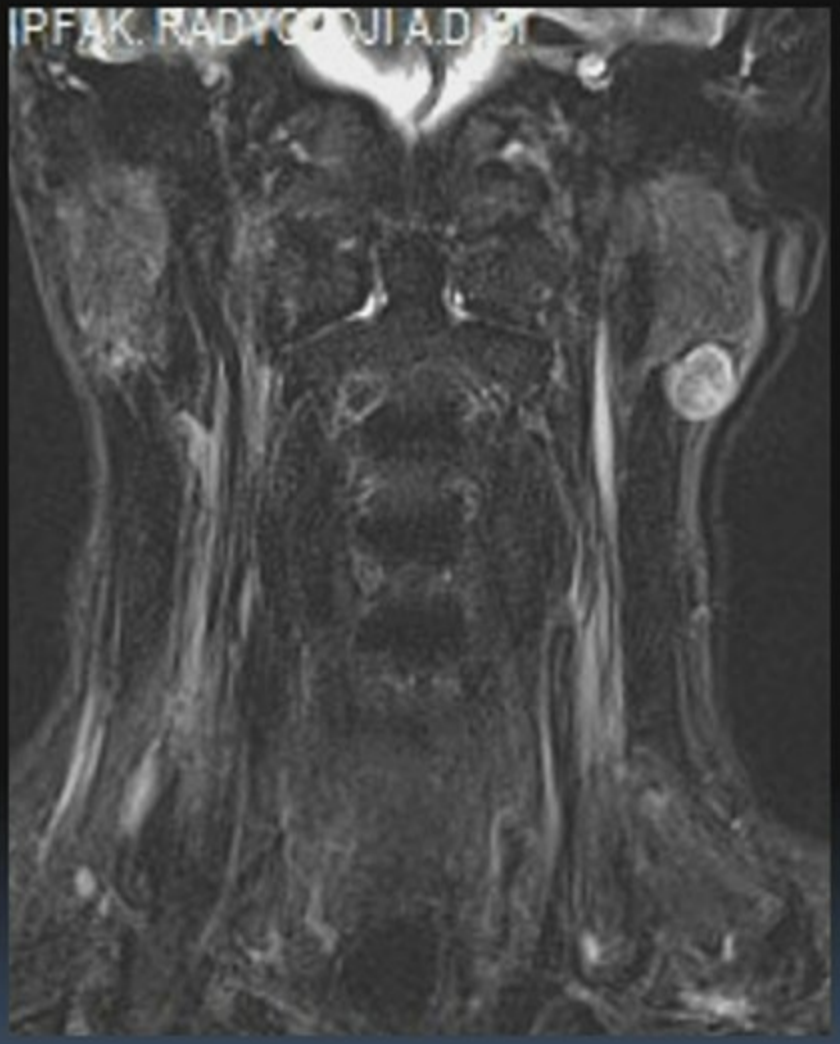

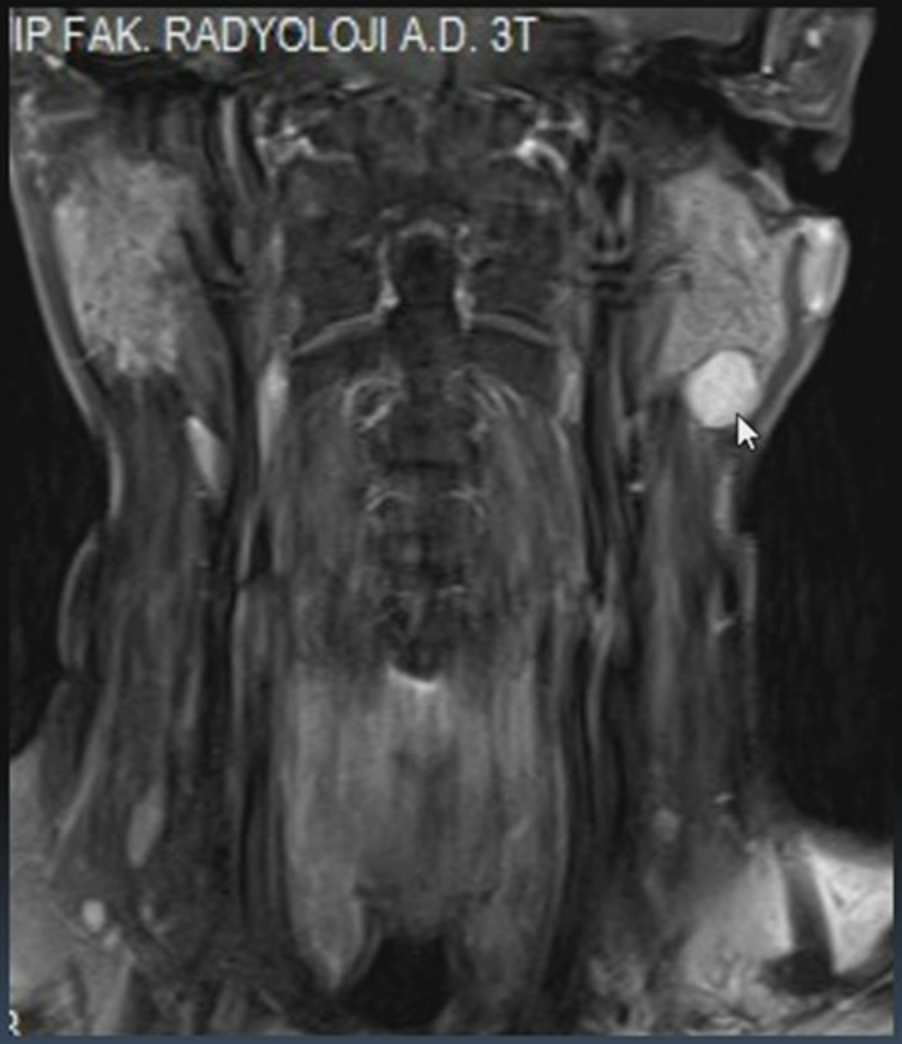

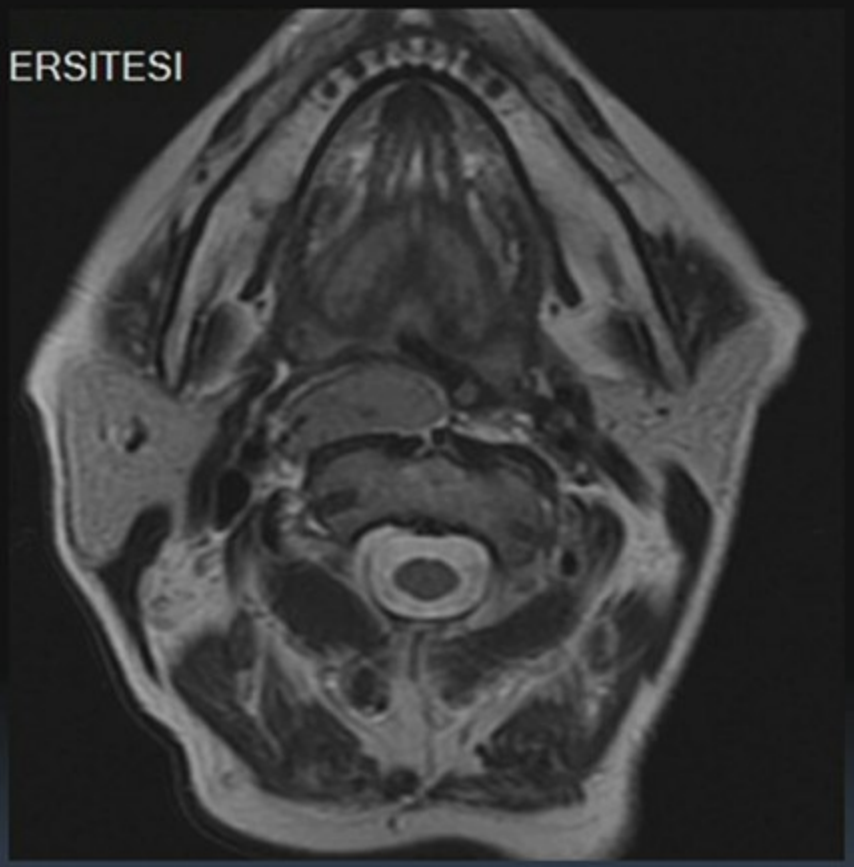
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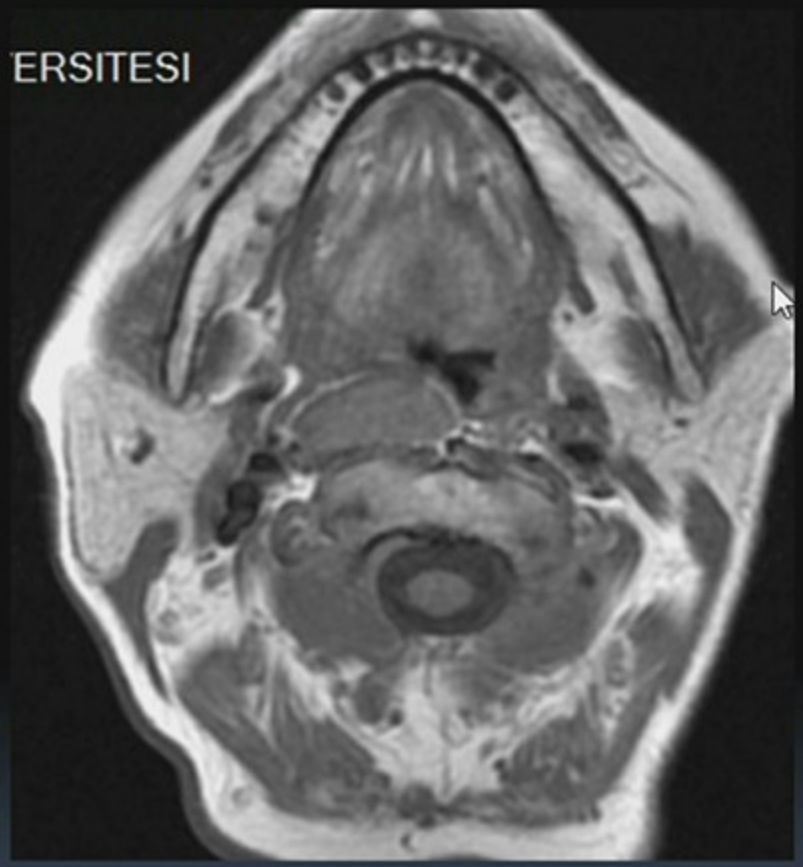
