



NCCN  
GUIDELINES  
FOR PATIENTS®

2021

# Baaritaanka Kansarka Mandhacirka

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COLORECTAL CANCER



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- ✓ Sida ku saleysan tilmaamaha daaweynta ee ay adeegsadaan bixiyayaasha daryeelka caafimaadka caalamka oo dhan
  - ✓ Loogu tallogalay inay kaa caawiso inaad kala hadashid daaweynta kansarka dhaqtarkaaga



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- ✓ Isbahaysiga xarumaha kansarka hormuudka ka ah Mareykanka oo dhan waxaa ka go'an daryeelka bukaanka, cilmi baarista, iyo waxbarashada

Xarumaha kansarka oo ka qeyb ah NCCN:  
[NCCN.org/cancercenters](https://www.nccn.org/cancercenters)



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- ✓ Bixiyayaasha daryeelka kansarka ee caalamka oo dhan
- ✓ Tallooyinka taqasuska ee loogu tallogalay baaritaanka kansarka, cudurka, iyo daaweynta

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### NCCN Guidelines for Patients

- ✓ U soo bandhig warbixinta NCCN Guidelines qaab sahlan in la barto
- ✓ Dadka kansarka qabo iyo kuwa iyaga taageero
- ✓ Sharax dooqyada daryeelka kansarka u badantahay inaad yeelatid natiijada ugu wanaagsan

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[NCCN.org/patientguidelines](https://www.nccn.org/patientguidelines)

**NCCN Guidelines ee Bukaanada waxay ku saleysantahay NCCN Guidelines® oo Baaritaanka Kansarka Mandhaciirka, Nooca 2.2021 – Abriil 13, 2021.**

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## NCCN Guidelines ee Bukaanaada waxaa lagu taageeraa maalgelinta NCCN Foundation®

Si loo sameeyo hadiyad ama wax badan looga barto, fadlan booqo [NCCNFoundation.org/donate](https://www.nccn.org/donate) ama i-meelka [PatientGuidelines@NCCN.org](mailto:PatientGuidelines@NCCN.org).



### Sidoo kale waxaa taageero La dagaalanka Kansarka Mandhaciirka

Waxaan ula dagaalanaa si aan u daaweyno kansarka mandhaciirka oo ugu adeegno sida horyaalada rajada oo joogto ah oo dhammaan dadka uu saameeyay cudurkaan iyada oo la adeegsanayo taageerada bukaanka la ogeysiiyay, badelka xeerka saameynta leh, iyo dadaalada cilmi baarista hormarsan. Sida urur ka go'antahay inuu ku caawiyo bulshada inay helaan illo la aaminsanyahay oo lagu sameeyo go'aano la ogeysiiyay ee ku saabsan caafimaadkooda, waan ku faanaa inaan taageerno illahaan dhameystiran. [Fightcolorectal.org](https://www.fightcolorectal.org)

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# 1

## Baaritaanka kansarka waxay badbaadisaa nolol

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Kansarka mandhaciirka waa kansarka sadexaad ee ugu caadisan caalamka. Baaritaanka wuxuu ka hortagi karaa kansarka mandhaciirka oo la ogaado xili hore markii daawada aad ugu badantahay.

## Waa maxay kansarka mandhaciirka?

Jirka aadanaha wuxuu ka sameysanyahay in ka badan 30 tiriliyan oo unugyo ah. Kansarka waa cudur unugyo aan caadi aheyn oo ku kobcaa xakameyn la'aan. Kansarka mandhaciirka waxaa loola jeedaa kansarka mandhaciirka ama malawadka.

### **Mandhaciirka iyo malawadka waa xubno ku jiro nidaamka dheefshiidka**

Nidaamka dheefshiidka wuxuu burburiyaa cuntada si jirka u isticmaalo. Caloosha dhexdeeda, cuntada

waxaa loo burburiyaa gabalo yaryar. Mandhaciirka yar, ku dhawaad nafaqooyinka oo dhan ee cuntada waxay galaan qulqulka dhiiga.

