

Kesesuaian temuan perluasan tumor dan limfadenopati kanker serviks stadium awal (IB dan IIA) berdasarkan computed tomography scan dan histerektomi radika = Compatibility between the tumor's expansion and the lymphatic spread of the early-stage cervical cancer based on computed tomography scan and radical hysterectomy

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Abstrak

Sistem staging klinis kanker serviks tidak selalu akurat terutama dalam mengevaluasi invasi parametrium, dinding pelvis, metastasis kelenjar getah bening (KGB), serta estimasi ukuran tumor. Pencitraan seperti CT-scan bermanfaat dalam mengevaluasi hal-hal tersebut. Penelitian ini bertujuan untuk melihat kesesuaian perluasan tumor dan penyebaran limfatik dari kanker serviks stadium awal berdasarkan CT-scan dibandingkan temuan patologi anatomi (PA) post histerektomi. Dari penelitian ini didapatkan tidak adanya perbedaan bermakna antara temuan CT-scan dan temuan PA dalam menilai metastasis KGB regional, sehingga CT-scan bermanfaat dalam pemetaan KGB saat limfadenektomi. Stadium IB memiliki tingkat kesesuaian terbesar antara stadium CT-scan dengan stadium PA, sedangkan ketidaksesuaian terbesar pada stadium IIB.

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Clinical staging system of cervical cancer not always accurate, especially in evaluating parametrial invasion, pelvic wall, lymph node metastasis, and the estimated size of the tumor. Imaging such as CT-scan is useful in evaluating such matters. This study aimed to see the compatibility between the tumor's expansion and the lymphatic spread of the early-stage cervical cancer, by using CT-scan compared to the histopathology results. The result showed that there was no significant difference between the CT-scan findings and the histopathology findings in assessing regional lymph nodes metastasis, so that CT-scan is useful in mapping the lymph nodes when lymphadenectomy. Stage IB has the greatest level of concordance between.