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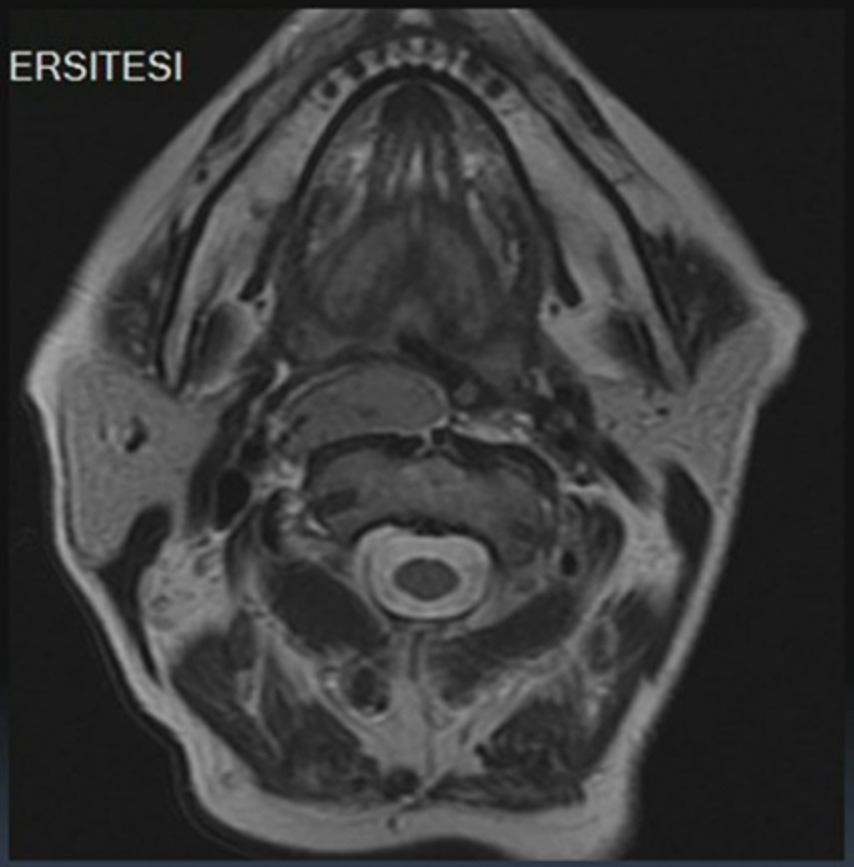
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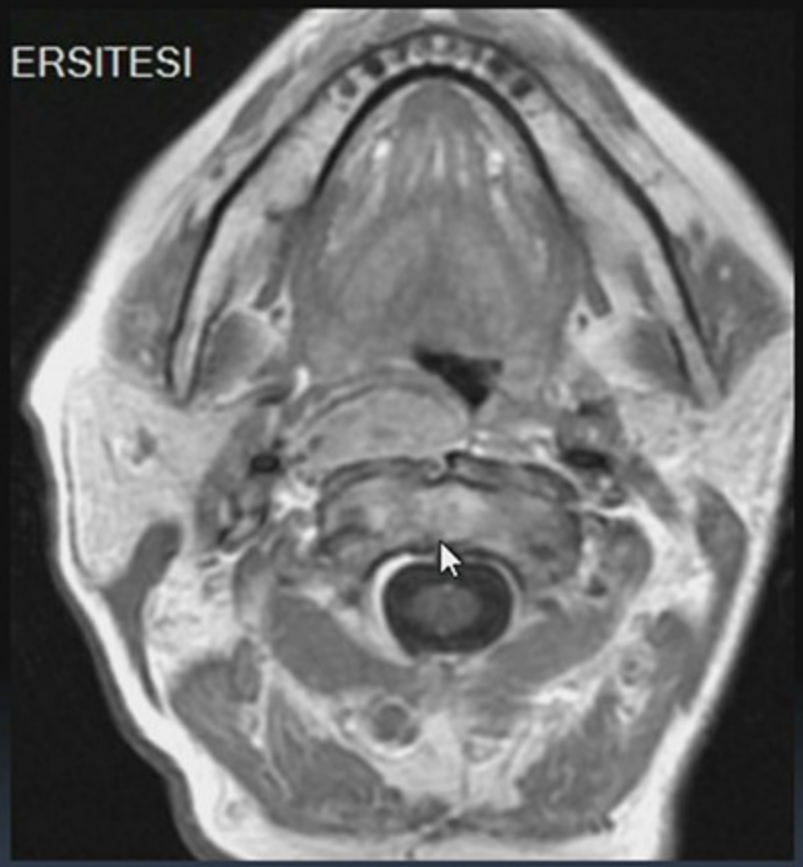
