

Vulvanın Öncül Lezyonları

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Cerrahpaşa Tıp Fakültesi
Patoloji Anabilim Dalı

21. Ulusal Patoloji Kongresi
16-20 Kasım 2011, İzmir

Vulva

İnvaziv Ca

Nadir

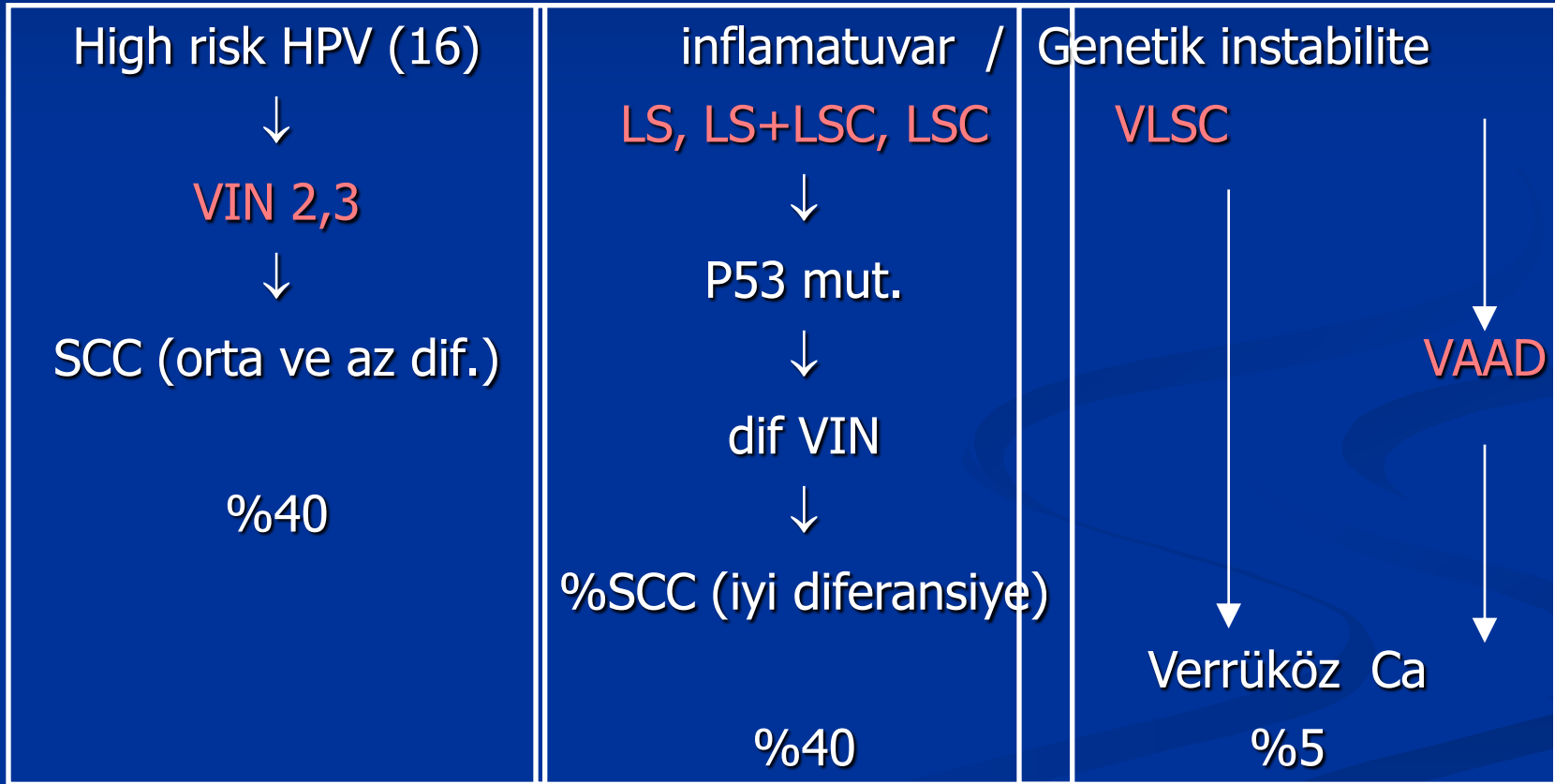
Sıklık aynı

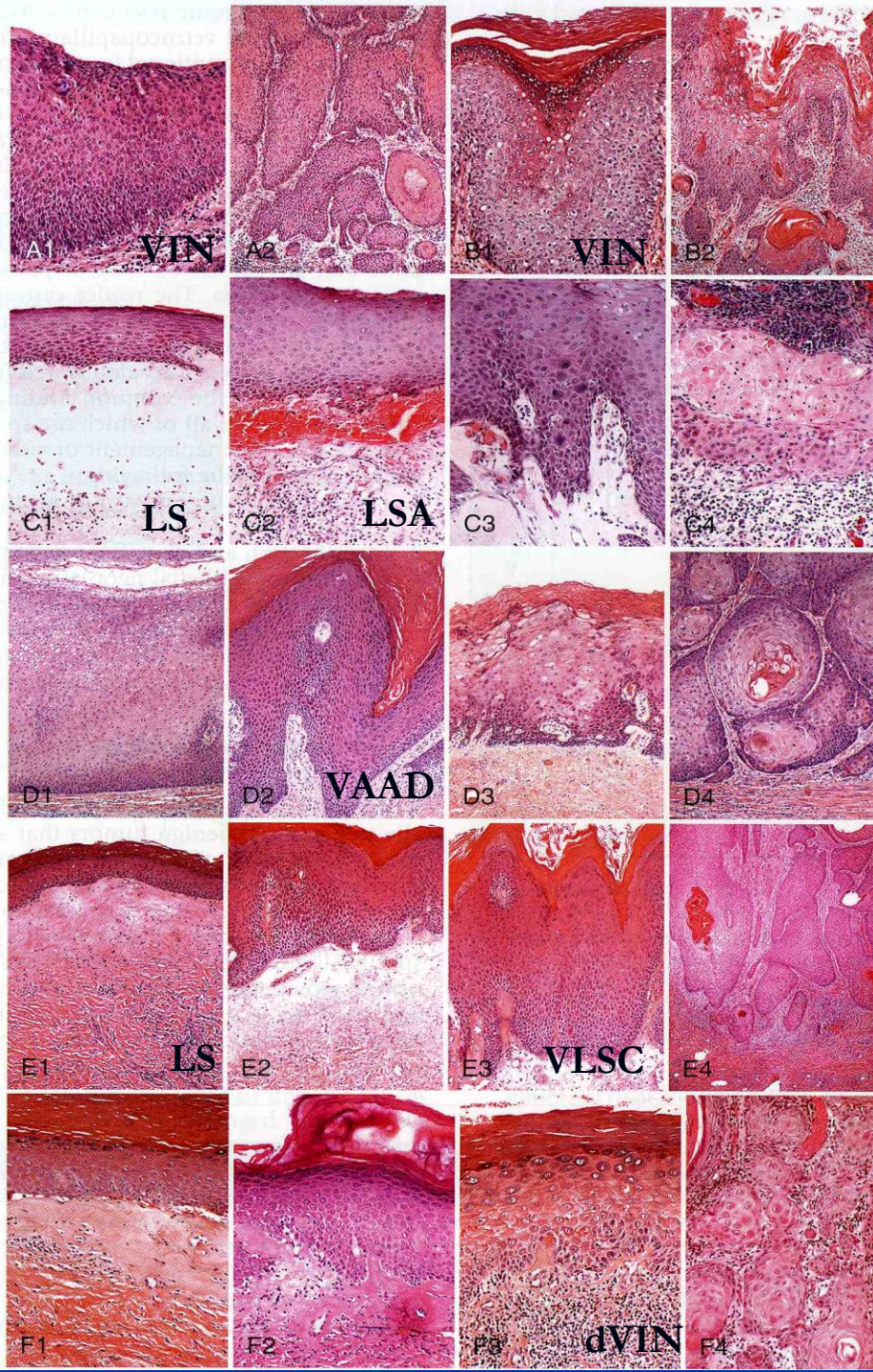
Preinvaziv Lezyonlar

Sıklık ↑↑

Genç yaşta görülme ↑↑ (25-30 yaş)

Vulva Ca. Gelişiminde Yolaklar





SCC öncesi veya SCC ile birlikte görülen epitel değişiklikleri geniş bir yelpaze şeklindedir.

Vulvanın

skuamöz hücreli premalign hastalıkları
için popüler terminoloji

"VIN" (1981)

- Queyrat eritroplazisi
- Bowenoid carcinoma insitu
- Carcinoma simpleks
- Bowen hastalığı

VIN (Vulvar İntraepitelyal Neoplazi)

WHO

ISGYP

FIGO

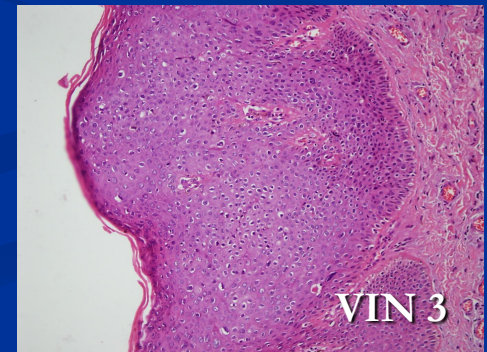
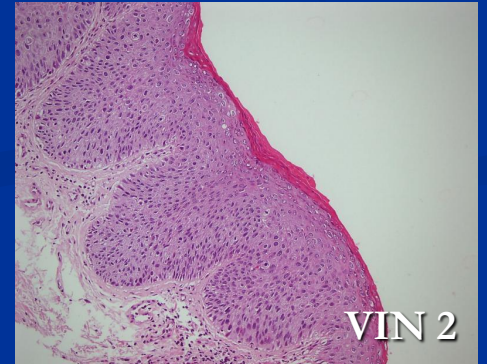
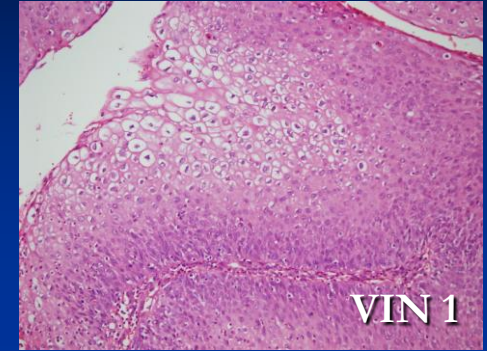
ISSVD

- Mantıklı değil
- Histolojik terim
- Klinik-patolojik özelliklerine göre 2 tip
 - Olağan (klasik, bowenoid, indiferansiye)
 - Warty
 - Bazaloid
 - Diferansiye (simpleks)

VIN Terminolojisi / tarihçe

- Üçlü grade'lendirme (WHO)
 - VIN 1
 - VIN2
 - VIN3
- İkili grade'lendirme (Bethesda benzeri, 2005) LGVILS
HGVILS
(WHO,2003) low grade
high grade
- Tekli grade'lendirme (ISSVD)

	1986	2004
VIN1		-
VIN 2	}	VIN
VIN 3		
dif VIN		dif VIN



VIN Terminolojisi / tarihçe

ISSVD 2004 gerekçeler:

- VIN 1 tanısı nadir, biolojik potansiyeli?, tekrarlanabilir değil
- VIN 2 tanısı nadir, seyri? Veri az?
- VIN 2 ve 3 kombine edildiğinde tekrarlanabilirlik \uparrow ve ayrımları klinik açıdan önemsiz

Vulvanın öncül lezyonlarında

- Hangi terminolojiyi kullanalım?
- Ayırıcı tanıda dikkat edilecek noktalar?
- Nasıl rapor yazalım?

Olađan VIN / Klinik Özellikleri

- 40 yaş ↓
Sıklık ↑
HPV, herpes, HIV, sigara
- Kaşıntı / asemptomatik
- Beyaz, pembe-kırmızı, pigmente plak / papül / verrü



kabarık

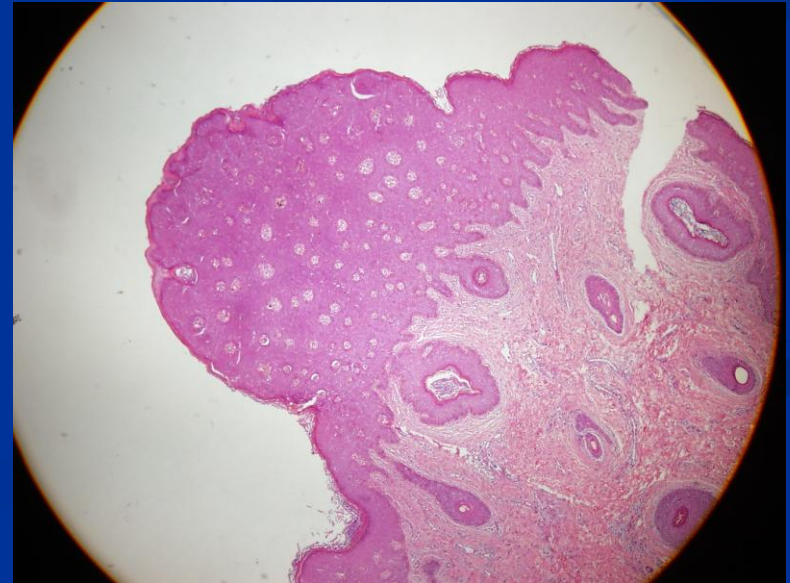
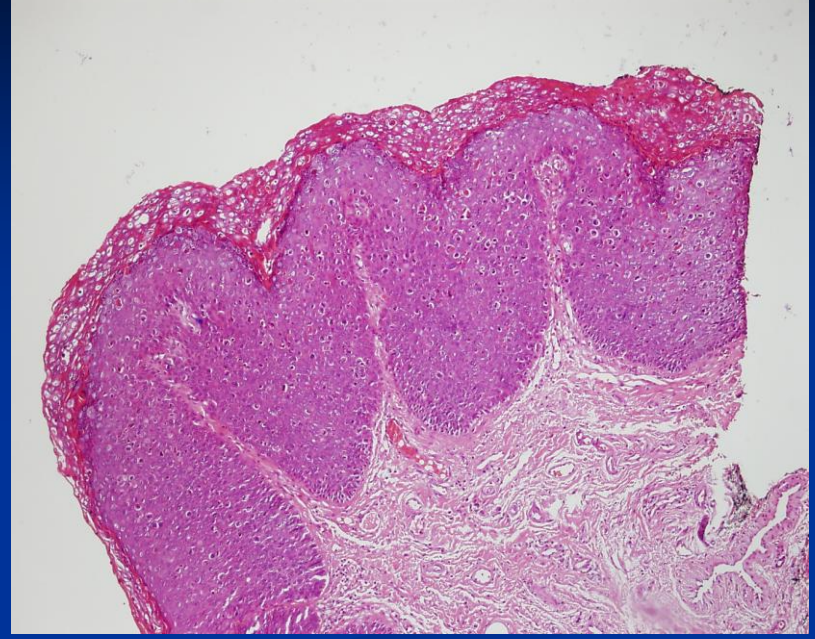
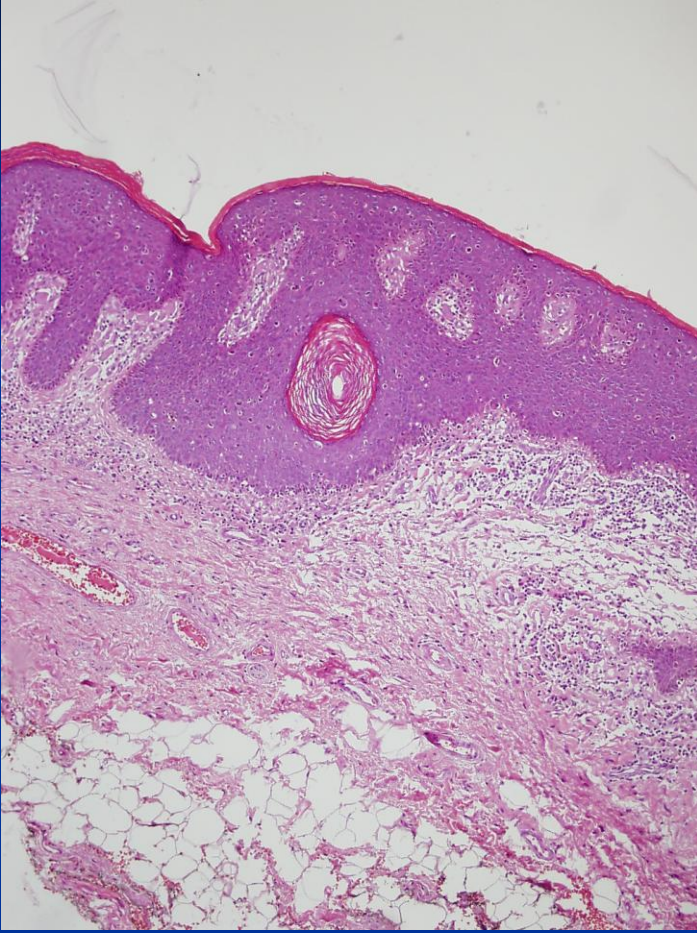


Maküler pigmentli



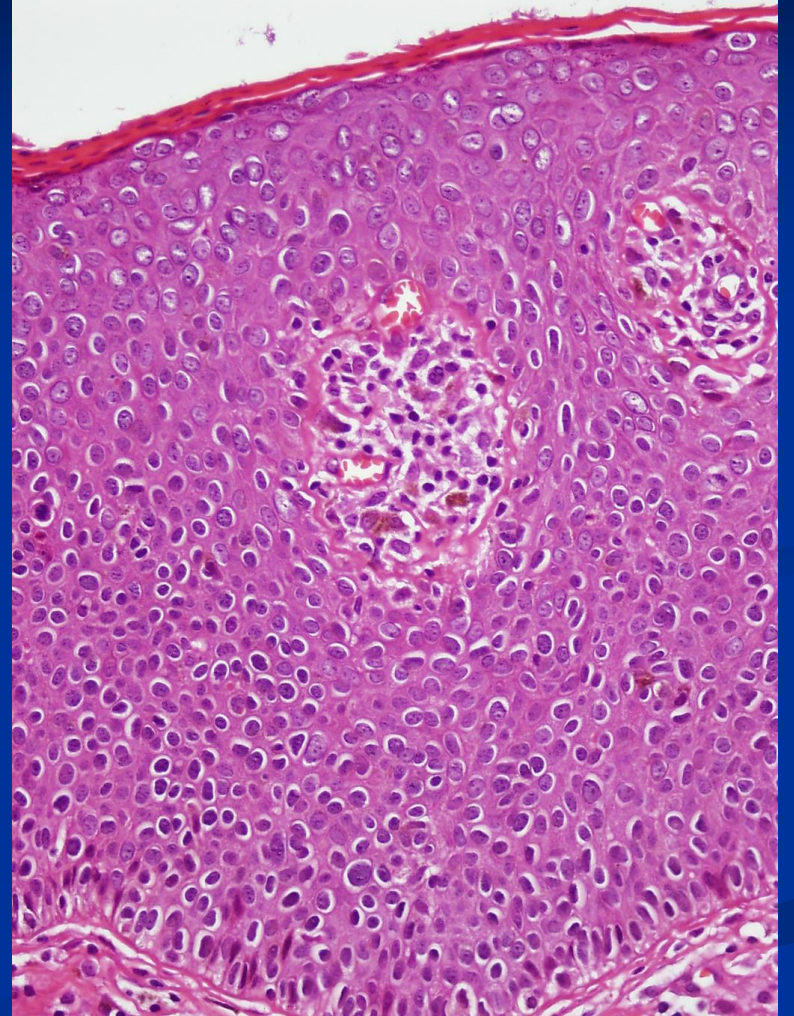
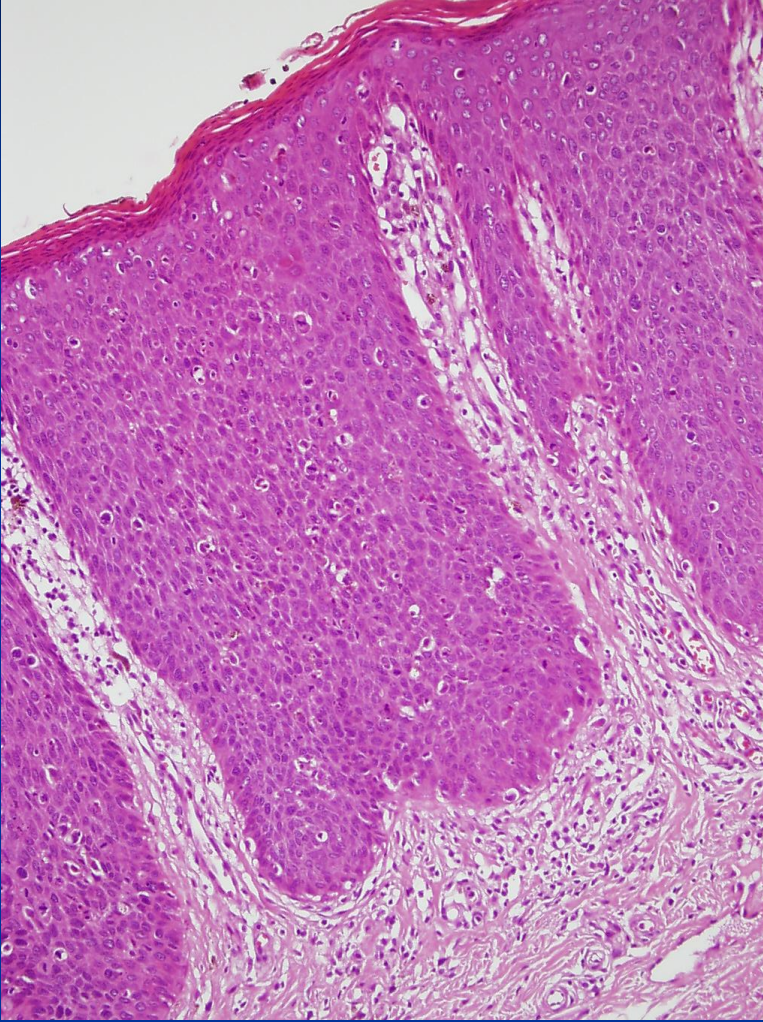
Beyaz plak