Nidaamka dheefshiidka ayaa sidoo kale ka saaro cuntada aan shiidmin ee jirka. Mandhaciirka weyn, biyaha iyo cusbada wuu ka saaraa cuntada aan shiidmin sida ay maraan dhinaca mandhaciirka. Cuntada adag waxaa loo yaqaan saxaro ama xaar. Malawadka ayaa celiyo saxarada illaa ay ka soo baxdo jirka afka loo yaqaan futada.

### **Qaar ka mid ah hormarka burada kansarka mandhaciirka**

Darbiga mandhaciirka wuxuu ka sameysanyahay fadhiyo unug ah. Fadhiga hoose ee taabto saxarada waxaa loo yaqaan xababka. Aagaga kobaca unug aan caadiga aheyn, loo yaqaan buro, in badan waxay ku dhacdaa xabka.

### **Mandhaciirka iyo malawadka**

Mandhaciirka iyo malawadka waxay ka qeyb yihiin mandhaciirka weyn. Mandhaciirka waa qeybta ugu dheer—qiyaastii 5 fiit (1½ miitir) dhirir. Wuxuu leeyahay afar qeybood: mandhaciirka qeybta guud, dhexe, hoose, iyo malawadka. Futada waxay u dhowdahay dhammaadka mandhaciirka balaaran. Waxay ku saabsantahay 5 inji (12 sentimiitir) dhirir.



Inkasta oo burooyinka ugu badan ayna noqoan kansarka, ku dhawaad dhammaan kansarada mandhaciirka waxay u bilowdaan sida burooyin. Waxaa jiro noocyo kala duwan ee burooyinka, iyo qaarkood waxay aad ugu dhowyihiin si ay kansar u noqdaan kansar badelkii kuwa kale. Waxay qaadataa sannooyin badan oo burada ku noqoto kansar.

### Unugyada kansarka waxay leeyihiin kobac aan la xakameyn

Markii unugyada kansar noqdaan, iskama dhigaan sida unugyo caadi ah. Waxay jabiyaan sharciyada kobaca unuga caadiga ah.

- Si ka duwan unugyo caadi ah, unugyada kansarka ma dhintaan markii ay aheyd. Waxay sidoo kale sameeyaan unugyada kansar badan oo cusub oo badelaa unugyada caadiga ah waqti kadib.

- Unugyada kansarka meel ma joogaan. Waxay ku kori karaan dhinaca darbiga mandhaciirka iyo u dhow xubnaha iyo unugyada.
- Unugyada kansarka wuxuu ku faafi karaa qeybaha kale ee jirka. Xididada dhiiga iyo qanjirka waxay ku jiraan gudaha darbiga mandhaciirka. Markii unugyada kansarka ay gaareen xididadaan, way faafi karaan.

Nidaamka diyaarinta waa qaab caadi ah ee kooxeynta kansarada oo kobacooda iyo faafida. Heerarka kansarka mandhaciirka wuu ka duwanyahay heerka 0 illaa heerka 4. Markasta oo ay sarayso kobaca iyo faafida kaansarku, waxaa sareeya heerka uu taagan yahay.

Inta oo kansarka korayo, wuxuu sababi kara aastaamo. Markii ay jiraan aastaamo, kansarka ayaa caadi ahaan faafa oo ay adag tahay in la daaweeyo. Haddii daaweynta aysan shaqeynin,

### Mandhaciirka iyo burooyinka futada

**Burooyinka waa nabro ka soo baxaa darbiga mandhaciirka. Waxay leeyihiin qaabab badan. Burooyinka kacsan ee u eeg sida mashruumka waxaa loo yaqaan burooyinka kansarka (bidix). Burooyinka simman waxay ku leeyihiin wareeg kore iyo boos balacsan (midigta).**



unugyada kansarka way sii korayaan oo waxay ku sababaan xubnaha inay joojiyaan shaqada.