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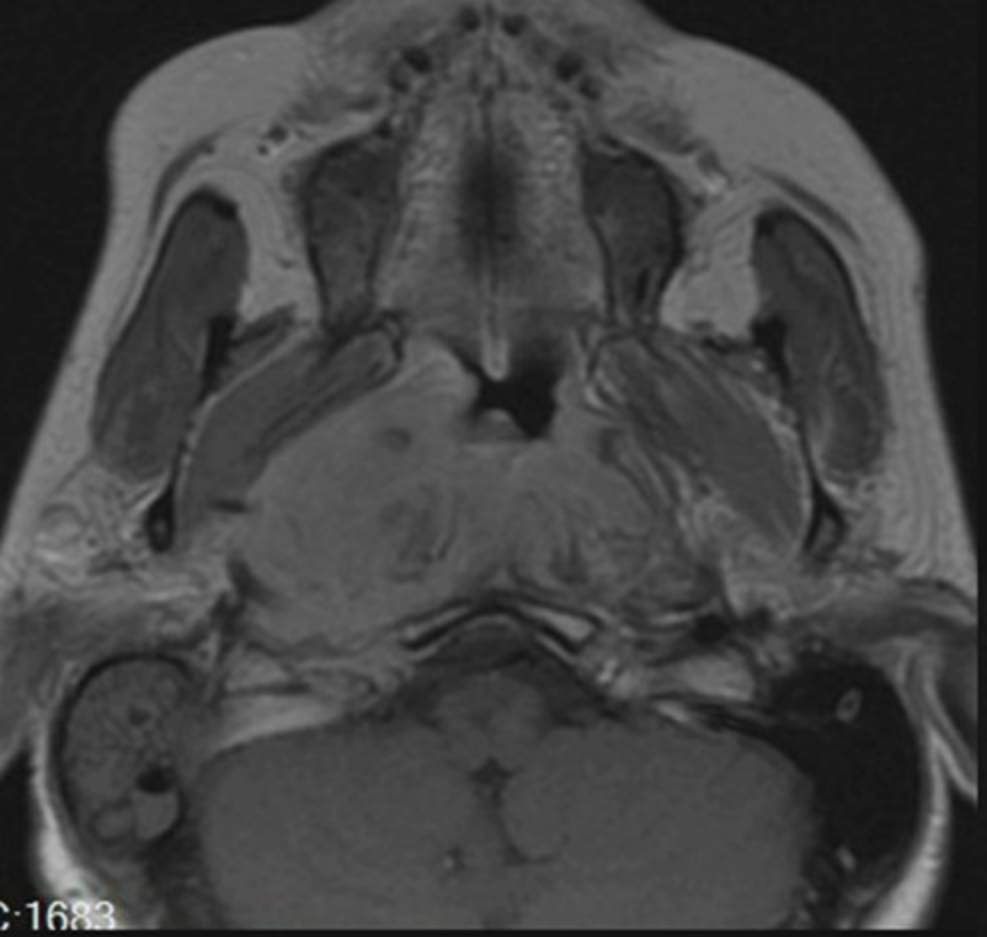
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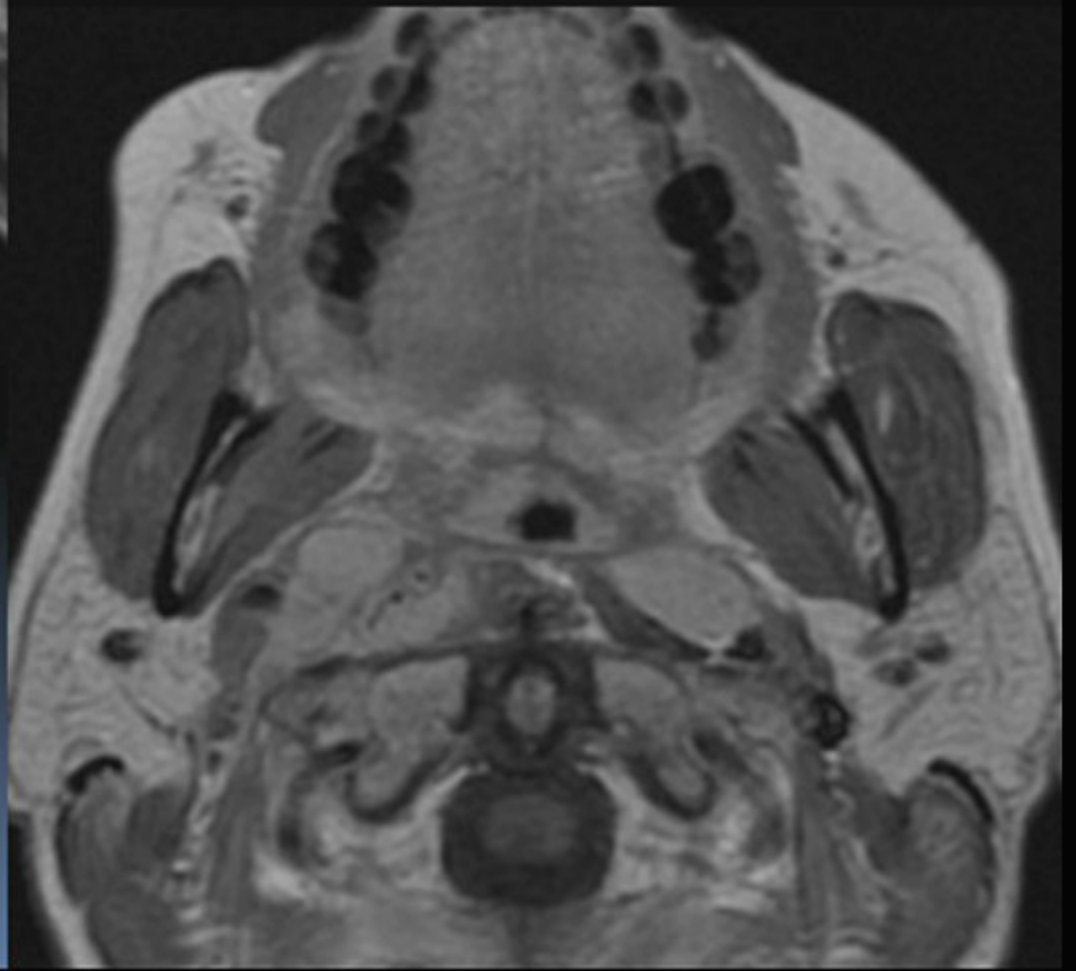