Olađan VIN / Patolojik Özellikleri



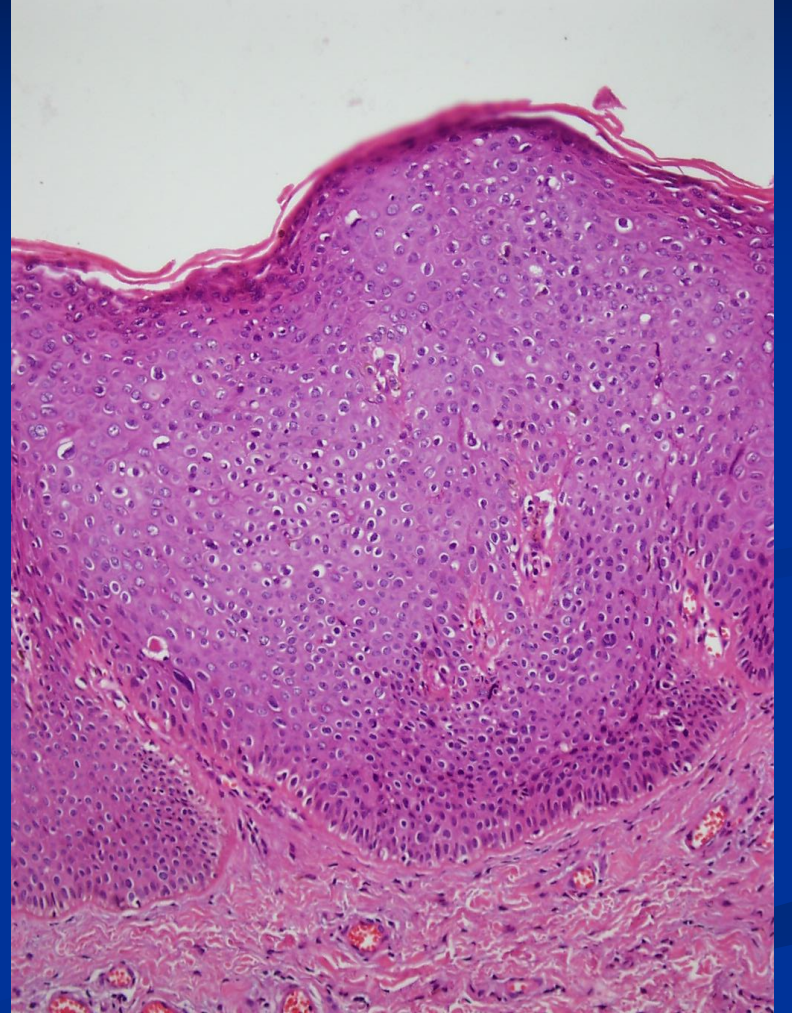
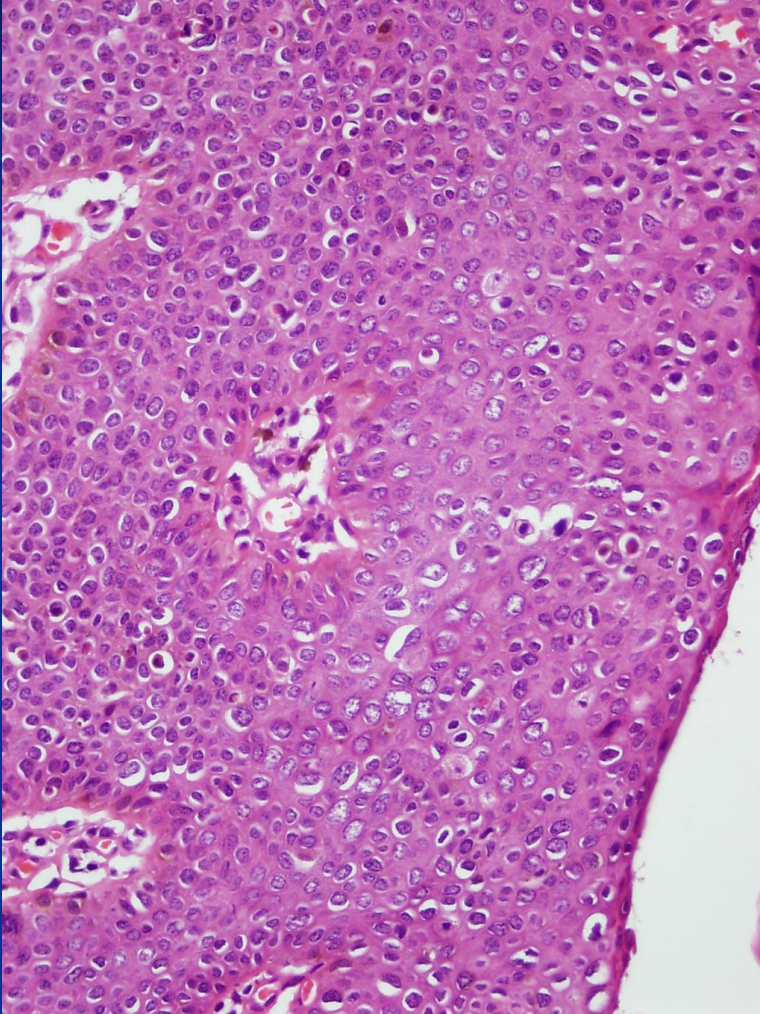
- CIN'e benzer morfoloji
- Epitelde matürasyon kaybı
- Bazofilik görünüm

Olađan VIN / Patolojik Özellikleri



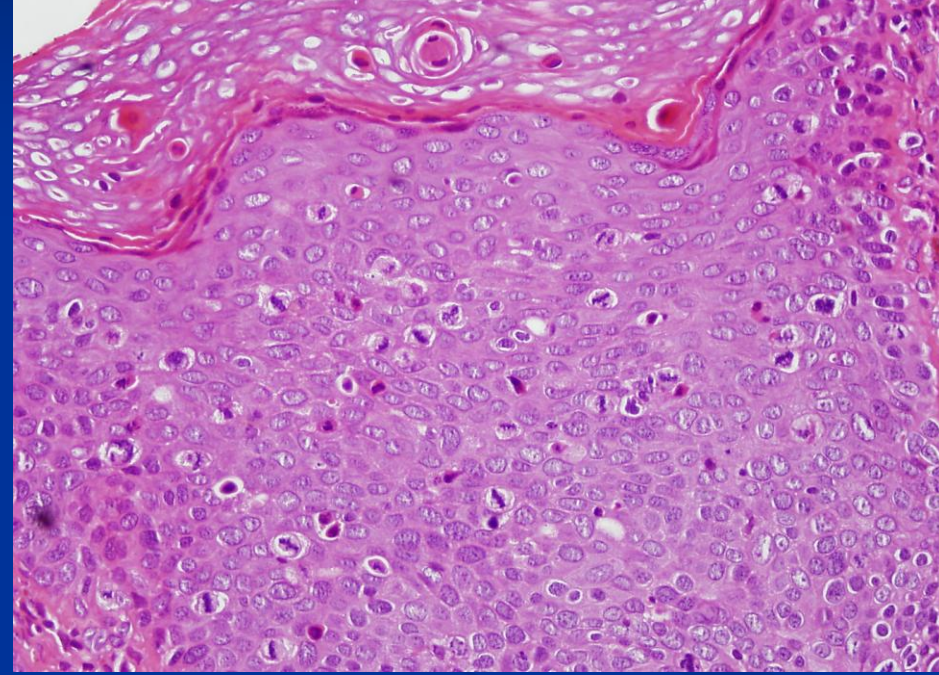
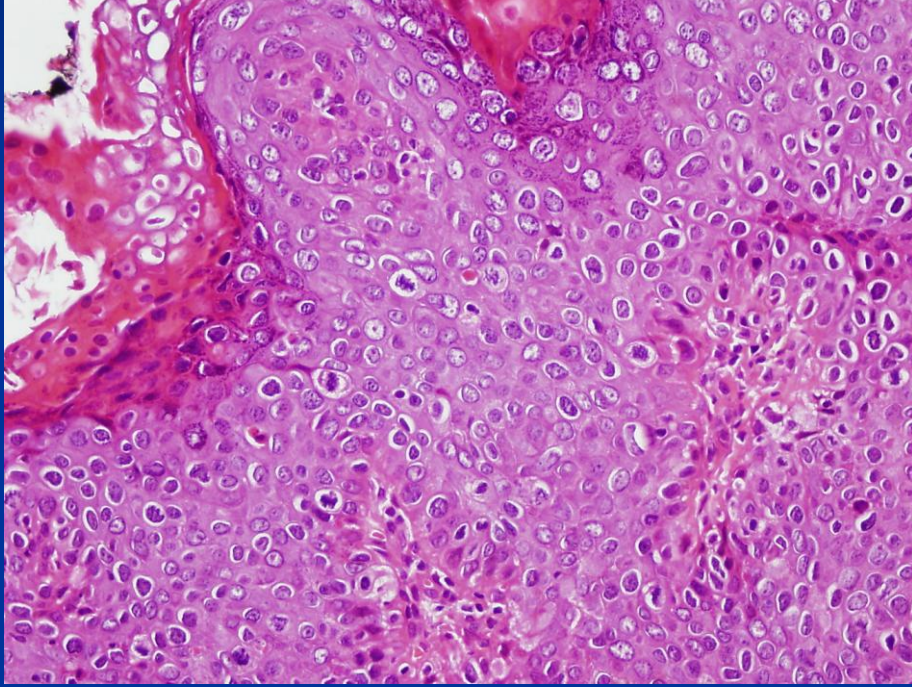
N/C ↑, nükleer pleomorfizm, hiperkromazi, kaba kromatin

Olađan VIN / Patolojik Özellikleri



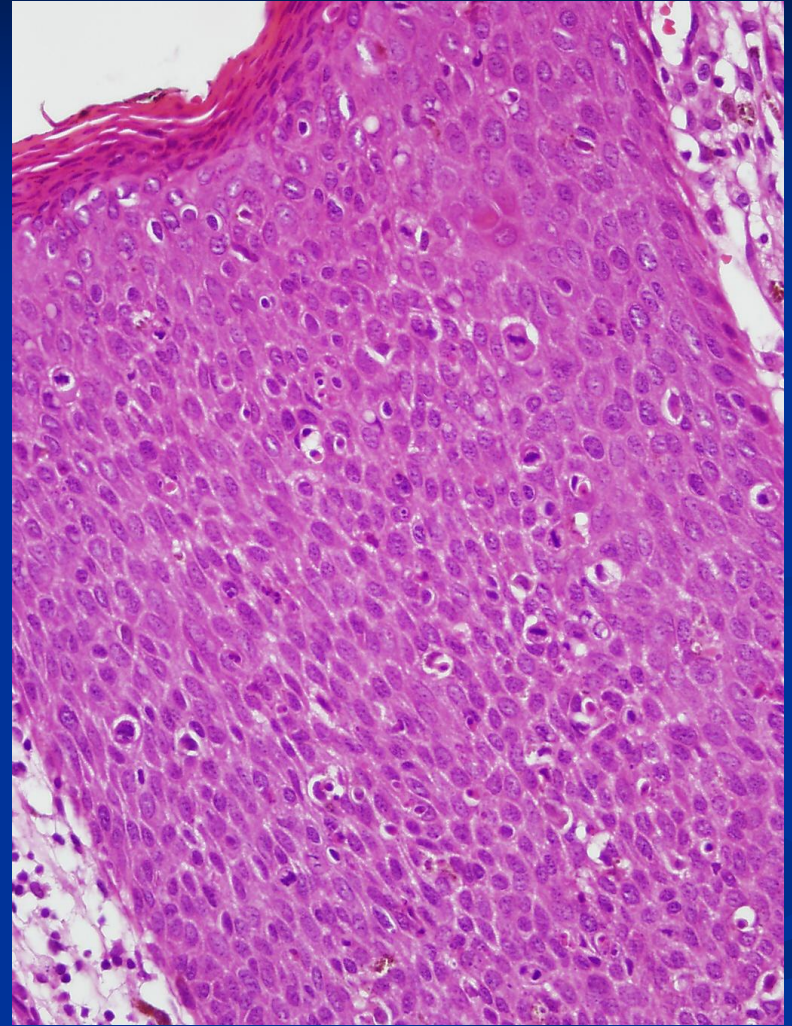
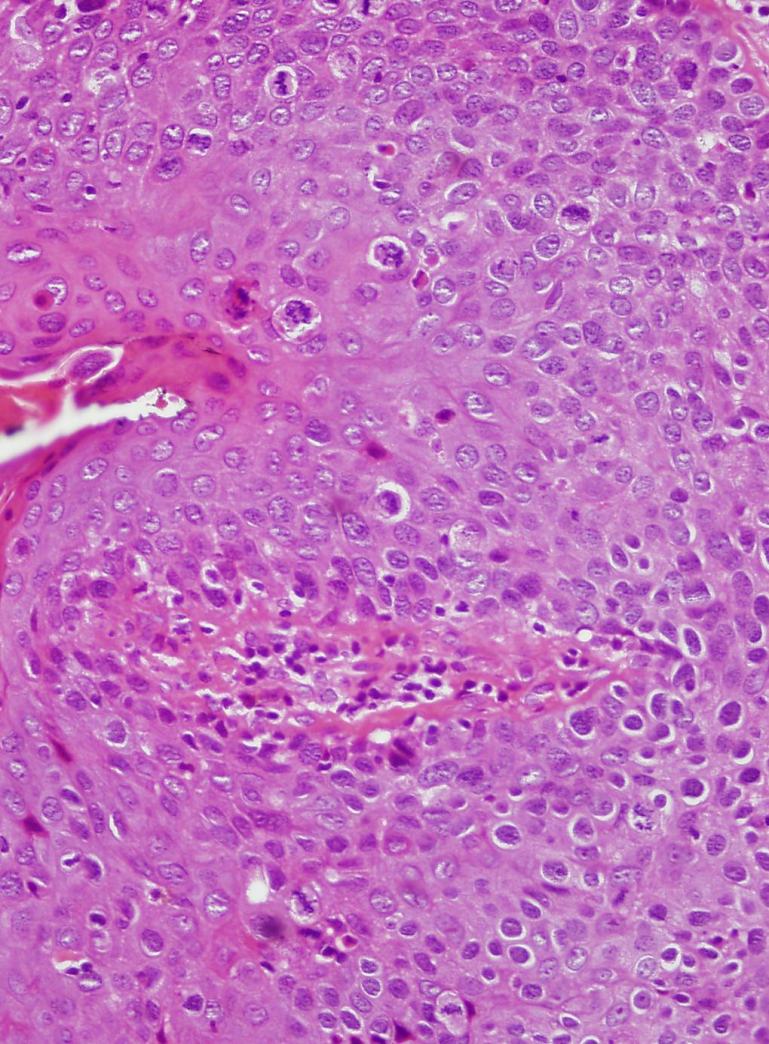
N/C ↑, nükleer pleomorfizm, hiperkromazi, kaba kromatin

Olađan VIN / Patolojik Özellikleri



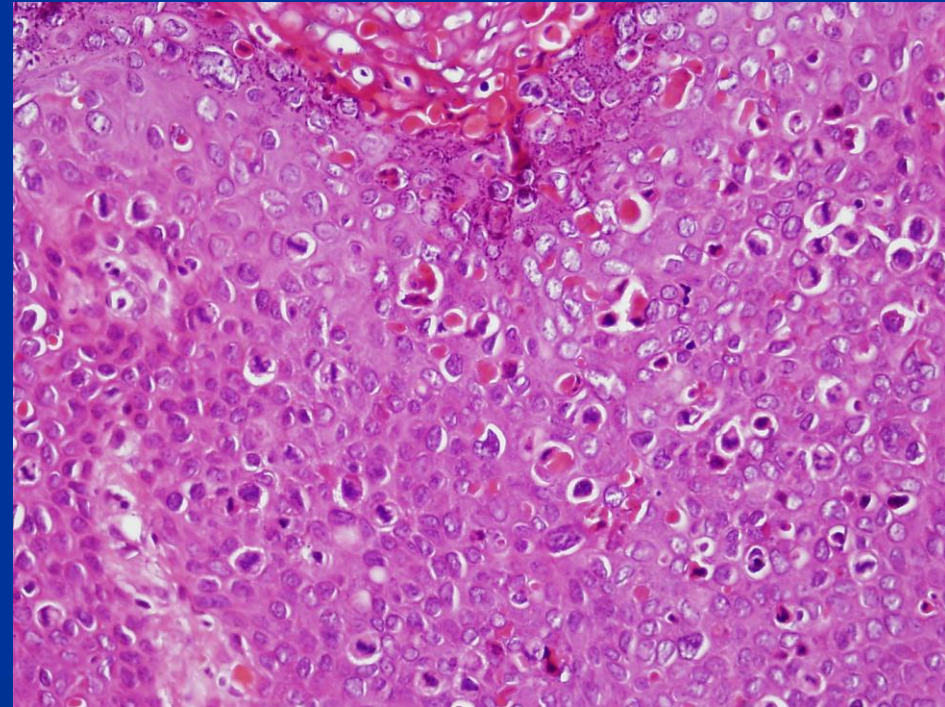
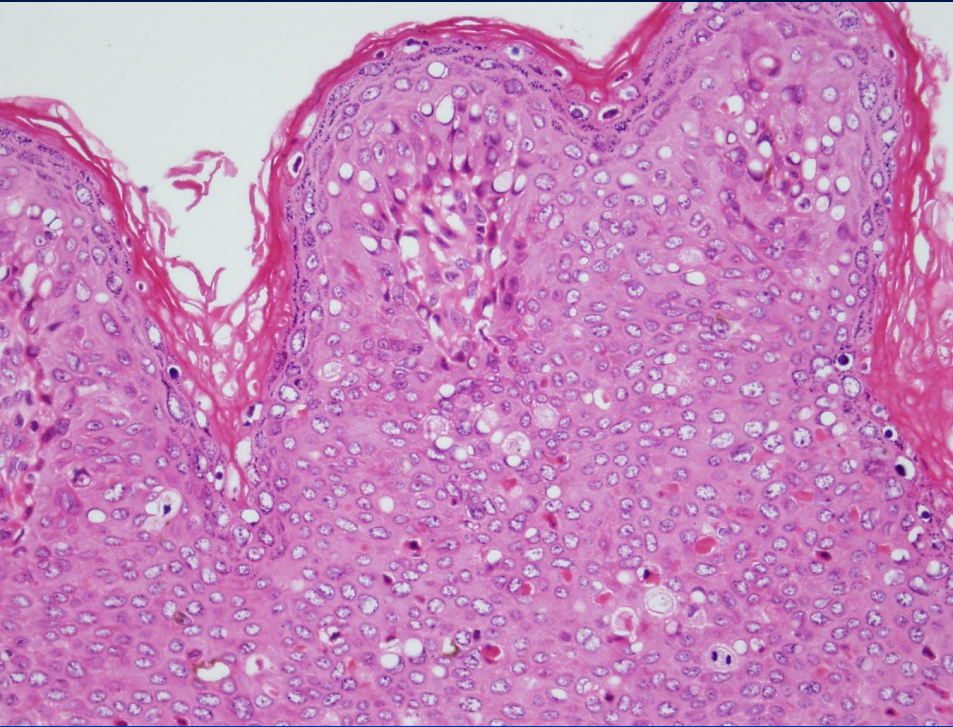
Multinükleasyon, mitoz, atipik mitoz

