

MANIFESTASI DAN TATALAKSANA KEGANASAN SARKOMA DI PARU

Angga MR, Ana Rima Setijadi

Abstrak

Sarkoma adalah neoplasma berasal jaringan mesenkim dan turunannya dibedakan menjadi keganasan pada jaringan lunak (soft tissue sarcoma) dan jaringan padat (compact tissue sarcoma). Penamaan neoplasma ganas sarkoma dibentuk dari histogenesis jenis sel mesenkim penyusun jaringan dengan jenis histologi sub tipe sarkoma lebih dari 50 macam. *European Society Medical Oncology* (ESMO) membagi keganasan sarkoma menjadi sarkoma jaringan tulang, sarkoma jaringan lunak, viseral, dan sarkoma stroma gastrointestinal. *National Comprehensive Cancer Network* (NCCN) berdasar tatalaksana membagi keganasan sarkoma kedalam kelompok ekstremitas/superfisial tubuh, kepala/leher, sarkoma retroperitoneal/intra abdomen, sarkoma stromal gastrointestinal, sarkoma desmoid/*aggressive fibromatosis*, dan *rhabdomyosarcoma*. Tatalaksana keganasan sarkoma bermacam-macam sesuai dengan keganasan primer disesuaikan guideline masing-masing tipe keganasan. Keganasan primer sarkoma diterapi dengan reseksi tetapi metastasis sarkoma dengan kemoterapi karena sulit dilakukan pembedahan. Kombinasi pembedahan dan kemoterapi merupakan modalitas terbaik untuk tatalaksana sarkoma.

MANIFESTATIONS AND MANAGEMENT SARCOMA MALIGNANCY IN LUNG

Angga MR, Ana Rima Setijadi

Abstract

Sarcoma is a neoplasm derived from mesenchymal tissue and its generation divided into malignancy in soft tissue (soft tissue sarcoma) and solid tissue (compact tissue sarcoma). Malignant neoplasm sarcoma histogenesis formed of mesenchymal cell types constituent tissues with sarcoma histological subtypes of more than 50 kinds. European Society Medical Oncology (ESMO) divides into a sarcoma malignancy tissue sarcoma of bone, soft tissue sarcomas, visceral, and gastrointestinal stromal sarcomas. National Comprehensive Cancer Network (NCCN) based on the treatment of malignancies divide into groups extremity sarcoma / superficial body, head / neck, sarcoma retroperitoneal / intra-abdominal, gastrointestinal stromal sarcoma, sarcoma desmoid / aggressive fibromatosis, and rhabdomyosarcoma. Management of malignancy sarcoma is varied according to the guideline adjusted primary malignancy of each type of malignancy. Sarcomas primary malignancies treated with resection but metastatic sarcomas to chemotherapy because it is difficult to do surgery. The combination of surgery and chemotherapy was the best modality for sarcoma therapy.