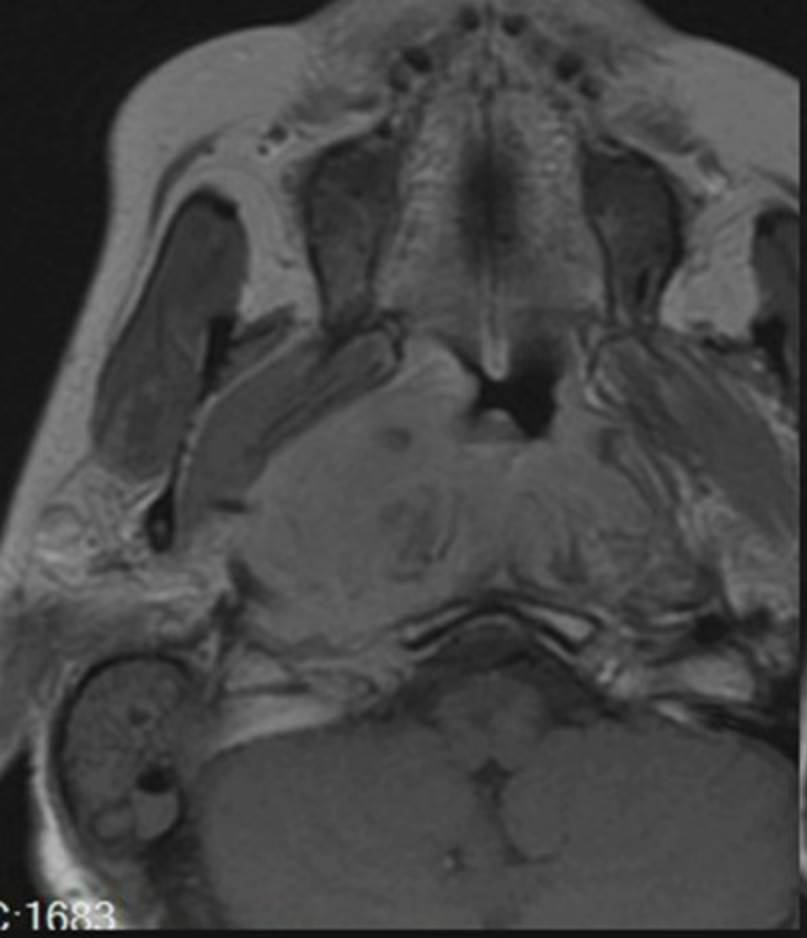
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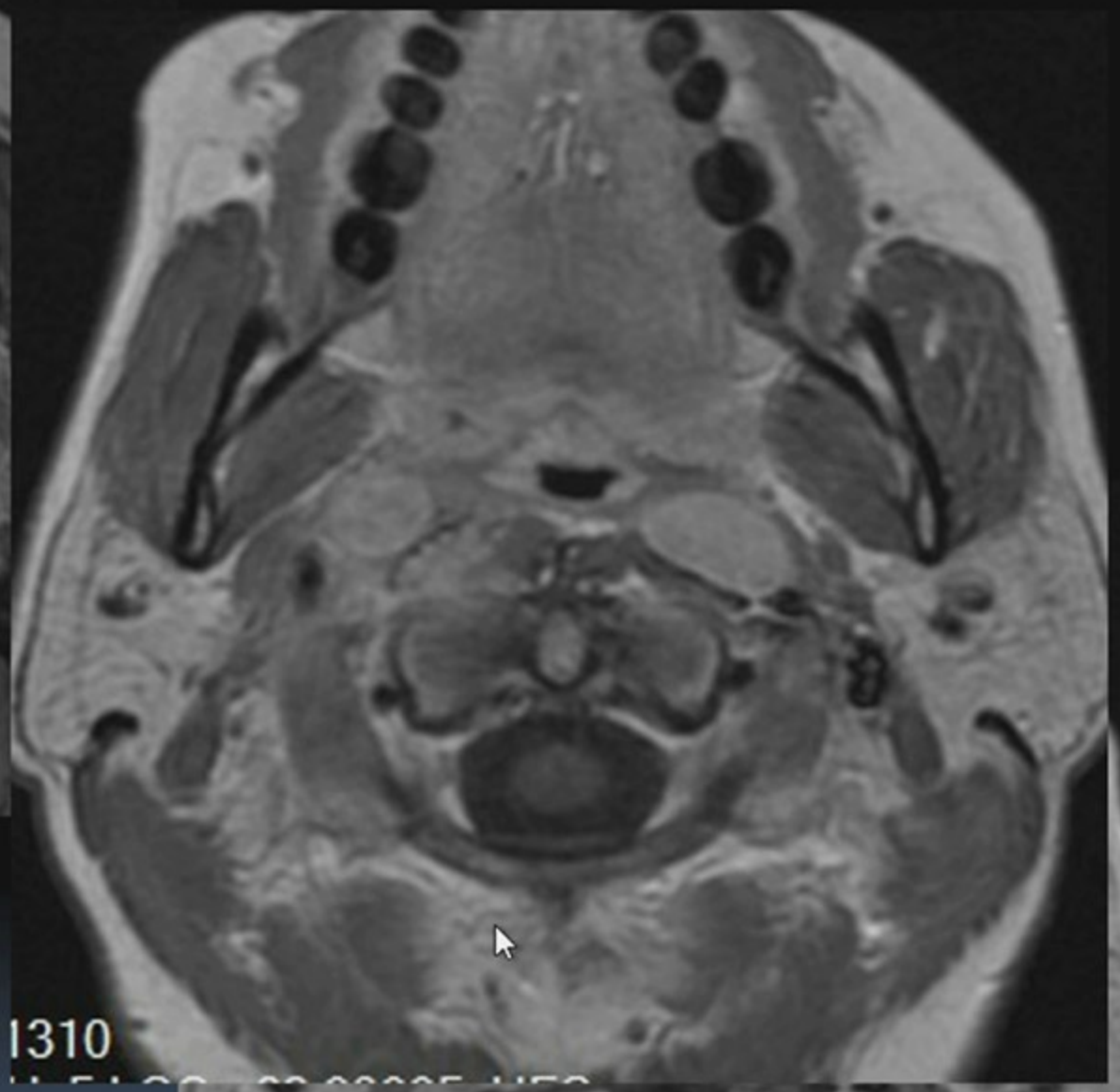
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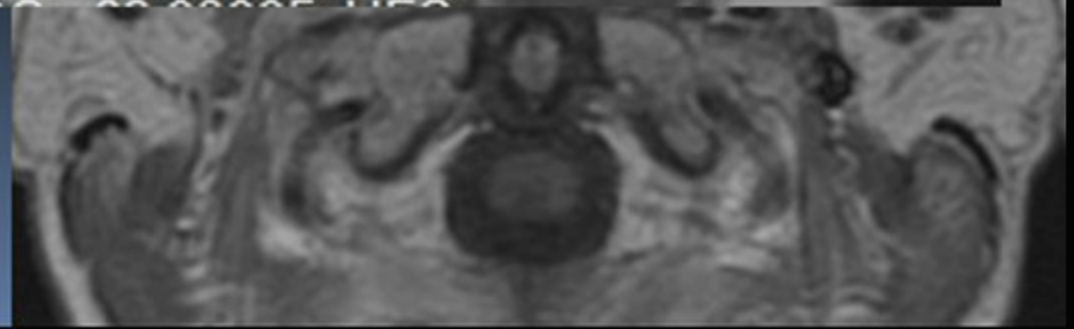