Olađan VIN / Patolojik Özellikleri



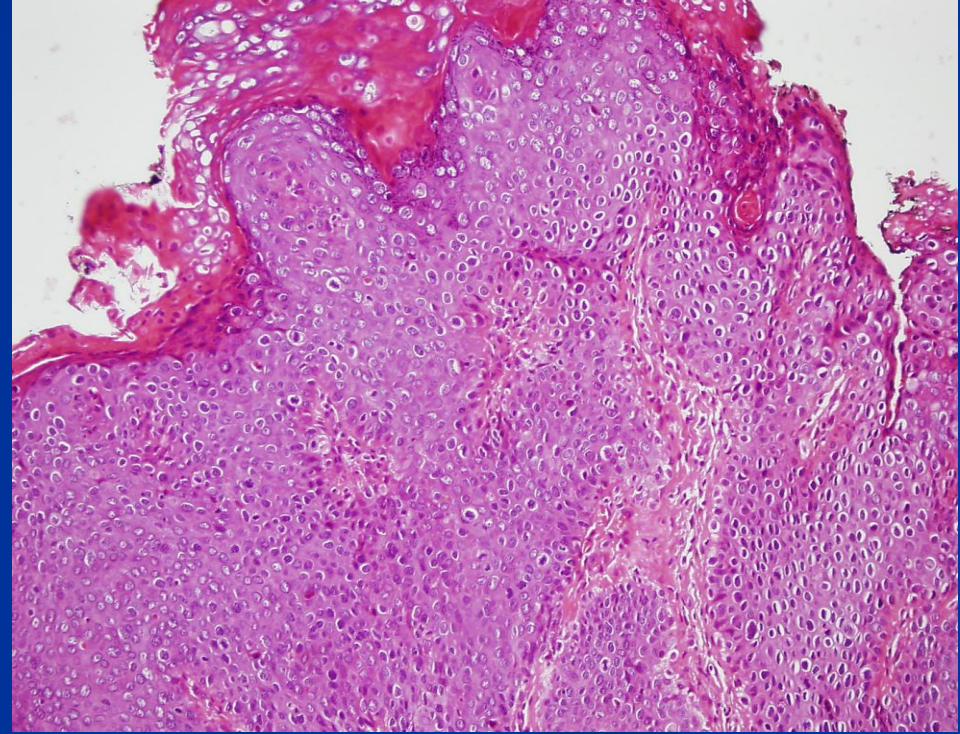
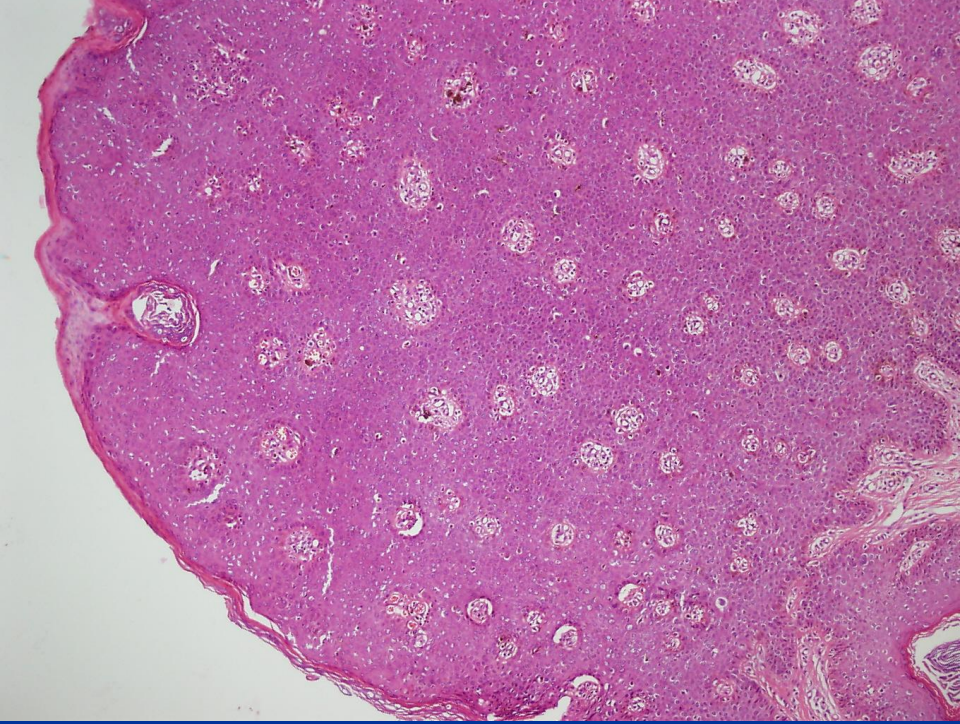
Multinükleasyon, mitoz, atipik mitoz

Olađan VIN / Patolojik Özellikleri



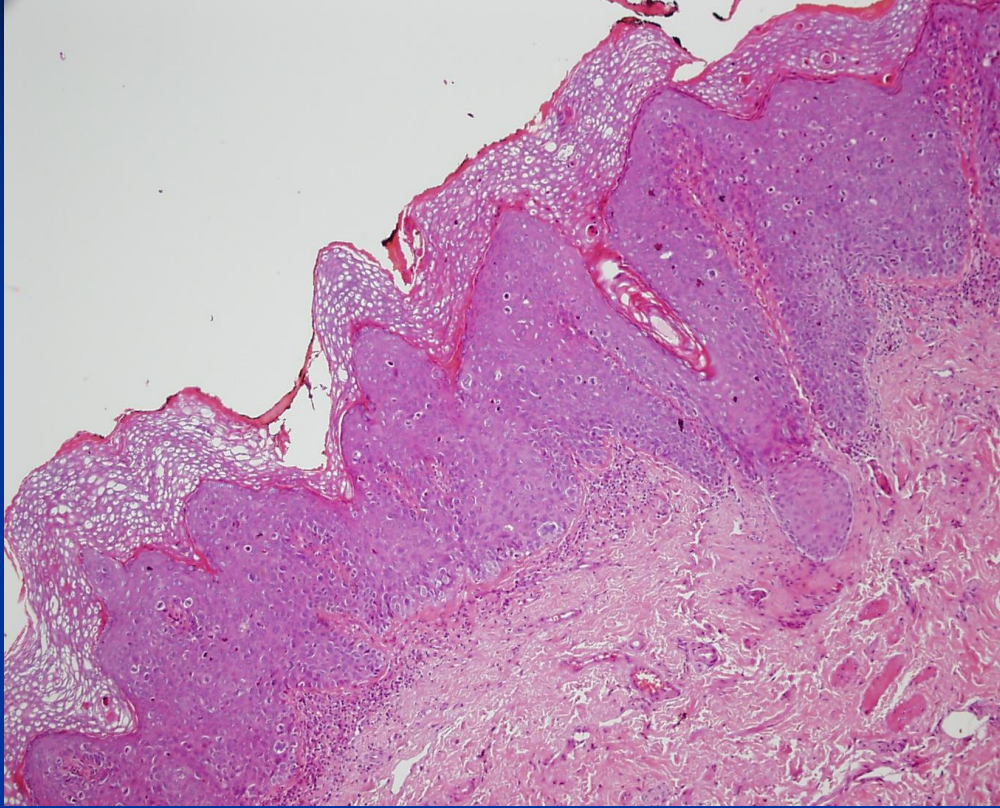
Diskeratotik hücreler, corp ronds (apoptotik hücreler), keratin incileri

Olađan VIN / Patolojik Özellikleri

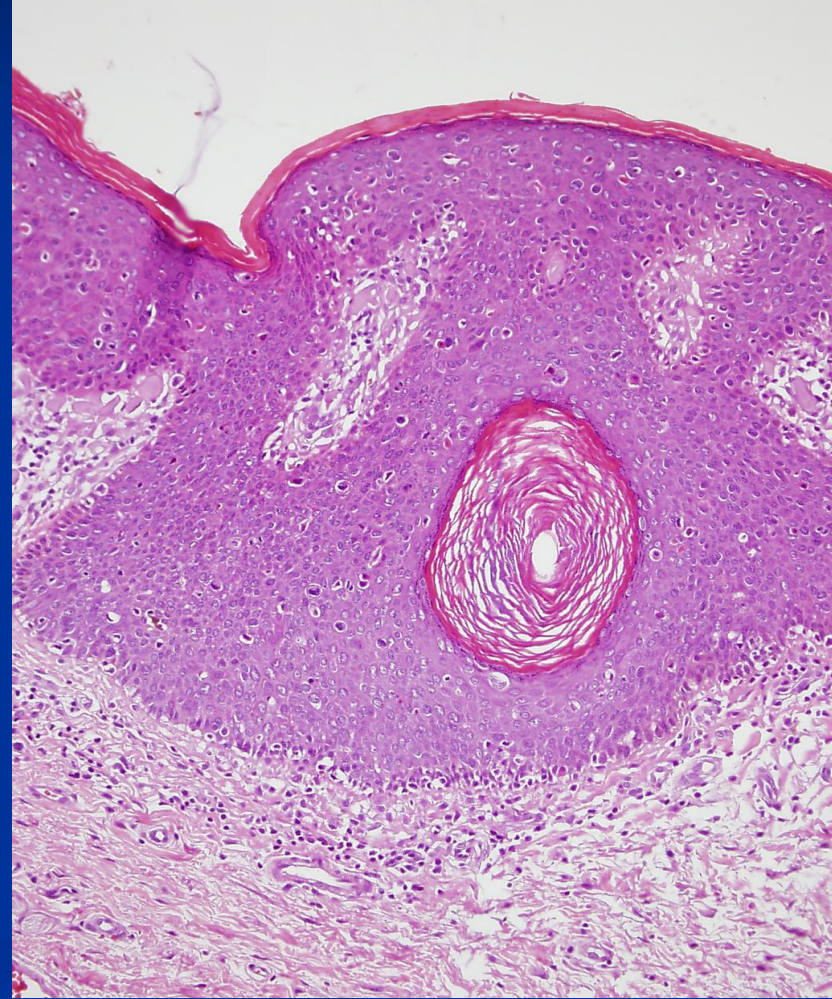


Epitel akantotitik, parakeratotik, hiperkeratotik veya bunların kombinasyonu

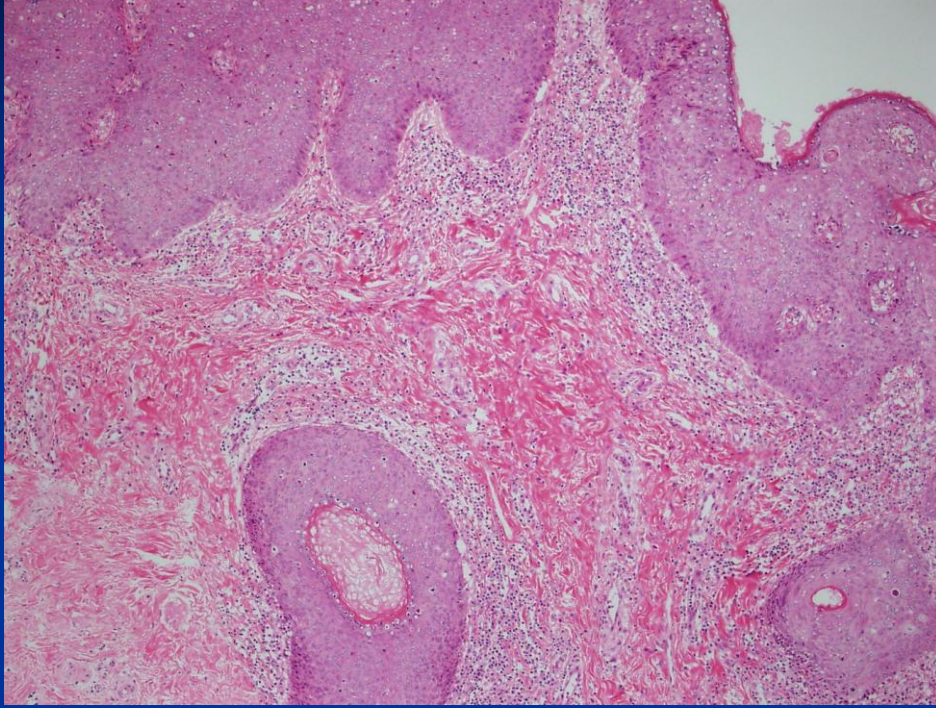
Olađan VIN / Patolojik Özellikleri



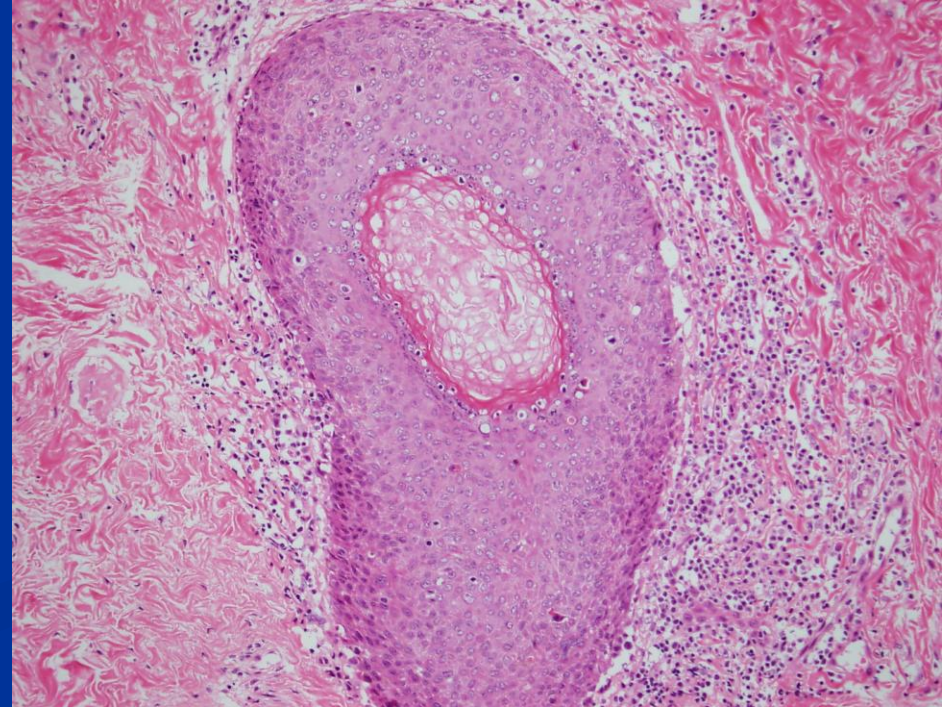
Epitel akantotitik, parakeratotik,
hiperkeratotik veya bunların
kombinasyonu



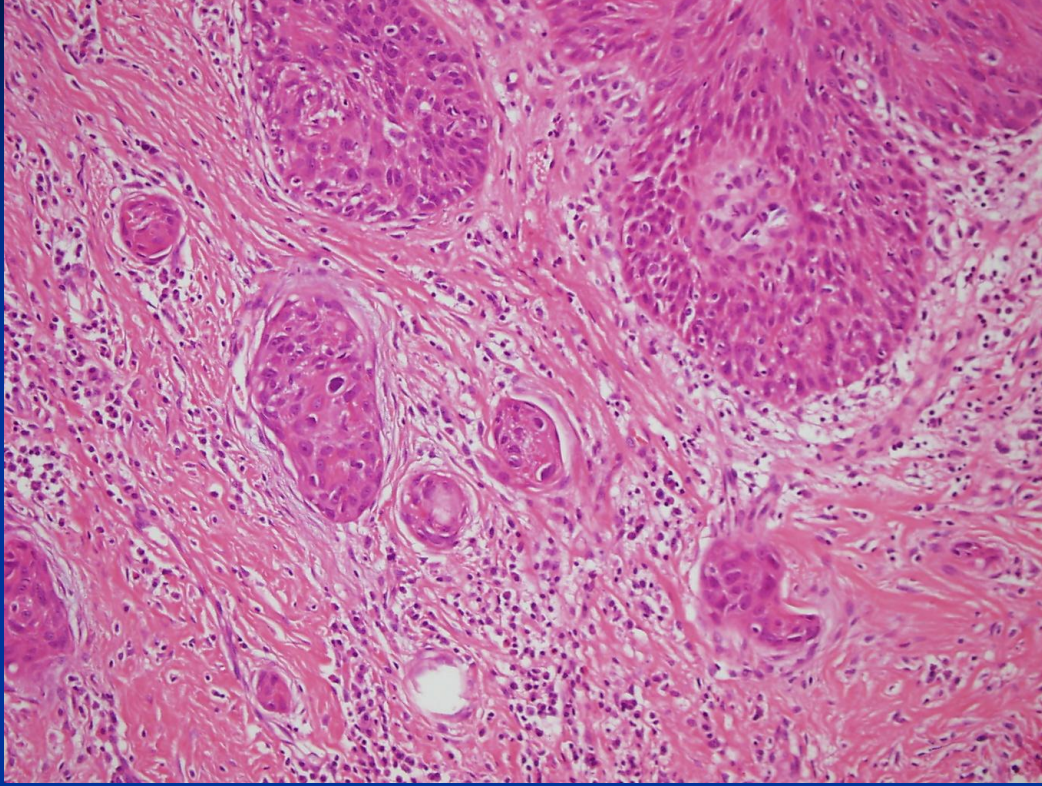
Olađan VIN / Patolojik Özellikleri



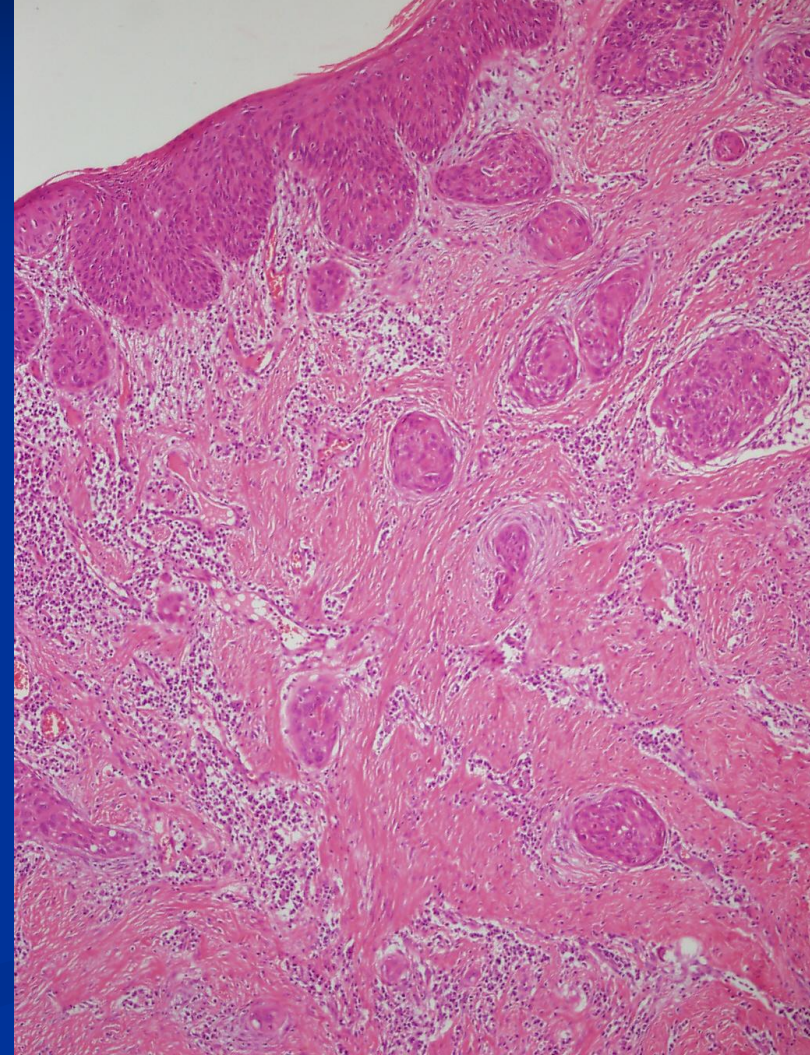
Deri adneksleri tutulabilir
İnvazyon ile karıştırılmamalıdır!