## Maxaa la isu baaraa?

Baaritaanka kansarka mandhaciirka wuxuu raadiyaa burooyin iyo kansar ka hor inta aysan aastaamaha bilaaban. Waxay ku badbaadisaa nolol labo qaabood:

- **Baaritaanka wuxuu ka hortagaa kansarka mandhaciirka.** Kansarka waa laga hortagi karaa markii burooyinka laga saaro ka hor inta aysan noqon kansar.
- **Baaritaanka wuxuu ogaadaa kansarka xili hore aastaamaha intaysan bilaaban ka hor.** Markii kansarka la ogaado xili hore, way sahlantahay in la daaweeyo ama la dabiibo.

Baaritaanka wuxuu bilowday markii qofka uu ku jiro halista kansarka mandhaciirka. Waxaa jiro dhawr qaabood oo baaritaan ah:

- **Sheybaarka caloosha** wuxuu ku lugleeyahay qalab gacanta lagu qabto ee u ogolaado dhaqaatiirta, sida dhaqaatiirta caloosha, inay ka eegaan gudaha mandhaciirka iyo malawadka burooyinka aan caadi aheyn.
- **Raajada** waxay sameysaa sawirada gudaha mandhaciirka iyo malawadka. Dhaqtarka raajada ayaa dib u eegayo sawirada burooyinka aan caadiga aheyn.
- **Baaritaanada sheybaarka** wuxuu ogaadaa calaameeyayaasha kansarka, sida dhiiga, saxarada ku jiro.

Qaabka baaritaanka kaliya ee saari karo burooyinka waa sheybaarka caloosha. Nidaamyada sheybaarka caloosha ee baaritaanka kansarka mandhaciirka waa sheybaara mandhaciirka iyo sheybaarka futada.

## Baaritaanka iyo cudurka

Baaritaanka kansarka waxaa la sameeyaa haddii aadan laheyn aastaamaha iyo calaamadaha kansarka mandhaciirka. Markii aad yeelatid aastaamo ama calaamado, ujeedka baaritaanka waa ogaanshaha dhibaataada iyo sameynta baaritaano. Weydii bixiyaha daryeelkaaga caafimaad wax ku saabsan helida baaritaanka kansarka mandhaciirka islamarkaasba haddii aad qabtid aastaamahaan ama calaamadahaan:

### Dhiig yaraanta birtu ku yar tahay



### Saxarada jirka



### Isbadelka caadooyinka saxarada



Burooyinka laga saaray waxaa loo dirayaa taqasuska loo yaqaan taqasuska cudurka. Dhaqtarkaan wuxuu ka eegayaa kansar burada isaga oo adeegsanayo weyneyso. Haddii unugyada kansarka la helo, baaritaanka kansarka ayaa la sameeyaa.

## Yaa ah inuu baaritaan helo?

Halisaha waa fursada dhacdo inay dhaceeyso. Halista waxay ka qeyb tahay nolosha. Waxaa jiro haliso markii aan cuneyno, safreyno, oo aan maalgelineyno lacag. Nolosha ayaa sidoo kale ku jirtaa halista dhibaatooyinka caafimaadka, oo ay ku jiraan kansarka.

### Dadka qaar waxay aad ugu badantahay inuu ku dhaco kansarka mandhaciirka badelkii dadka kale

Waxyaabaha kordhiyaa halista waxaa loo yaqaan xaqiiqaha halista. Tusaale ahaan, halista inuu kugu dhaco qabow waa xiriir dhow ee qofka qaba.

Waxaa jiro xaqiiqaha halis badan ee kansarka mandhaciirka. Qaarkood waa la badeli karaa, sida:

- Cunista cuntada sida sareyso loo warshadeeyay
- Sigaar cabida
- Bilaa jimicsi

Xaqiiqaha halista kale lama badeli karo, sida:

- Da'daada
- Taariiqdaada caafimaadka

Haddii aad leedahay xaqiiqaha halista, micnaheeda ma ahan inaad hubtid inaad qaadid kansarka mandhaciirka. Si lamid ah, waad qaadi kartaa kansarka mandhaciirka xittaa haddii aadan qabin xaqiiqo la garanayo.