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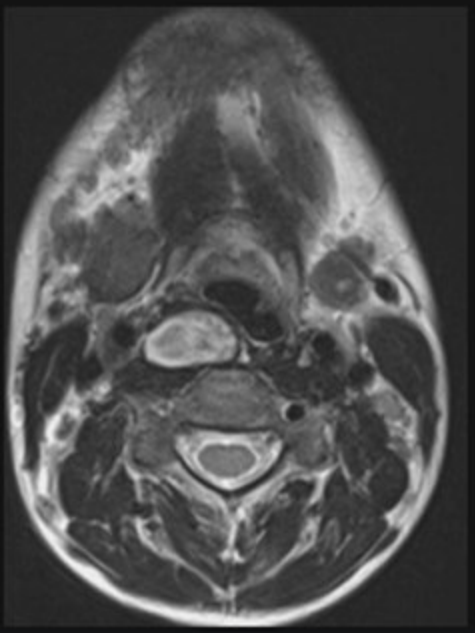

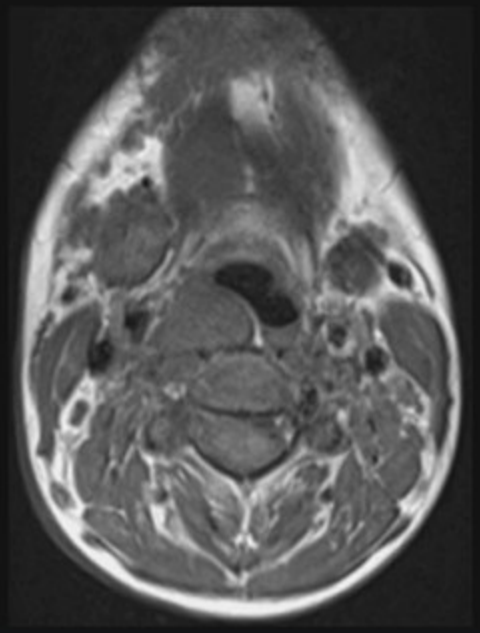

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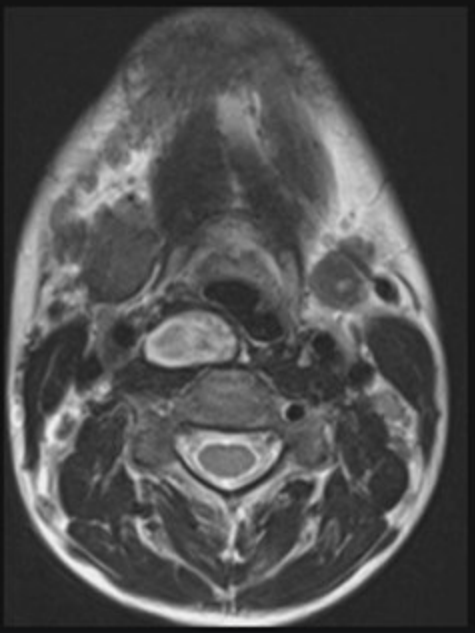
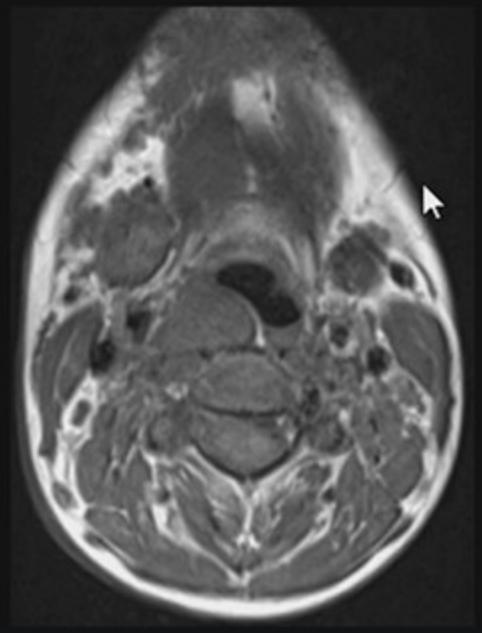
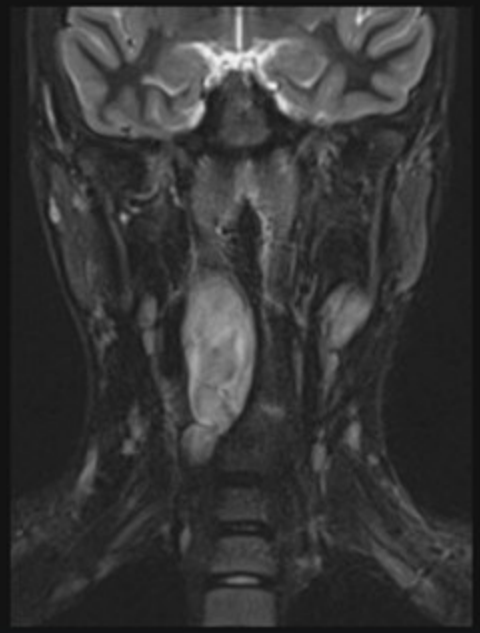