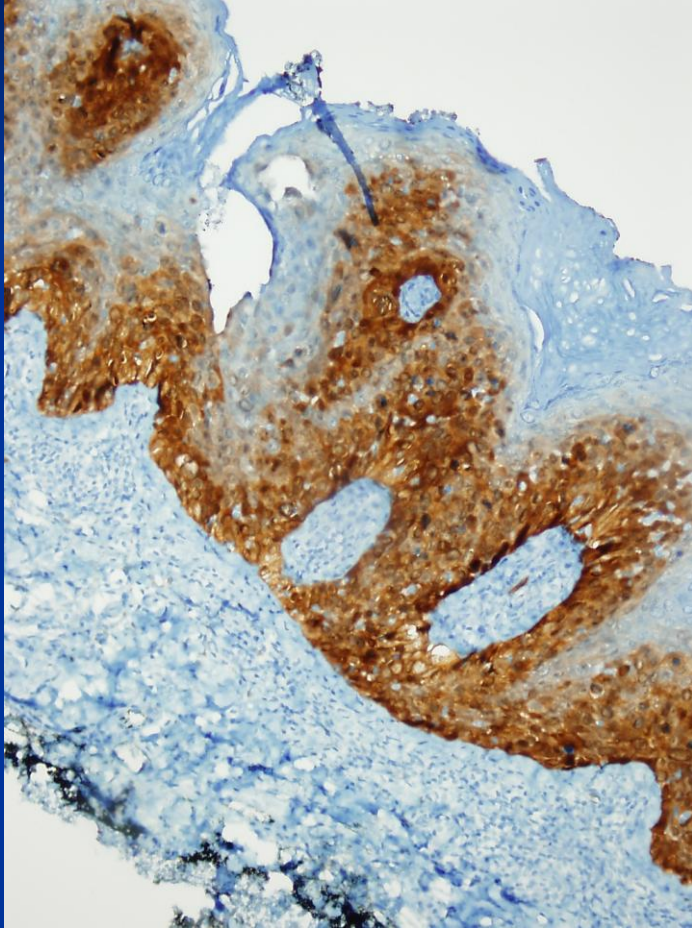
Olađan VIN / Patolojik Özellikleri



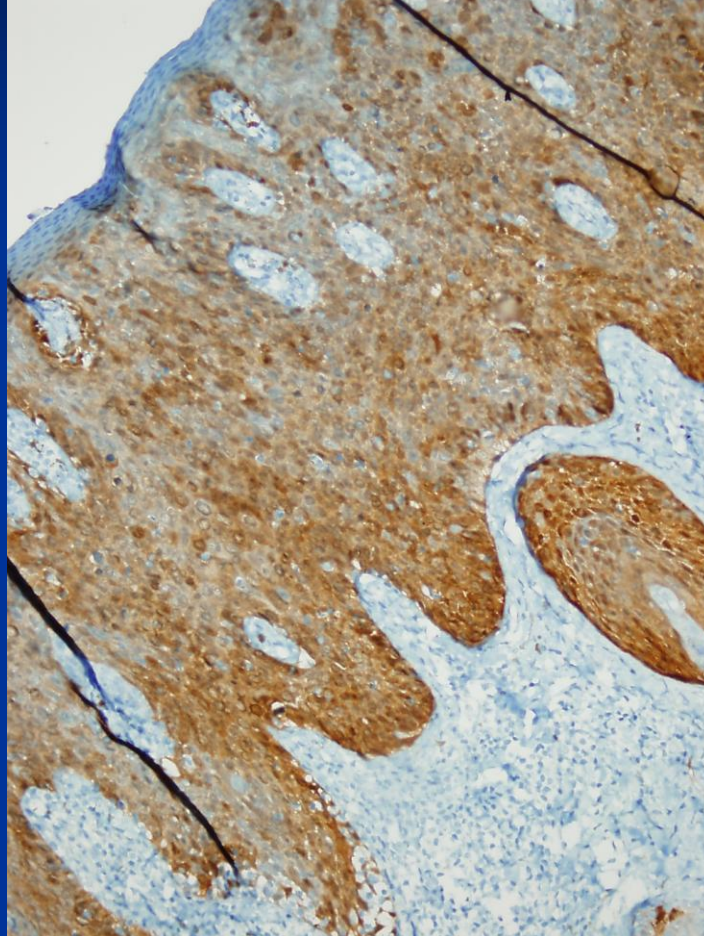
Deri adneksleri tutulabilir
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Olađan VIN / Patolojik Özellikleri

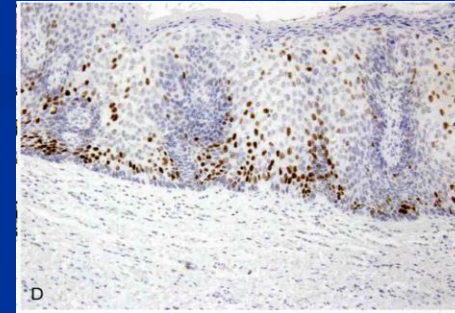
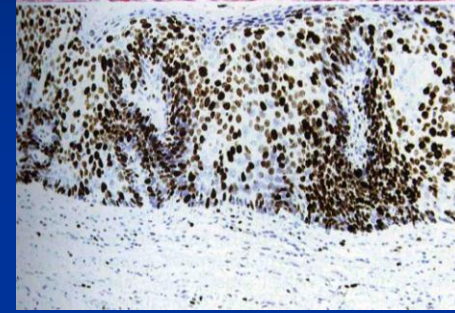


P16



Ki67

Tam kat



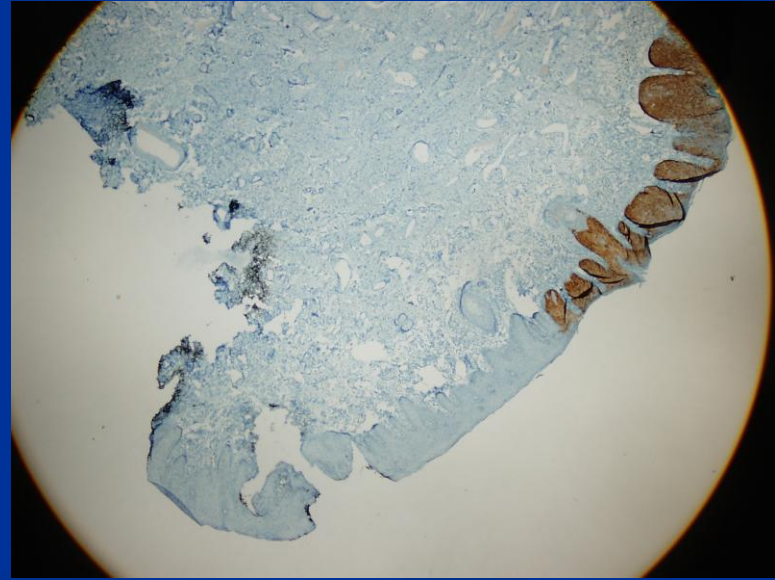
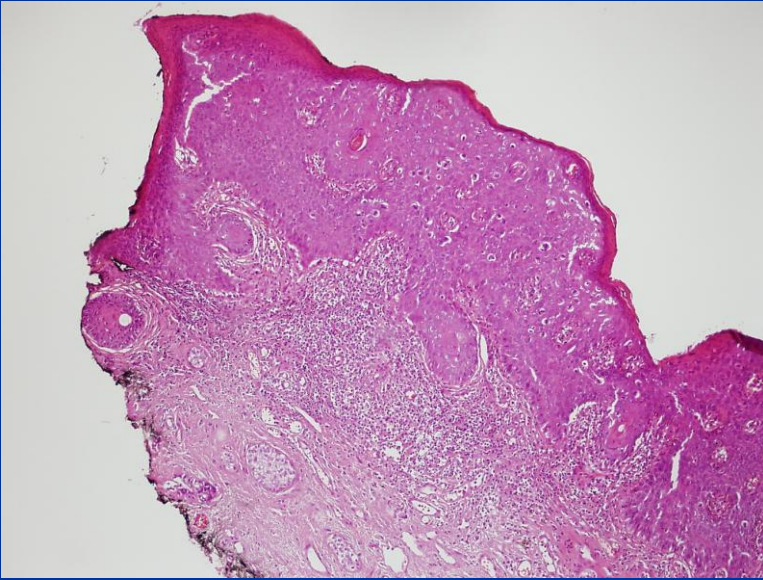
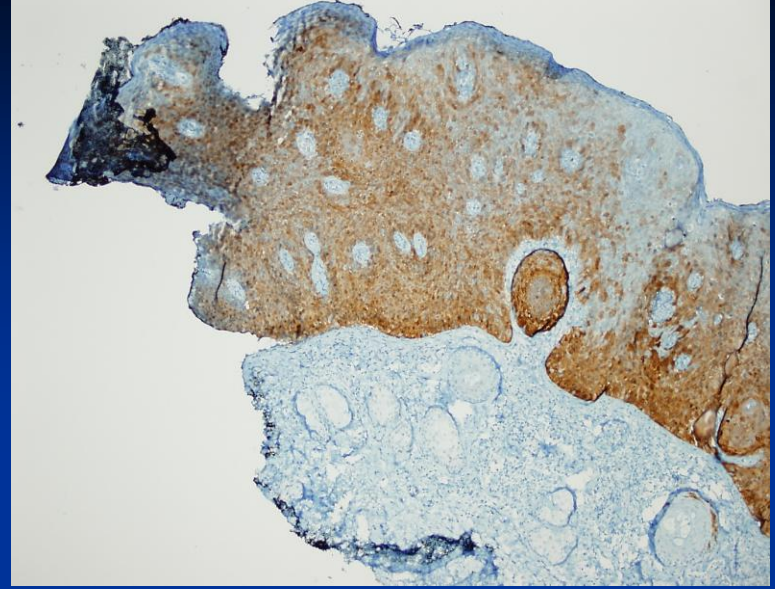
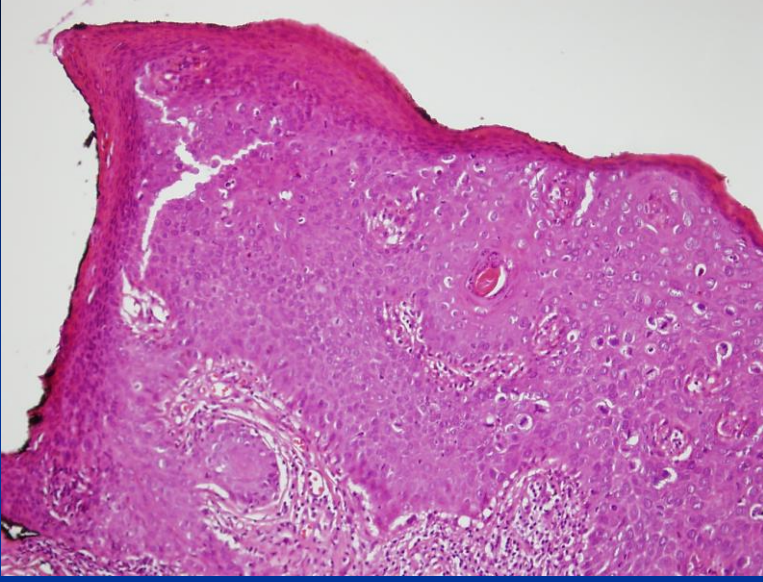
p53

Az olguda

Fokal-patchy

Kuvvetli sitoplazmik ve nükleer

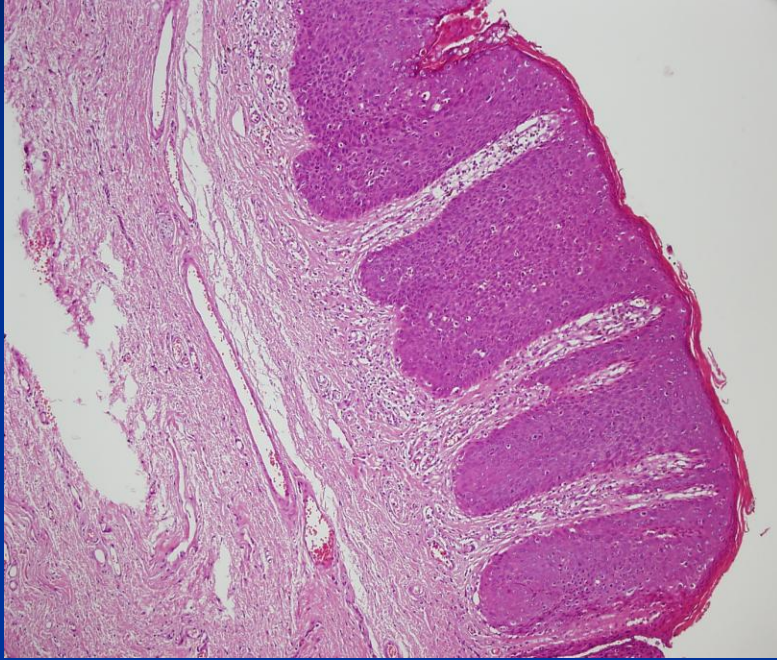
Olađan VIN / Patolojik Özellikleri



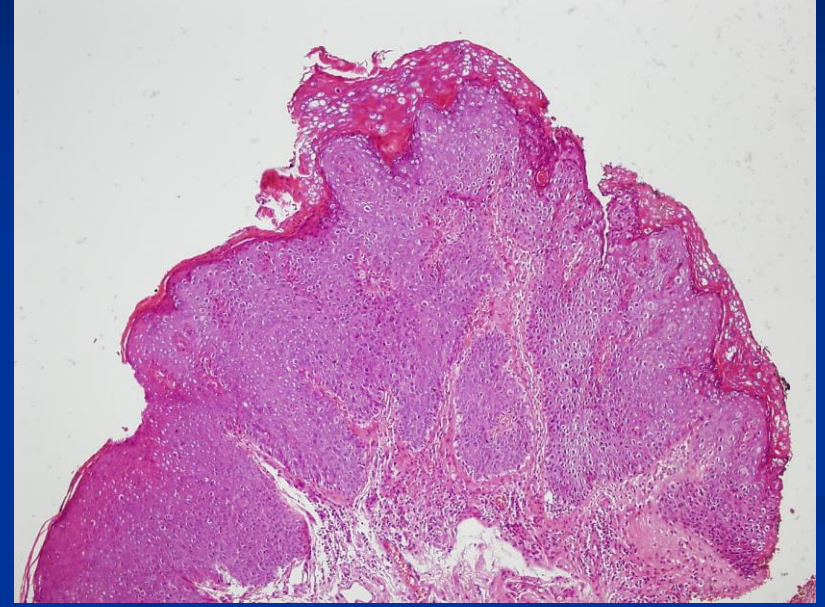
Rutinde immunhistokimya önerilmiyor

Sınır (+)'liđi için kullanılabilir.