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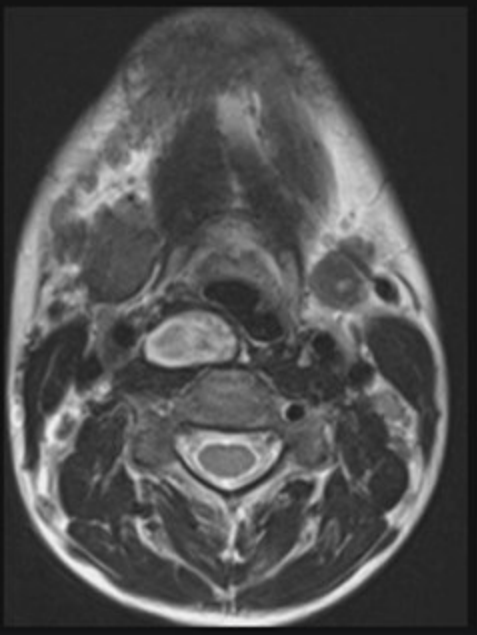
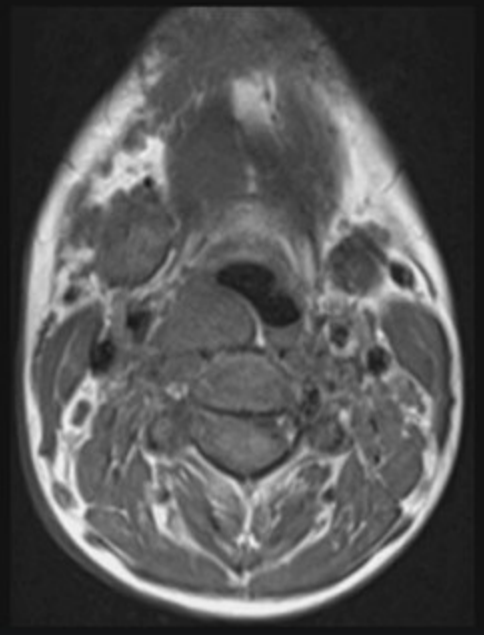
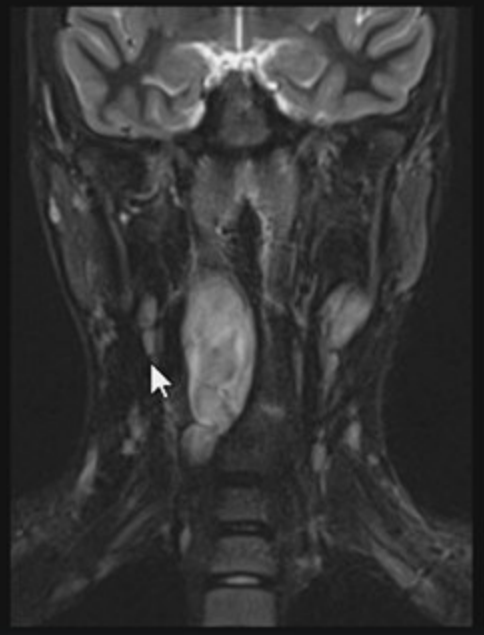
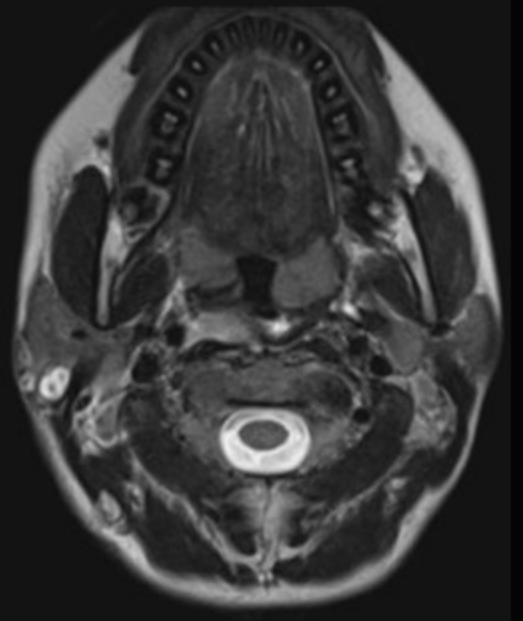