Olađan VIN / Patolojik Özellikleri



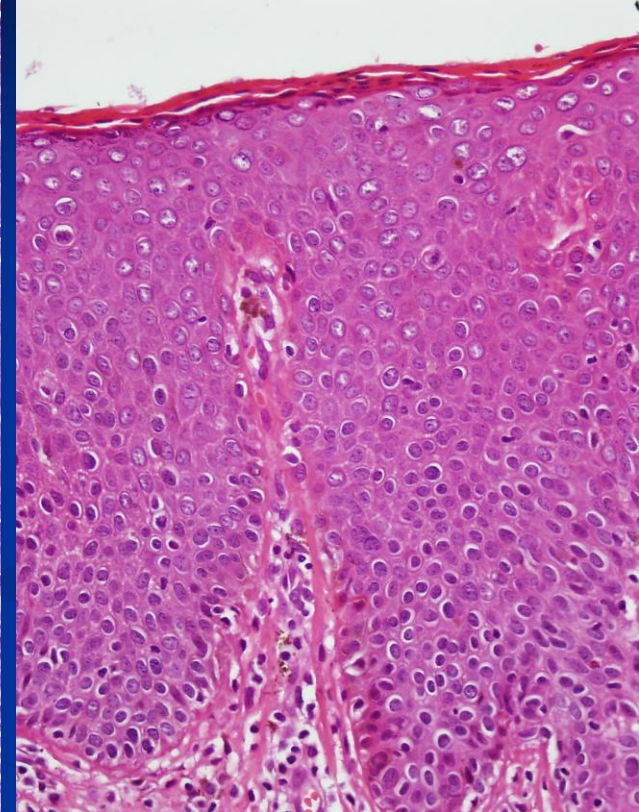
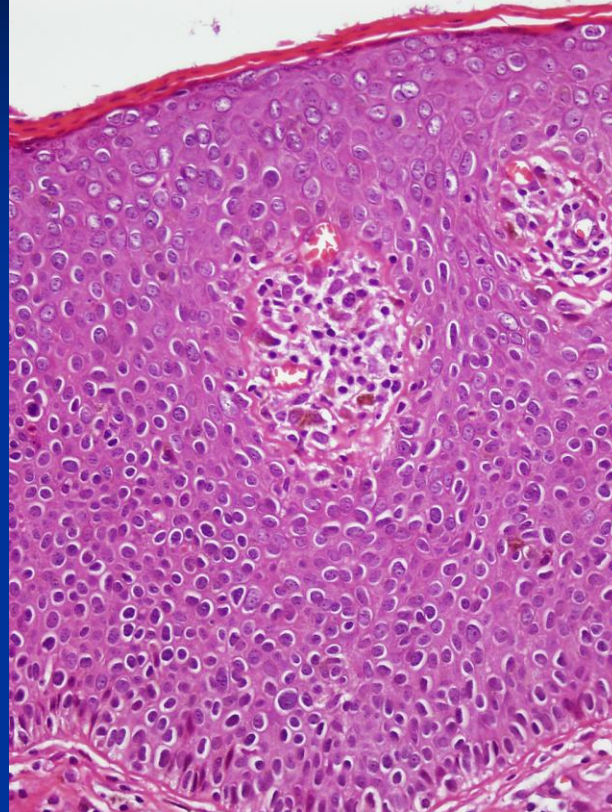
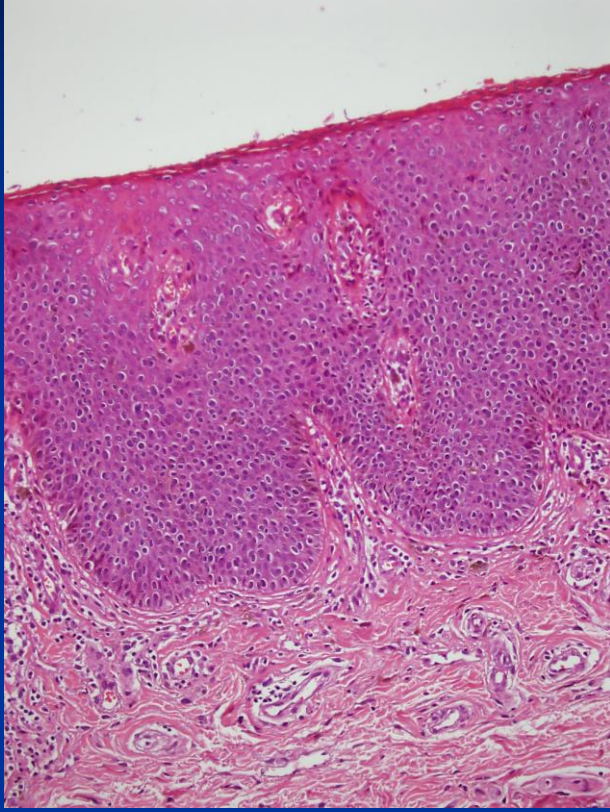
Bazaloid varyant



Warty (kondilamatöz)
varyant

mikst

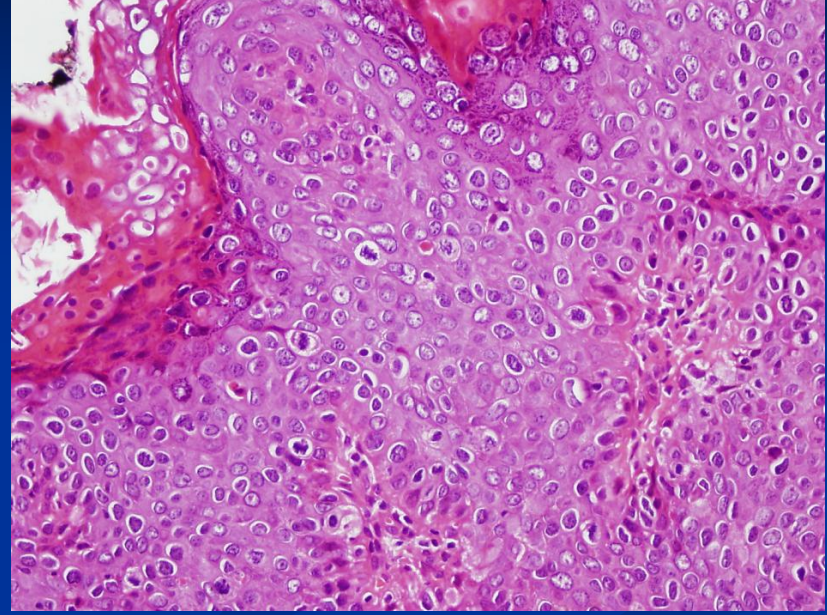
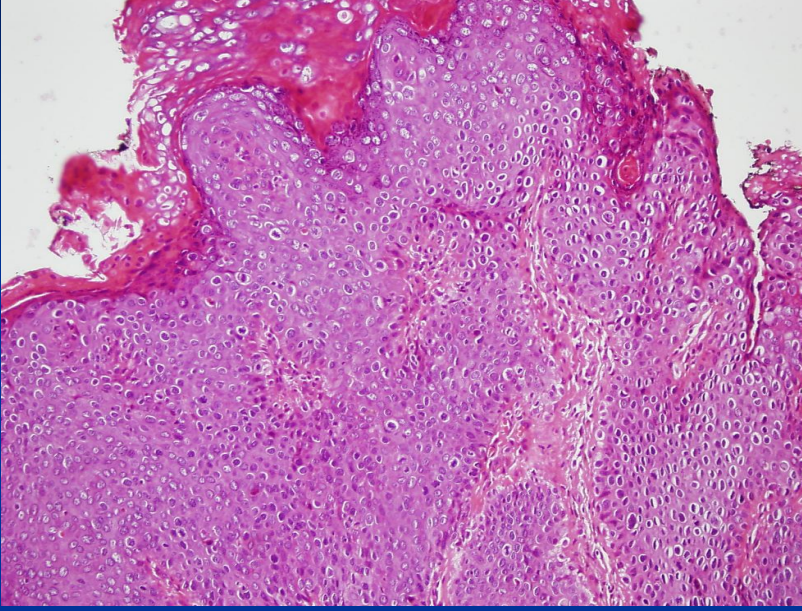
Olađan VIN / Patolojik Özellikler Bazaloid varyant



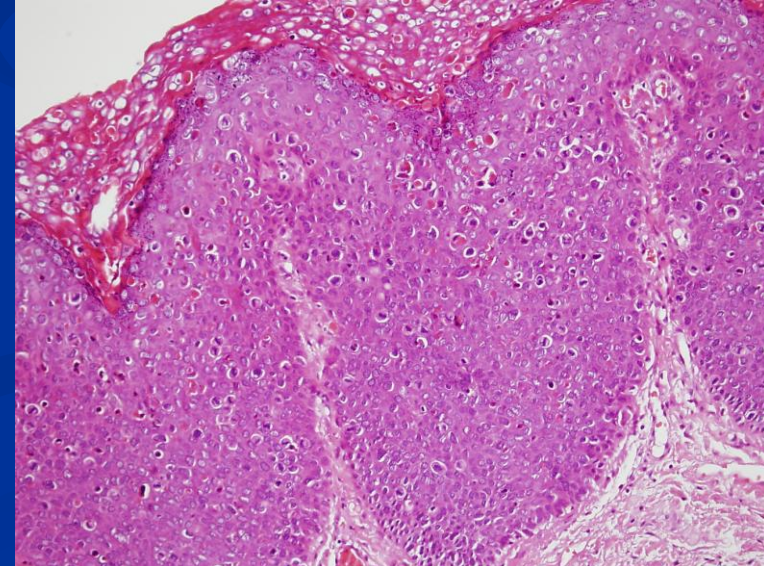
- Flat- bazen keratotik yüzey
- Küçük, uniform, bazaloid hücreler
- Dar sitoplazma, büyük hiperkromatik çekirdek, nükleol belirsiz

Olađan VIN / Patolojik Özellikler

Warty (kondilomatöz) varyant



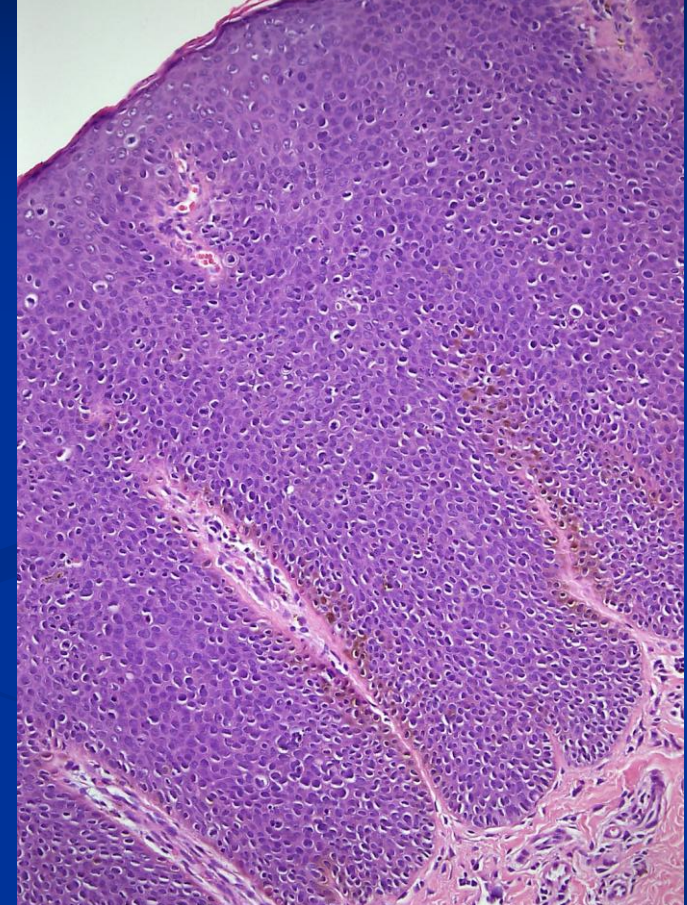
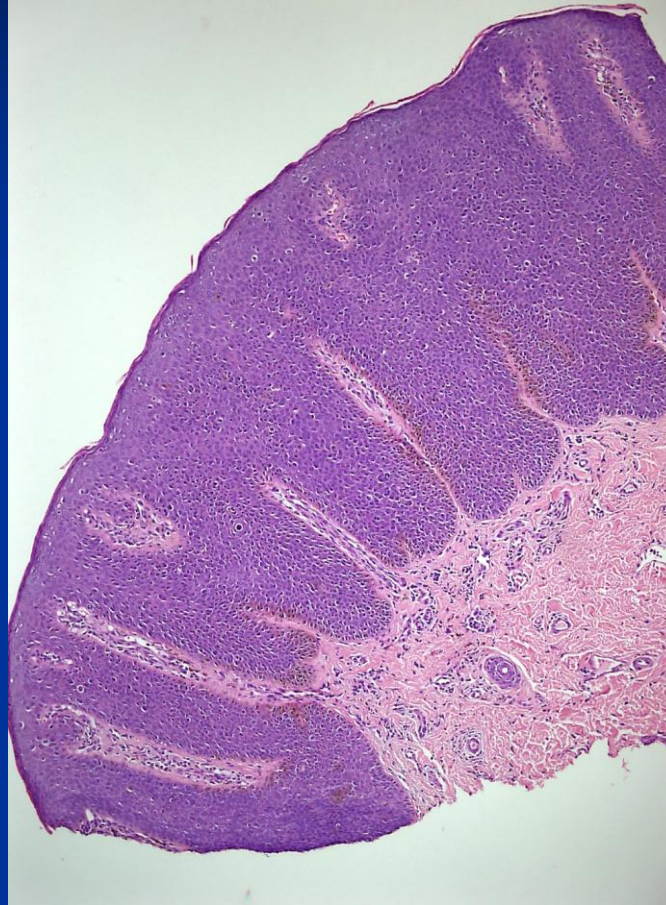
- Akantotik, ıkıntılı – warty yüzey
- Büyük hücre, belirgin pleomorfizm, multinükleer- koilositik hücreler
- Diskeratotik hücreler
- Yüzeyde matürasyon ve para/hiperkeratoz



Olađan VIN / Patolojik Özellikler

Bowenoid papülozis (dermatolog/dermatopatolog)

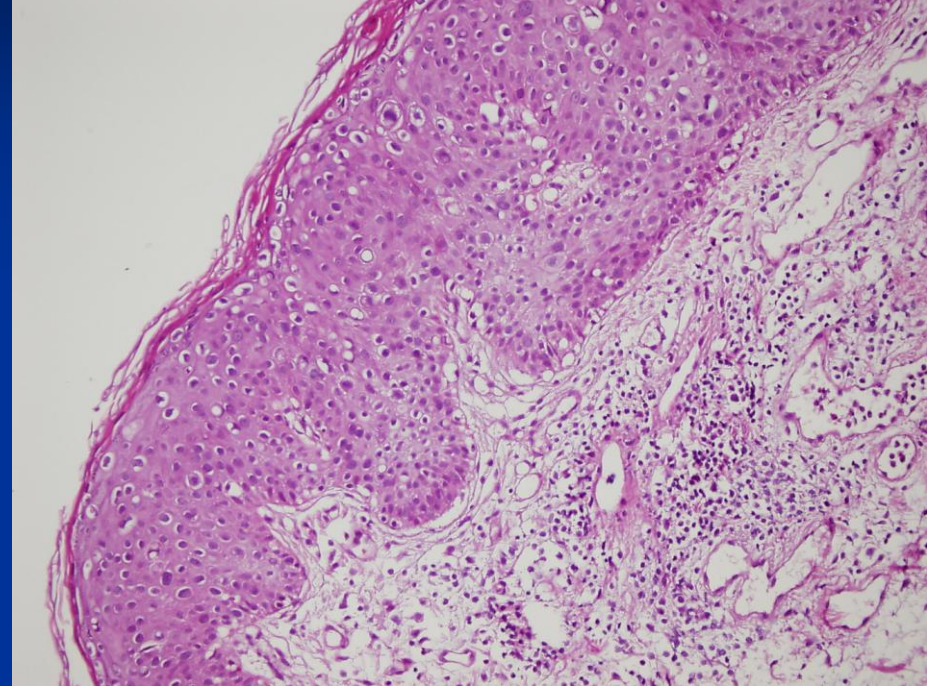
- Klinik:
 - Genç
 - Gebe-postpartüm
 - Multipl
 - Kırmızı-kahverengi papül
- Gidiş
 - Spontan regresyon
 - %20 SCC



- Mikroskopi VIN gibi
- BP/BD terimi uygun deđil (ISVVD)

Olađan VIN / Patolojik Özellikler

Pagetoid patern (pagetoid Bowen hastalıđı)

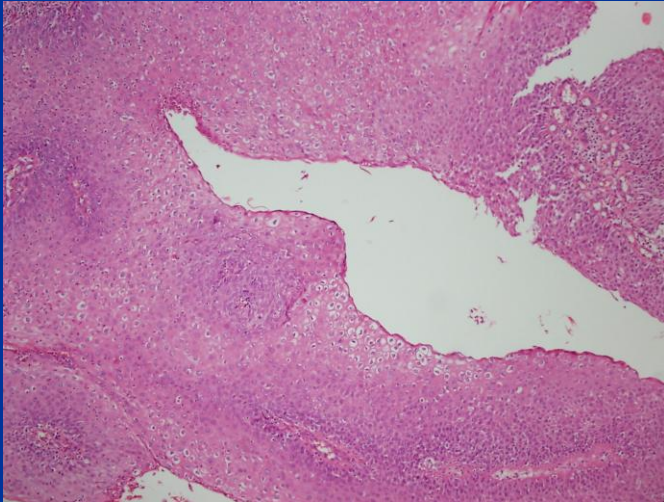
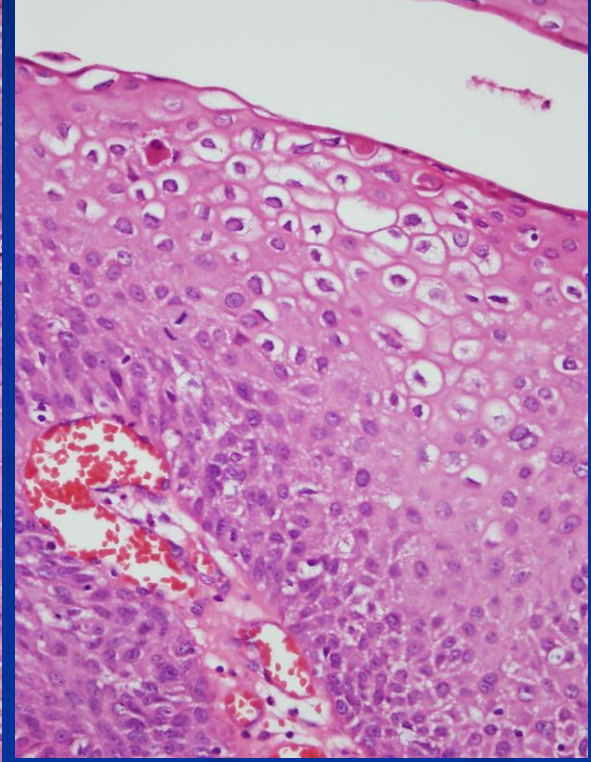
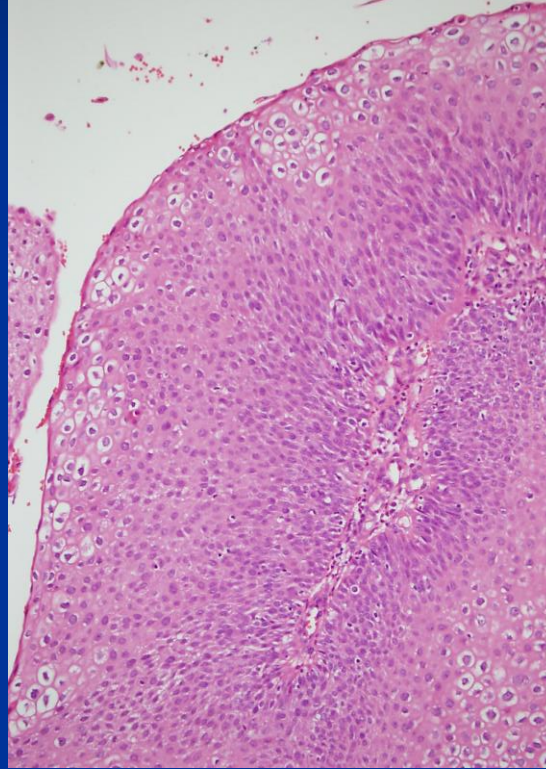
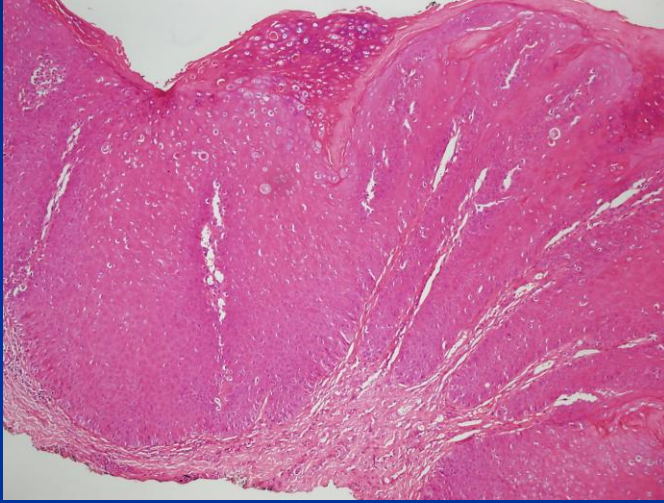


- Nadir
- Neoplastik, soluk-genişce sitoplazmalı keratinosit yuvaları
- CK 7 (+), CEA (-)

Olađan VIN / Patolojik Özellikler

Kondilom ile birlikte VIN?

VIN 1?



- Tipik yada flat kondilomda
- Bazal ve parabazal tabakada displastik hücreler

Olađan VIN / Patolojik Özellikler

VIN 1 kullanmayın!

- Tanı tekrarlanabilir deđil
- Birçođu reaktif yada dif VIN
- Kondilom dışında tanısı çok az
- Premalign kabul etmek gereksiz

VIN 1 kullanabilir!

- Klinik için kolay anlaşılır
- ICD9 kodlama için uygun
- Atipik kond. ak., flat. kond. ak. terimlerine gerek kalmaz
- Srodon ve ark %42 olguda high risk HPV (%6'sı HPV16)

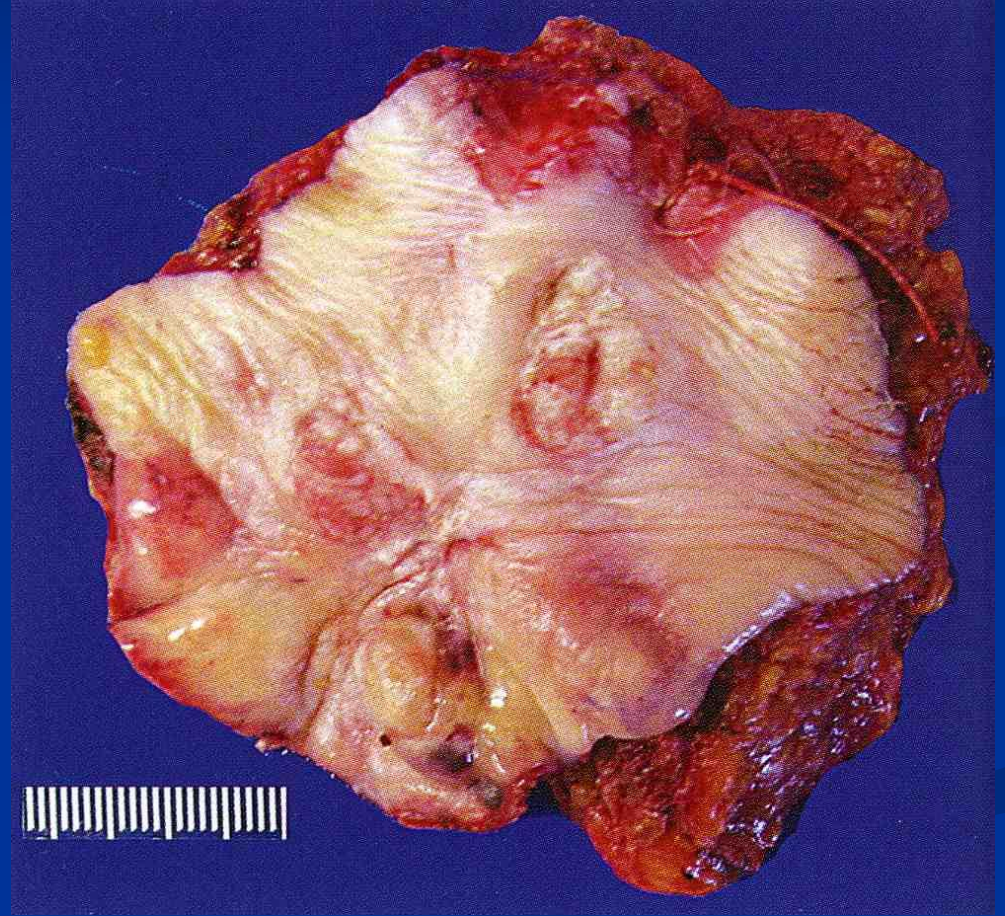
Jinekopatoloji alıřma grubunun grüşü?

Olađan VIN/ Davranıř

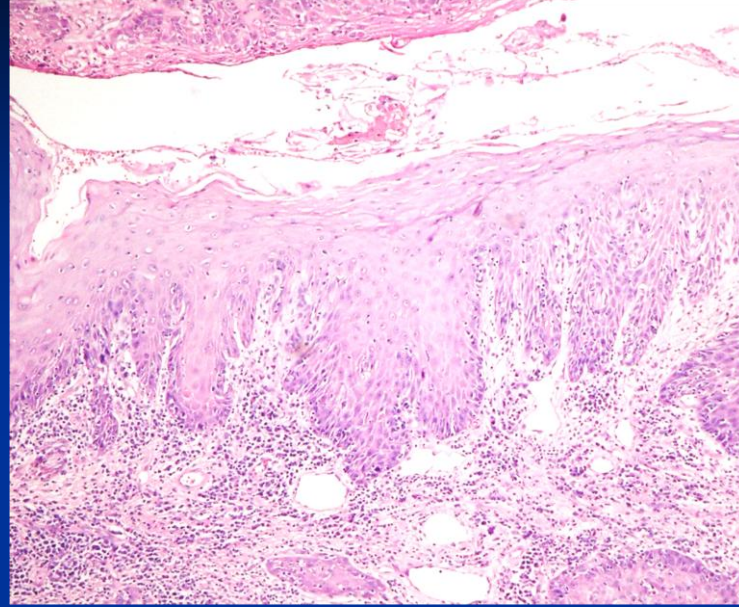
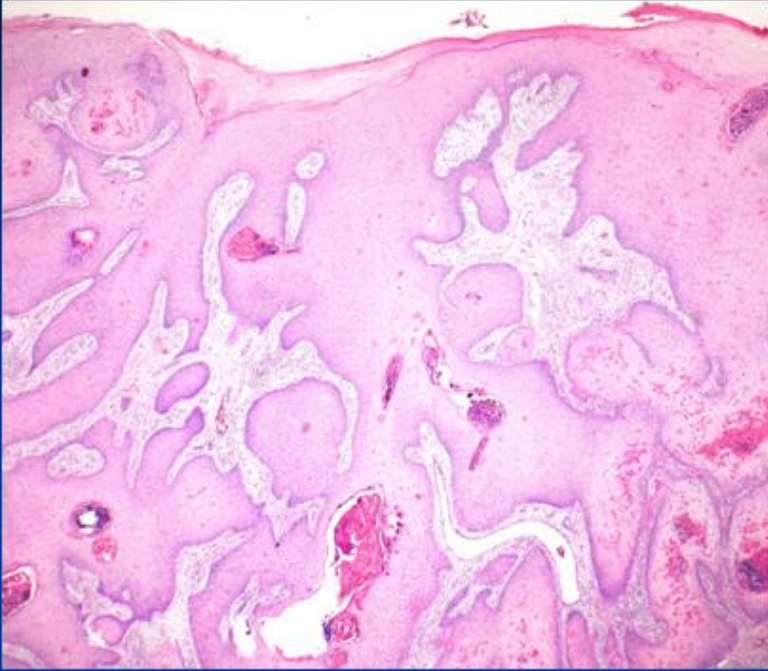
- Lokal tedavi
 - 1/2'sinde → nüks veya persistans
 - Nüks: multifokalite, pozitif sınır, lazer tedavi ile iliřkili
- SCC geliřimi
 - Tedavili hastalarda %3-4
 - Tedavisiz hastalarda %10-15
 - Postmenopoz, immunsupresyon ile iliřkili
- Spontan regresyon: postpartum ve gebelerde (BP)

Diferansiye VIN (Simpleks VIN / Klinik Özellikleri

- VIN'lerin %2-10'unu oluşturur
- D-VIN'lerin %60'ı SCC ile birlikte
- HPV (-) SCC'lerin öncü lezyonları
- Olağan tipten daha fazla invazyon riski var

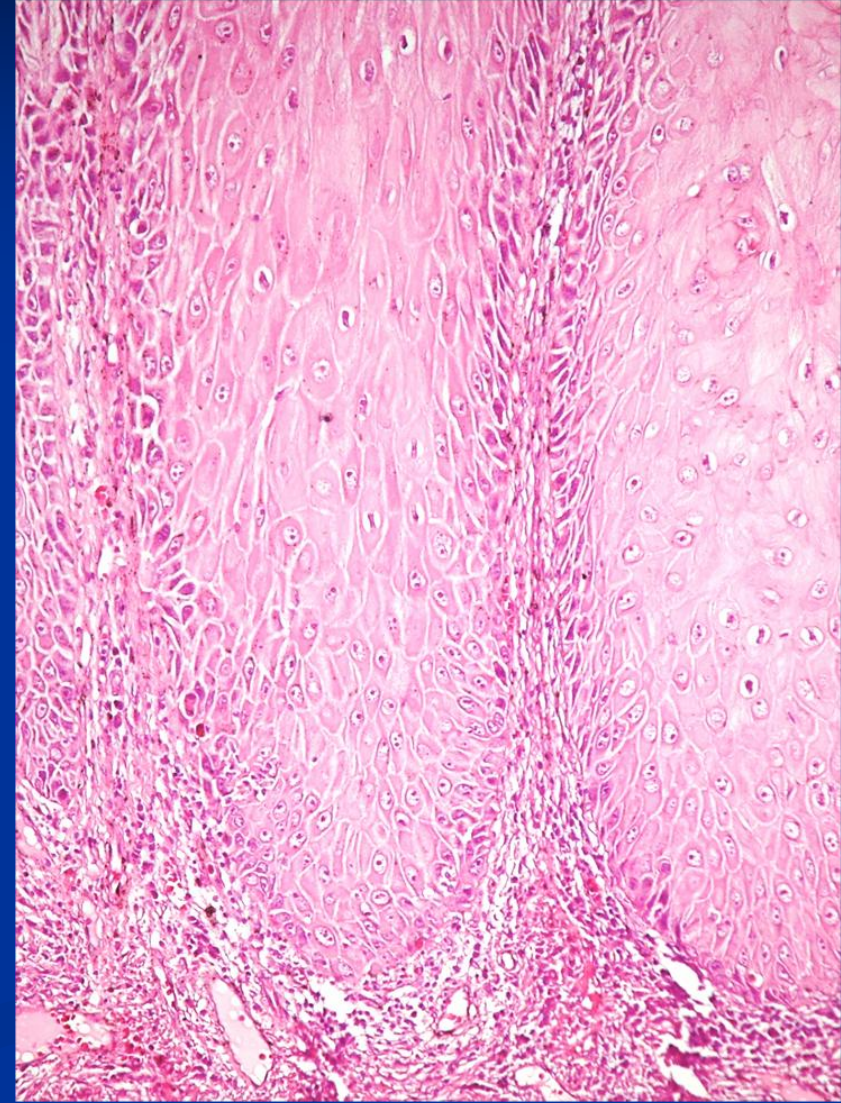
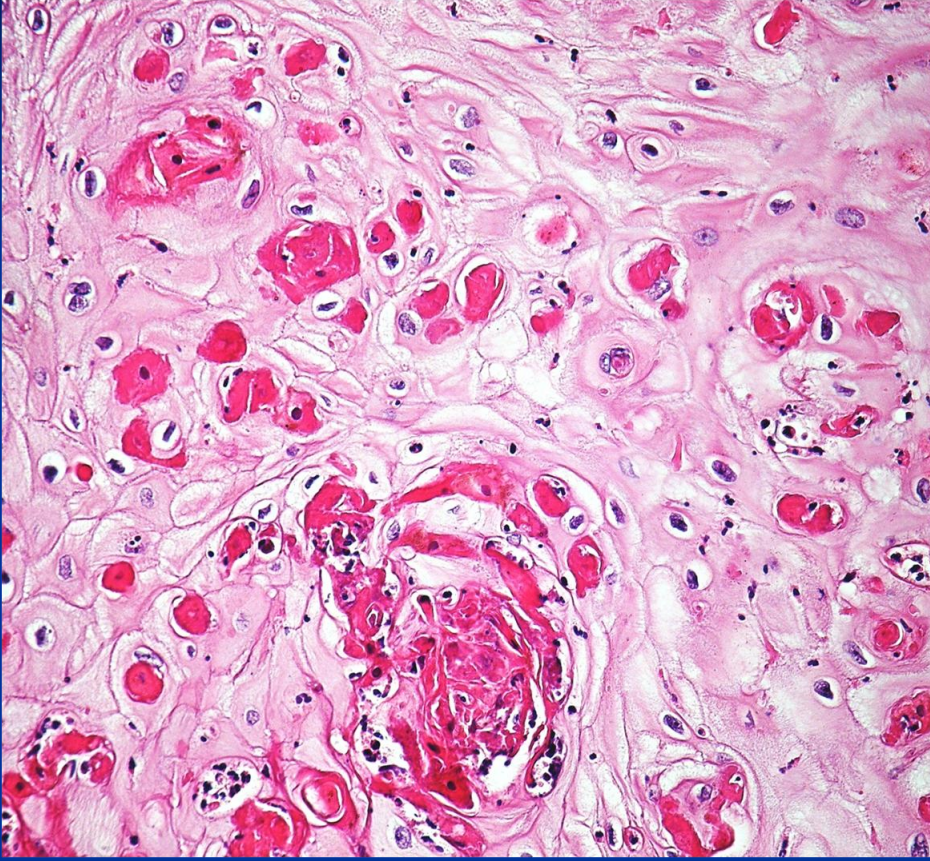


Diferansiye VIN/ Patolojik Özellikler



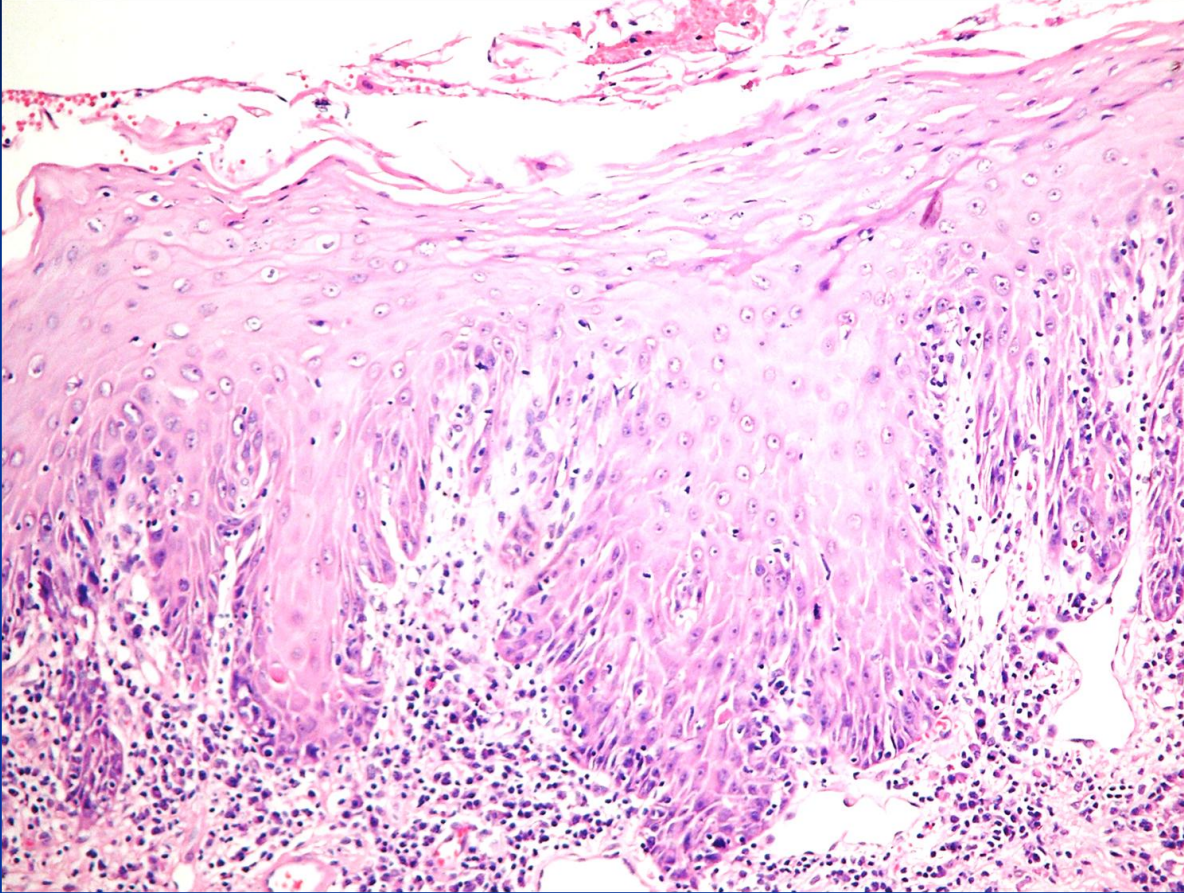
- Underdiagnoz sık
- Epidermis kalın, parakeratotik
- Uzamış dallanan rete ridge'ler

Diferansiye VIN/ Patolojik Özellikler

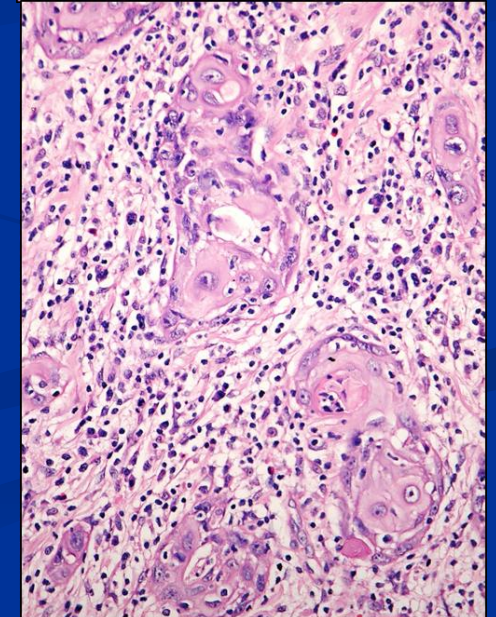
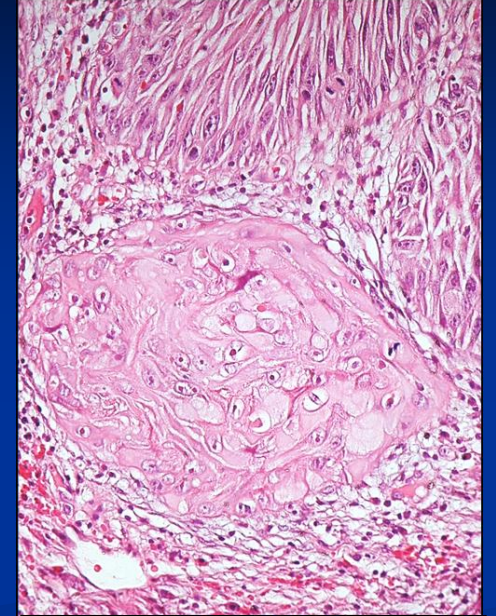


- Geniş eozinofilik sitoplazmalı skuamöz hücreler, diskeratotik hücreler
- İntersellüler bridgeler belirgin, veziküler çekirdek, makro nükleol

Diferansiye VIN/ Patolojik Özellikler



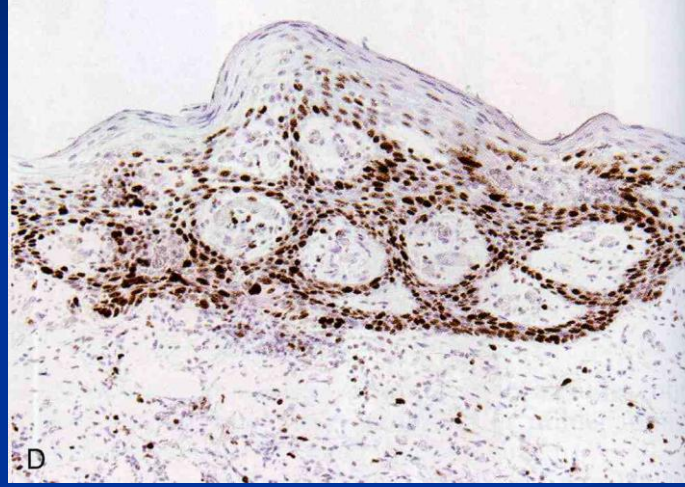
- Bazal hücrelerde atipi, mitoz
- LS, LSC, skuamöz hiperplazi ile birlikte
- Bu hastaların takibi iyi yapılmalı!
- Mikroinvazyon ile birlikte olabilir!