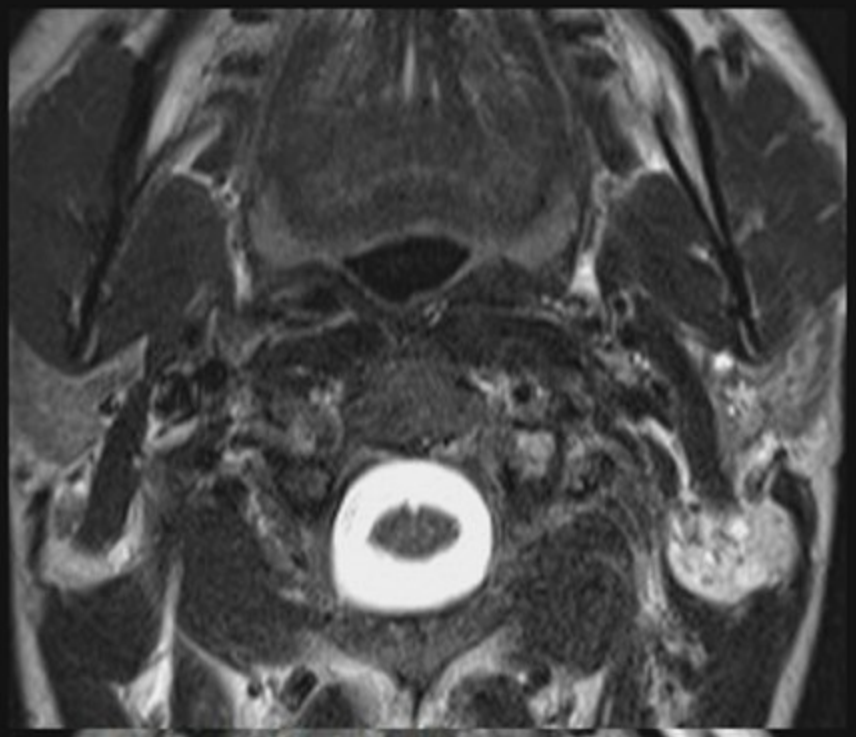

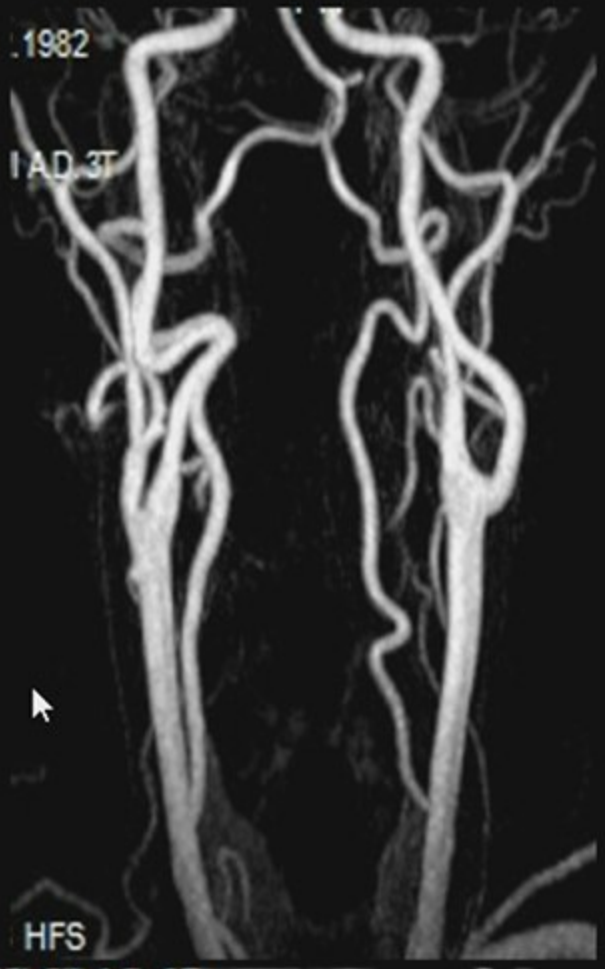
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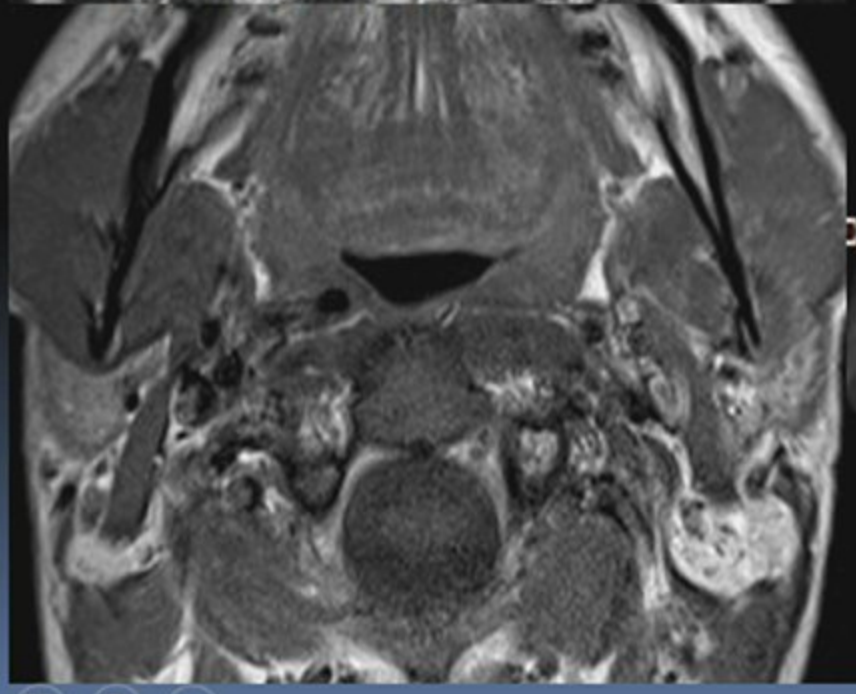

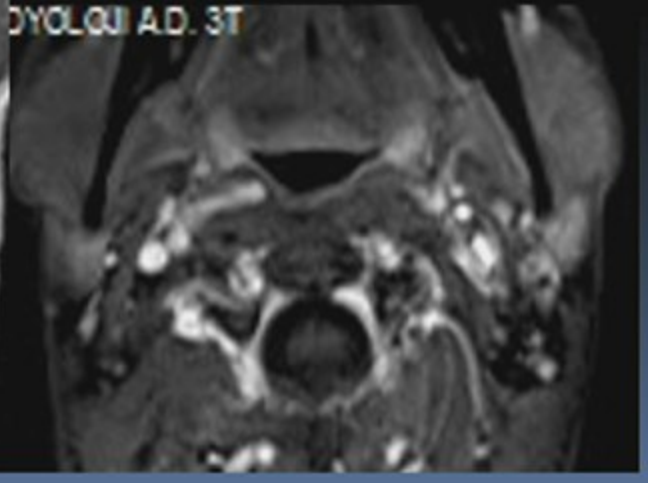
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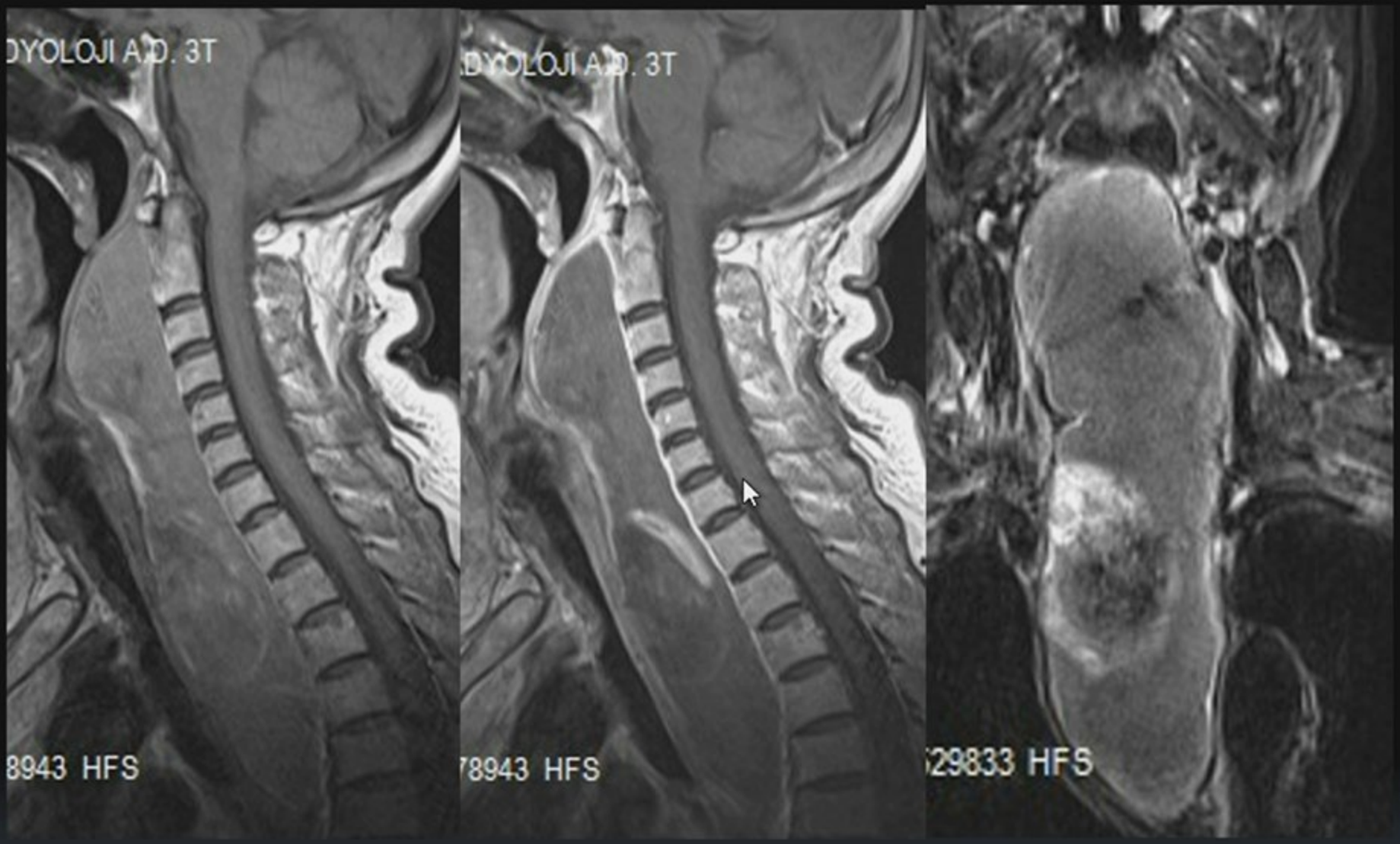
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29833 HFS