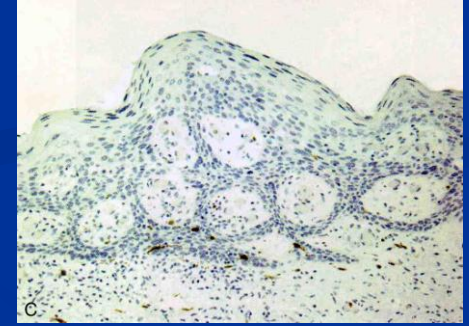
Diferansiye VIN/ Patolojik Özellikler



Kuvvetli p53
(+)'liđi



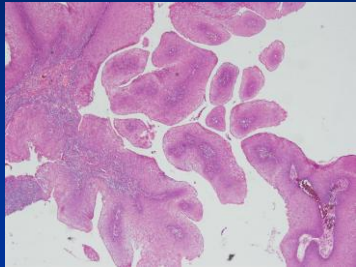
Ki67
(+)'liđi
bazalde



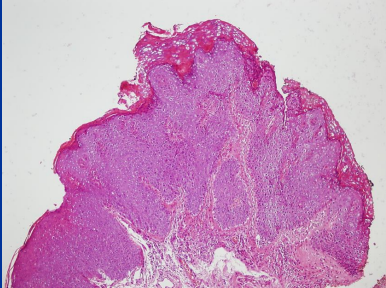
P16 (-)

Ayrırcı tanı histolojik kriterler ile yapılmalı

Ayırıcı Tanı / Kondilom



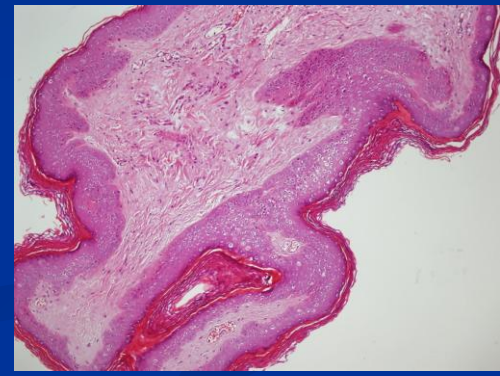
KA



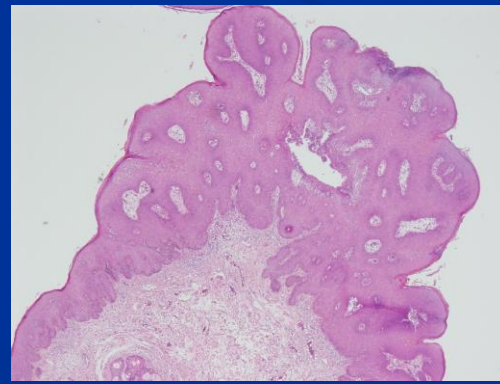
Warty VIN



Fibroepitelyal folip

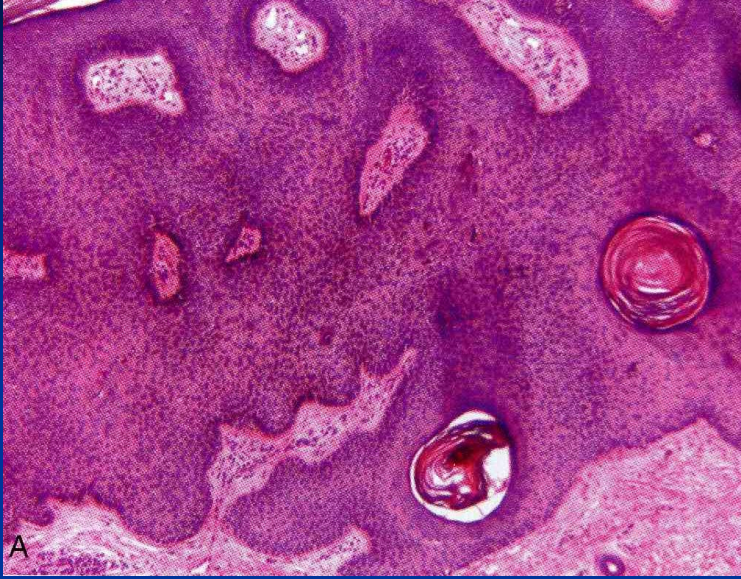


Regrese kondilom



SK benzeri

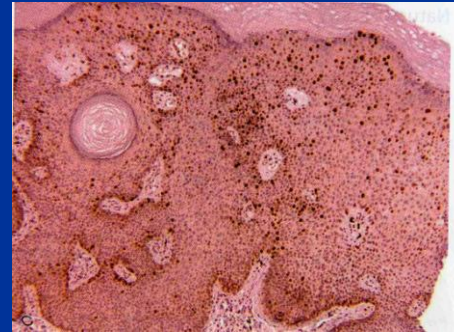
Ayırıcı Tanı / Kondilom



SK benzeri



P16

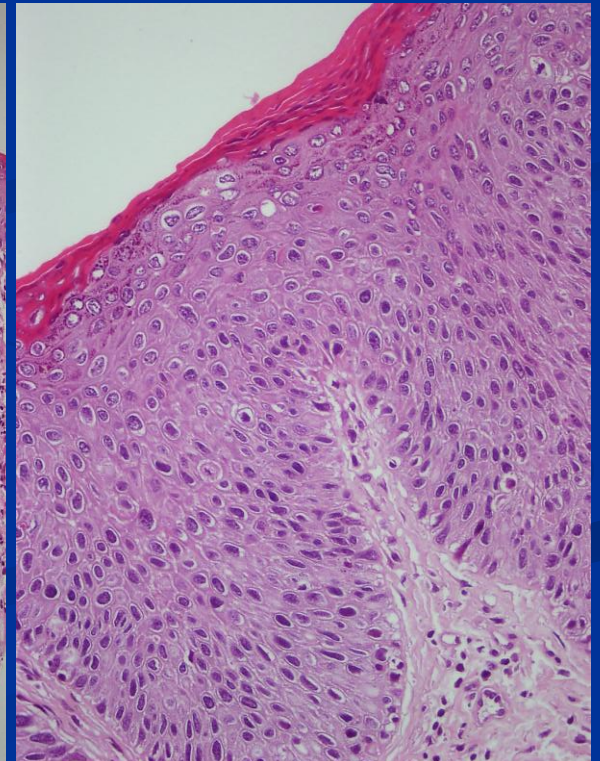
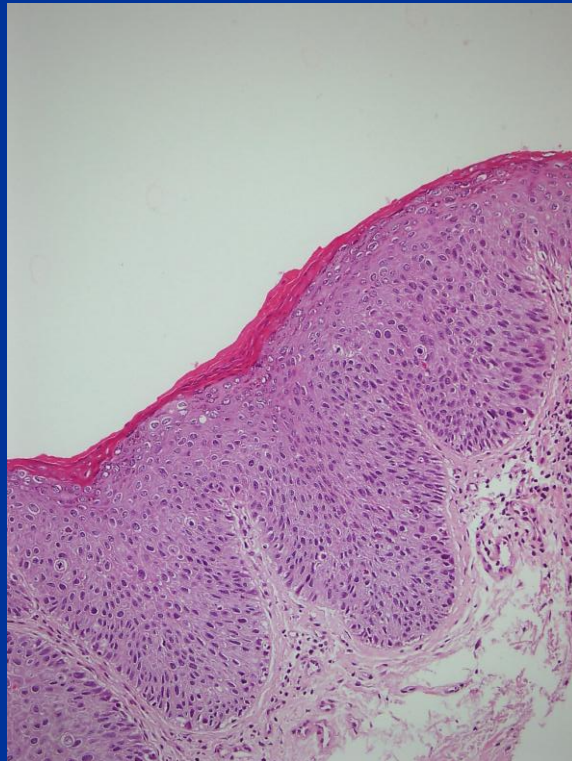
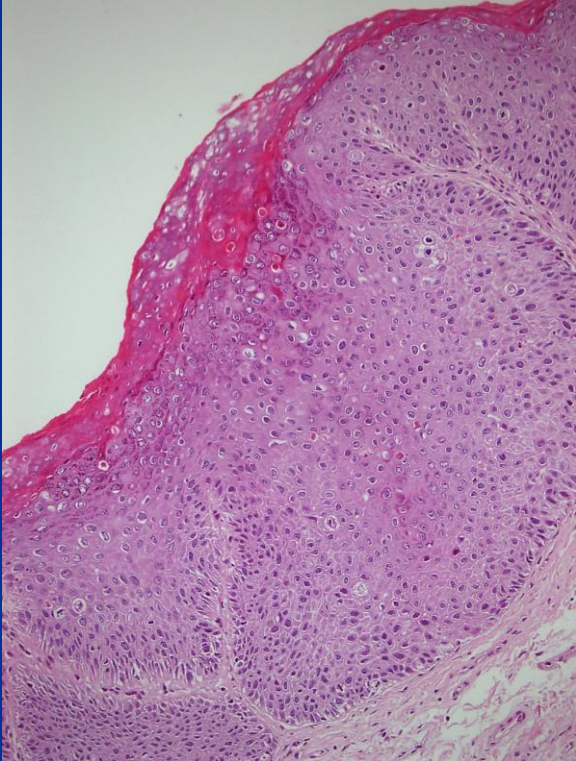
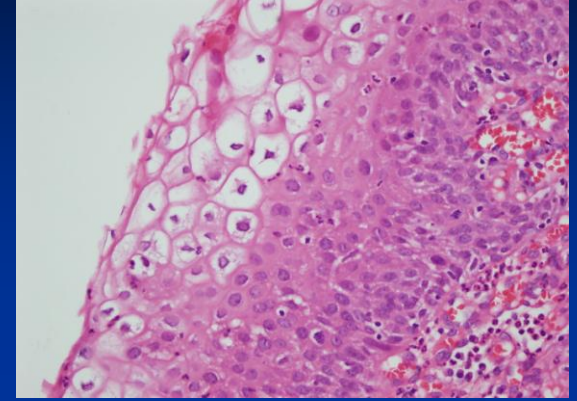


Ki67

Koilositik deęişiklik görülmeyen lezyonlarda

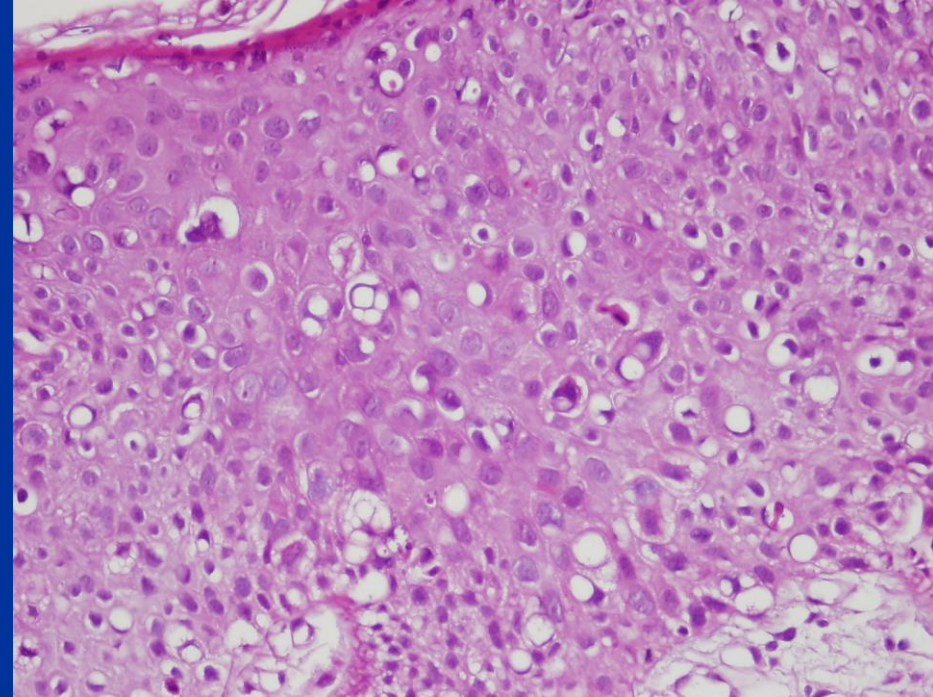
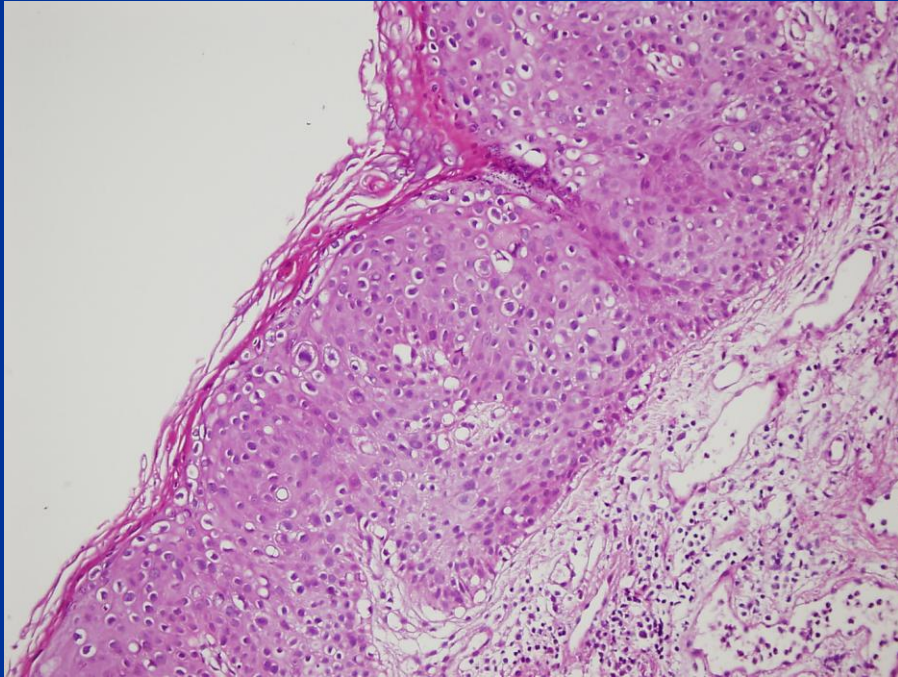
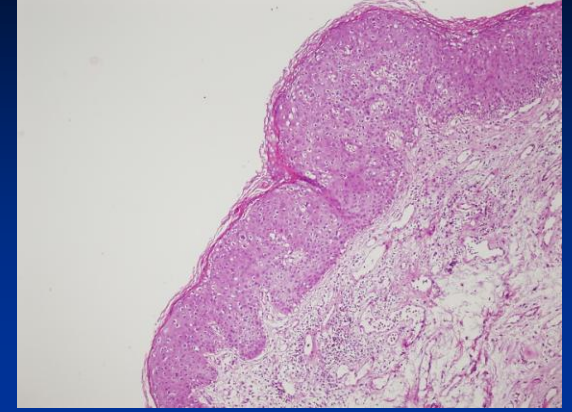
Ayırıcı Tanı / flat kondilom? VIN ?

- VIN 1 ?
- VIN 2? Önemli olan atipinin değerlendirilmesi

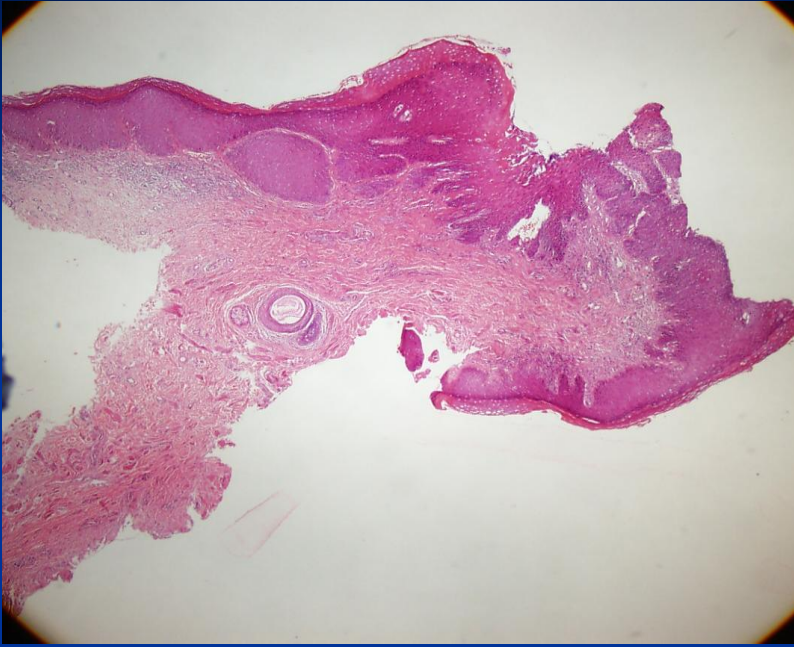


Ayırıcı Tanı / flat kondilom? VIN ?

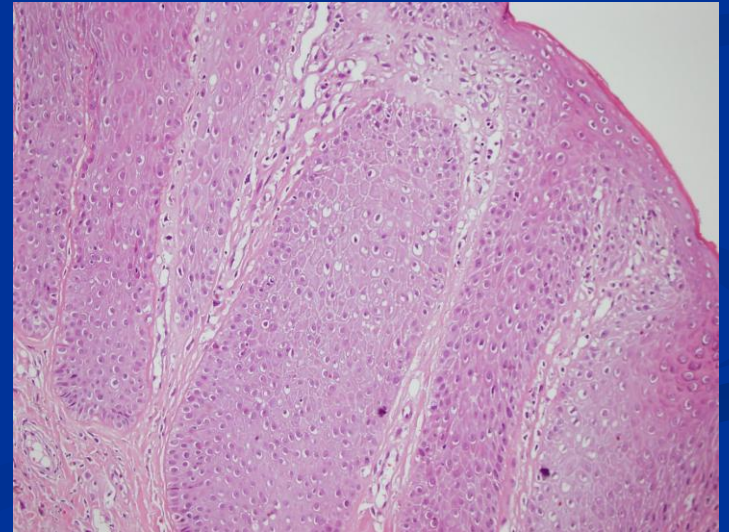
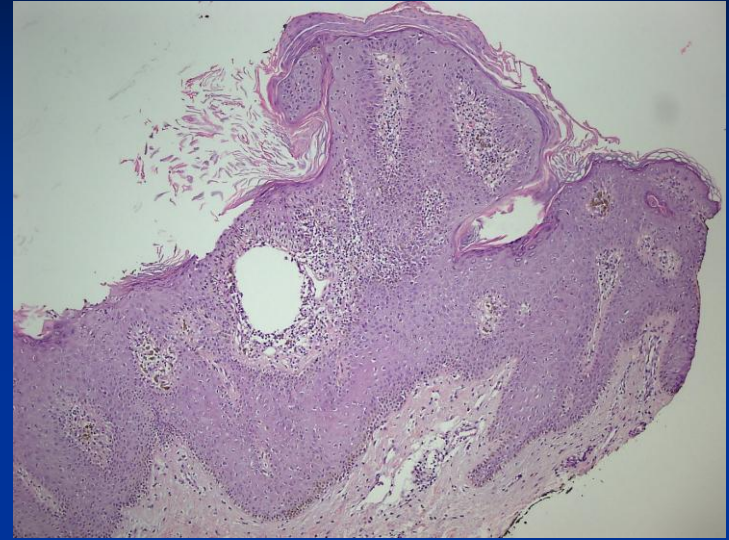
- VIN 1 ?
- VIN 2? Önemli olan atipinin değerlendirilmesi



Ayırıcı Tanı / flat kondilom?