Sözün Özü

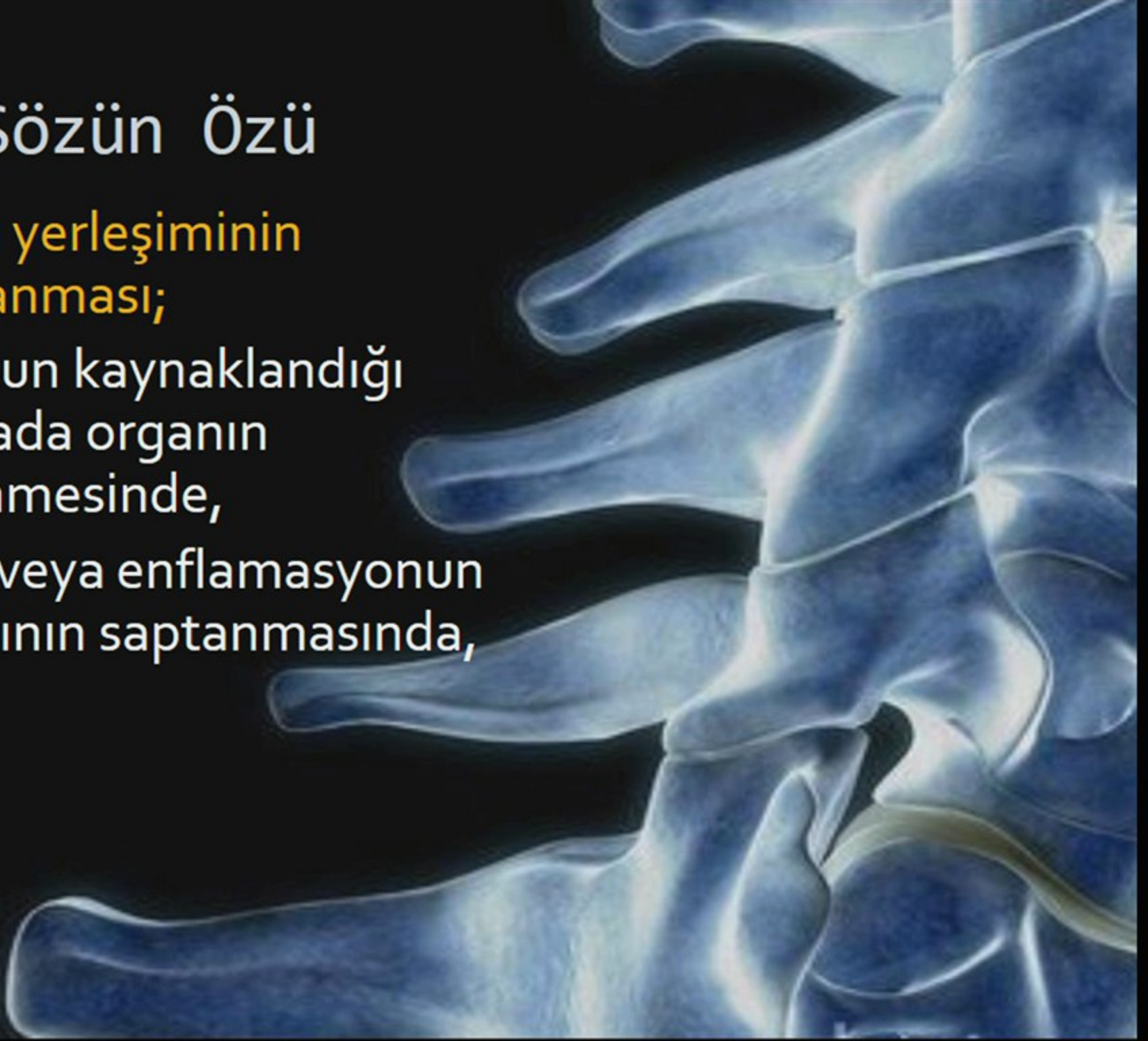
- Lezyon yerleşiminin tanımlanması;

Sözün Özü

- Lezyon yerleşiminin tanımlanması;
- Lezyonun kaynaklandığı doku yada organın belirlenmesinde,

Sözün Özü

- Lezyon yerleşiminin tanımlanması;
- Lezyonun kaynaklandığı doku yada organın belirlenmesinde,
- Tümör veya enflamasyonun yayılımının saptanmasında,



Sözün Özü

- Lezyon yerleşiminin tanımlanması;
- Lezyonun kaynaklandığı doku yada organın belirlenmesinde,
- Tümör veya enflamasyonun yayılımının saptanmasında,
- Olası tanıların sınırlandırılmasında yardımcıdır.

Teşekkürler!

Dr. Murat Uçar

drucar@yahoo.com

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