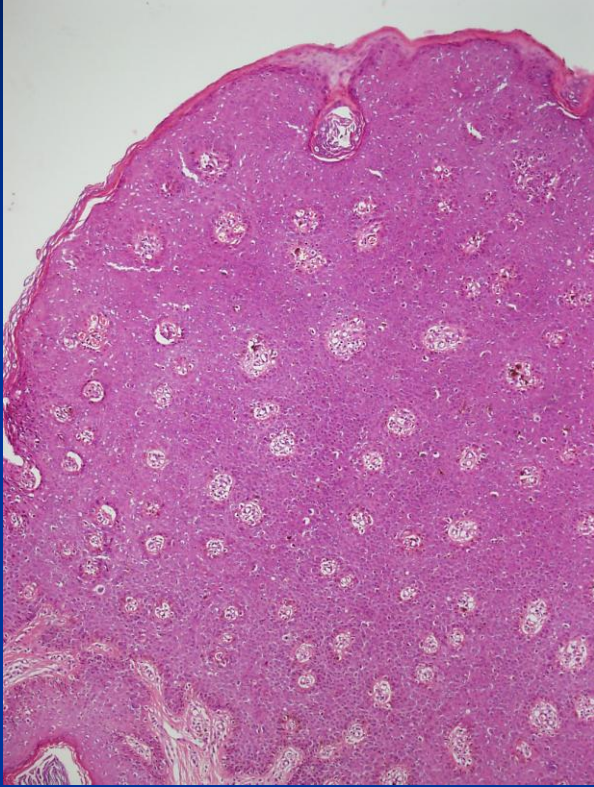


LSC

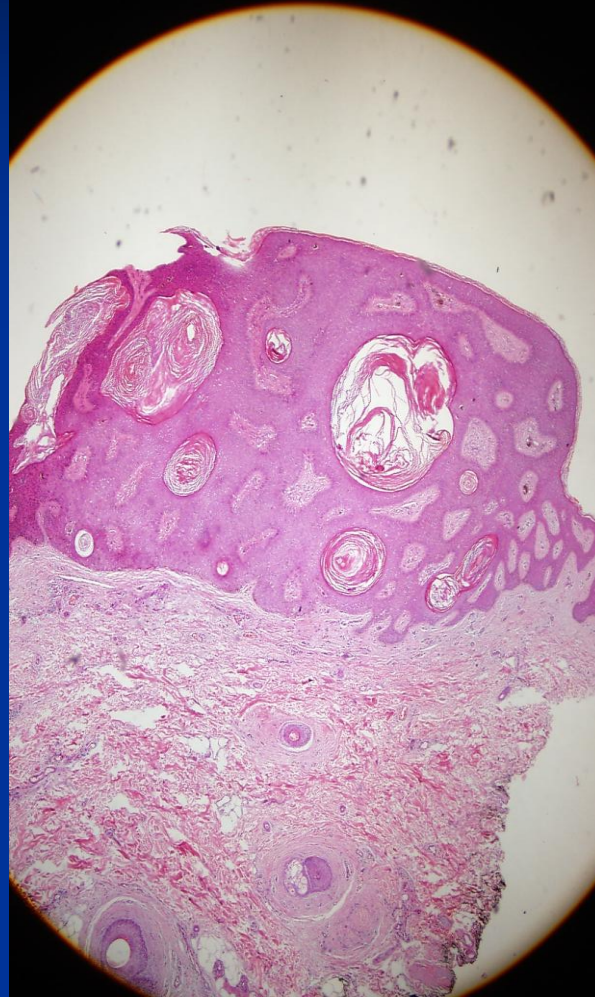


Kronik dermatoz

Ayırıcı Tanı / Olağan VIN



VIN

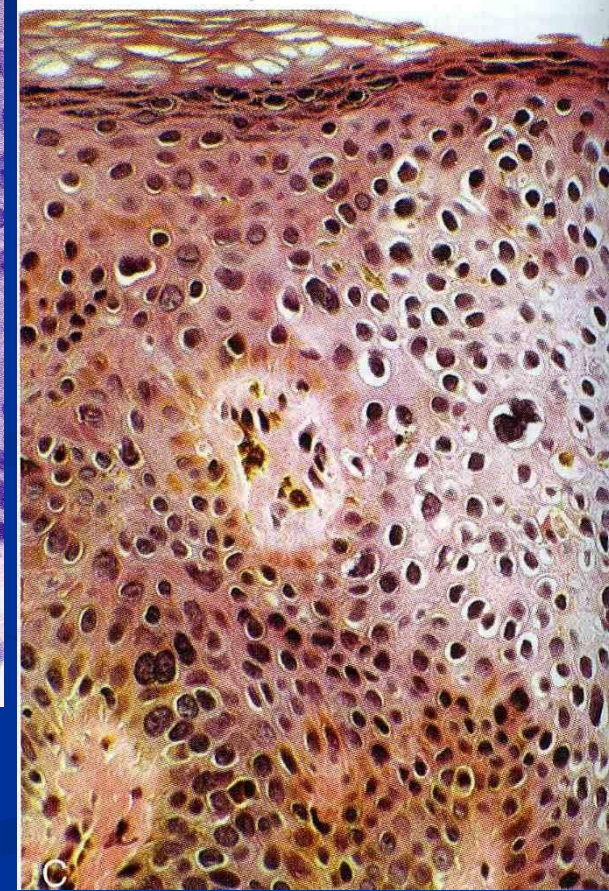
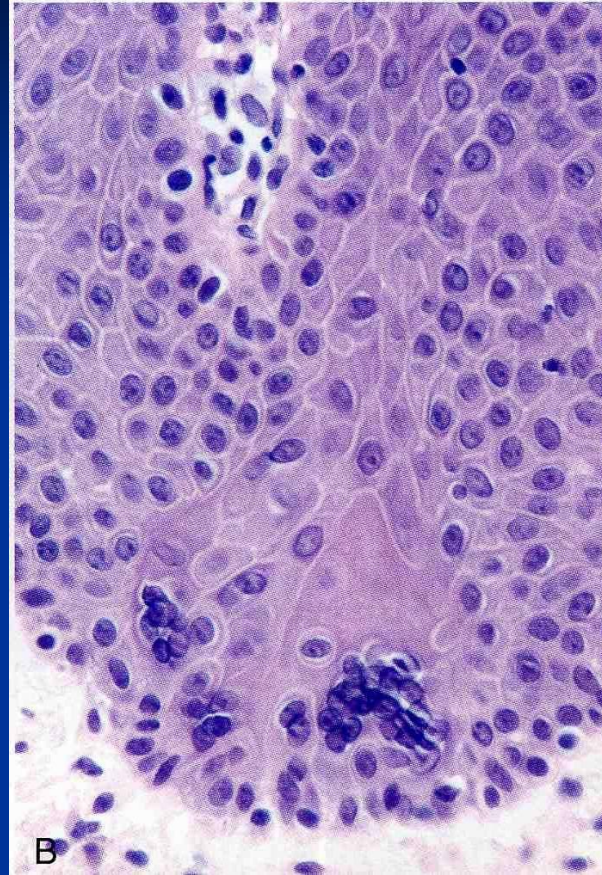
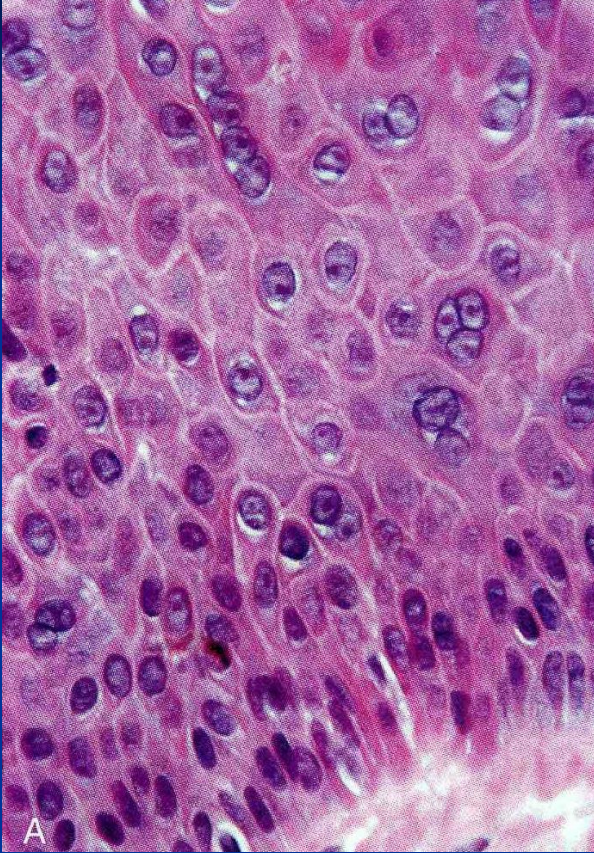


SK



SK

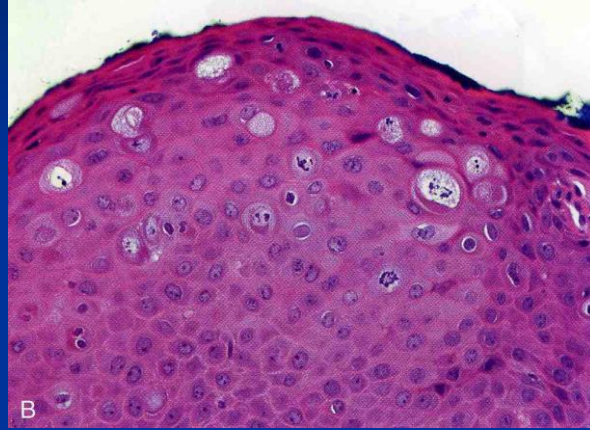
Ayırıcı Tanı / Olađan VIN



Vulvanın multinükleer atipisi

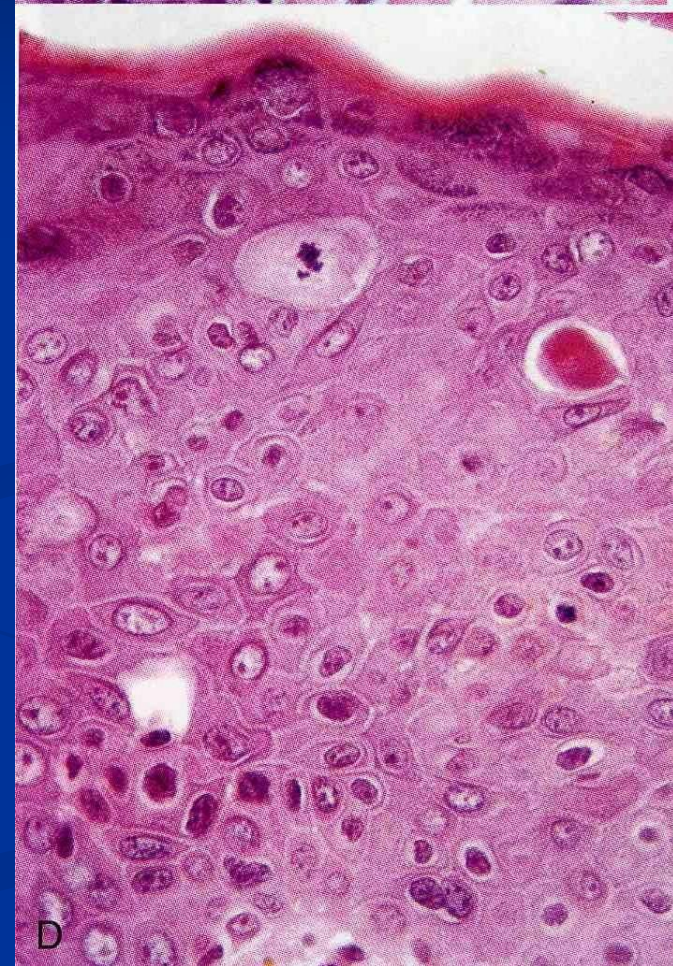
VIN

Ayırıcı Tanı / Olađan VIN



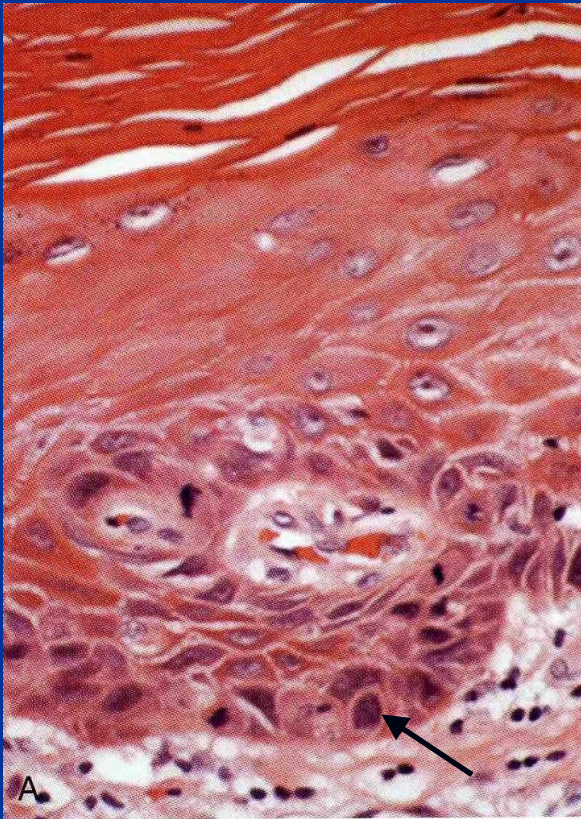
Psödo Bowenoid papülosis

Kondilom varyantı (HPV 13-32)

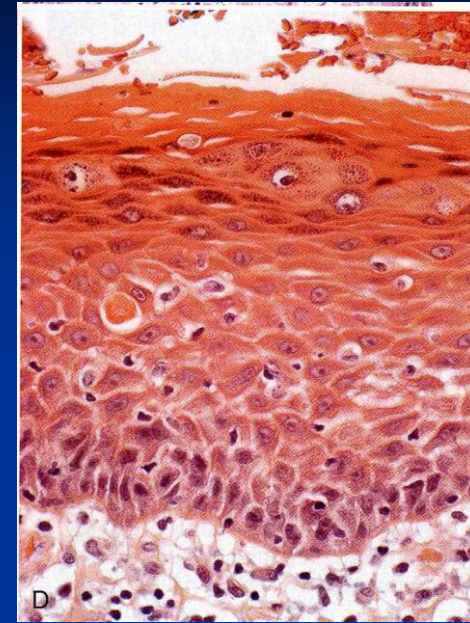


Ayırıcı Tanı / Diferansiye VIN

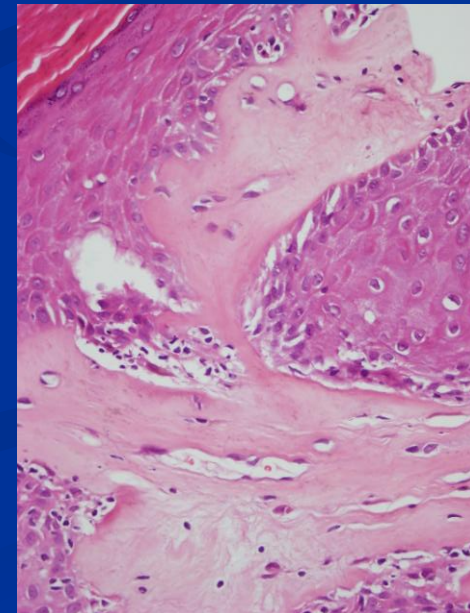
- Psöriasis
- Spongiotik dermatit
- Candida vulviti



D-VIN

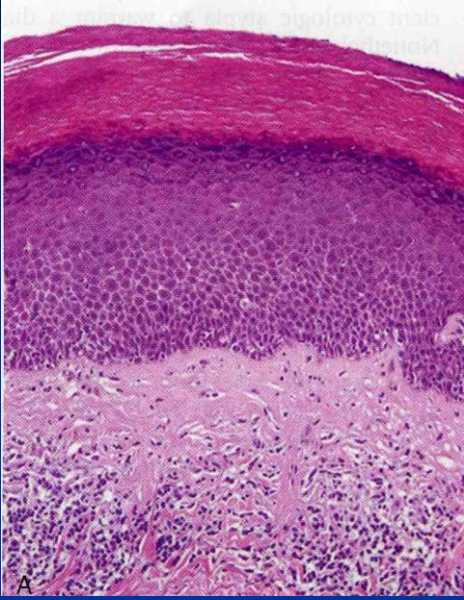


LSC



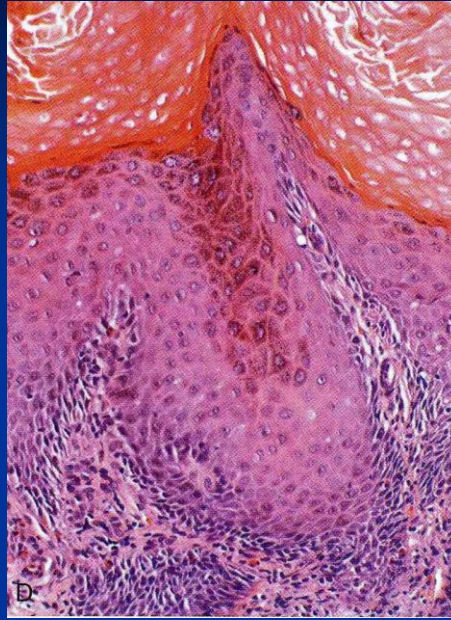
LS

Potansiyel olarak önemli sayılabilecek diğer intraepitelyal deęişiklikler:



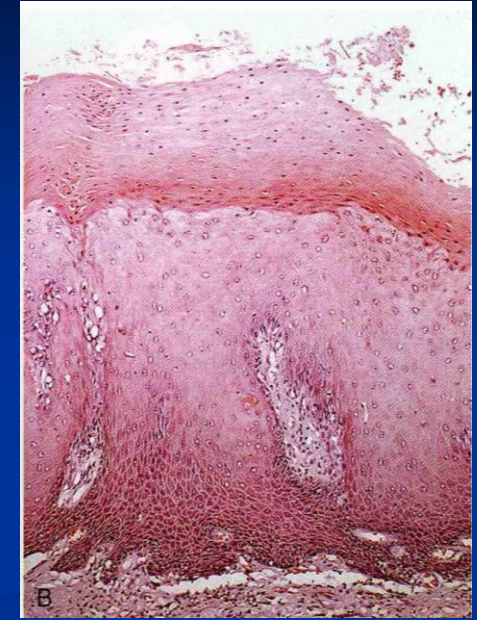
LSA

(lichen skleroz ile akantoz)



VLSC

(verruciform lik. Simpl. Kro)



VAAD

(vulvar akantosis with altered dif.)

- HPV (-) vulvar Ca
 - Verrüköz Ca
 - Dikkatli takip edilmeliler !
- } Prekürsör ?

Atipi Ø

EDITORIAL

Applying the New ISSVD
Terminology on Precursors of
Vulvar Squamous Cell Carcinoma
to Management

L. Stewart Massad, MD

*Division of Gynecologic Oncology, Southern Illinois University School of Medicine,
Springfield, IL*

- Lezyon premalign? deęil?
- Hangi lezyona destrüktif tedavi ?
- Patolog ile iletişim önemli
- Klinisyen literatürü takip etmeli

Mesajlar

- VIN 1? Kondilom? Hangi terminoloji? Pratik önemi yok
- VIN 2? VIN 3? Ayırımın pratik önemi yok
- Warty-bazaloid ayırımının bugün için önemi yok
- Bowenoid papulosis terminolojisini kullanmayın!
- Dermatolog / dermatopatolog işbirliği

Mesajlar

- Diferansiye VIN'de makroskopik lezyon seçmek zor
- D-VIN'de mikroskopik tanı zor
- LS ve LSC'lu hastalarda dikkatli hasta takibi
- HPV tip tayini ve moleküler çalışmaların yararı olabilir!

Mesajlar

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- D-VIN'de mikroskopik tanı zor
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 - HPV tip tayini ve moleküler çalışmaların yararı olabilir!

Teşekkür ederim...