## Hagaha 1. Heerarka halista ee kansarka mandhaciirka

<b>Isku celceliska halista</b>	Waxaa tahay ugu yaraan 45 sanno jir oo ma lihid xaqiiqaha halis kale
<b>Halista korodhay</b>	Qoyskaaga oo dhalasho ahaan wuxuu leeyahay taariiq kansarka mandhaciirka ama burooyinka kansarka hore ee hormarsan
	Aad yeelatay kansarka mandhaciirka ama burooyinka kordhiyaa halista kansarka
<b>Halista sareyso</b>	Waxaad leedahay midkood mid ka mid ah cuduradaan bararka saxarada: <ul style="list-style-type: none"> <li>• Cudurka saxarada raaga</li> <li>• Cudurka marinka dheefshiidka</li> </ul>
	Aad leedahay mid ka mid ah cudurka kansarkaan dhaxalka ah: <ul style="list-style-type: none"> <li>• Cudurka la iska dhaxlo</li> <li>• Cudurka burooyinka, sida burooyinka qadiimiga ah iyo burooyinka aan kansarka aheyn</li> </ul>

## Xaqiiqaha halista qaar waxay saameysaa waqtiga baaritaanka kansarka

Ma ahan in dhammaan xaqiiqaha halista ay leeyihiin isla saameynta. **Fiiri Tilmaanta 1** heerarka halista ee la adeegsaday in lagu xiro baaritaanka kansarka mandhaciirka oo qof walba.

Baro waxa halistaada kansarka mandhaciirka waa ka hor da'da 40, marka inaadan bilaabin qeylada mardambe. Si dhaqso ah u baro halistaada haddii goyskaaga uu qabay kansarka mandhaciirka.

Waqtiga la bilaabayo baaritaanka kansarka mandhaciirka oo dib loo baaro waxaa looga hadlaa sadarada xiggo.

- Sadarka 2 wuxuu daboolaa baaritaanka dadka leh halista dhexe.
- Sadarka 3 wuxuu ka hadlaa baaritaanka markii ay jirto taariqda goyska ee kansarka mandhaciirka ama burooyinka kansarka hore. Waxay sidoo kale si kooban uga hadashaa cudurka dhaxalka kansarka.
- Sadarka 4 wuxuu sharaxaa dib u baarista haddii aad laheyd burooyinka kansarka hore ama kansarka mandhaciirka.
- Sadarka 5 wuxuu sharaxayaa nidaamka baaritaanka nidaamka haddii aad qabtid cudurka bararka saxarada.



Baaritaanka kansarka mandhaciirka AAD ayuu muhiim u yahay! Kansarka mandhaciirka waa mid ka mid ah dhoor kansaro oo aanan kaliya si sareyso loo daaweyn karin markii la ogaado xili hore, laakin wuxuu dhabtii ka hortagi karaa baaritaanka joogtada ah! Iyada oo diyaarinta sheybaarka mandhaciirka, ama nidaamka ku qaadista muunada ee tijaabada baaritaanka guriga ayaa u muuqan kara mid aadan rabin, waxaan kuu balanqaadi karaa, sida badbaadada kansarka mandhaciirka heer III, aad ayaa looga hortagi karaa daaweynada kansarka mandhaciirka sida shucaac iyo daaweynta kiimikada!

– Ben

## Maxaa badbaadiyo nolosha marka laga tago baaritaanka?

Baaritaanka wuxuu muhiim u yahay ka hortaga kansarka mandhaciirka. Waxaa jiro 7 tallaabooyin kale ee aad qaadi kartid si aad uga hortagtid kansarka mandhaciirka:

### 1. Qaado aspirin

Qaadashada aspirin-ka maalin walba oo ugu yaraan 5 illaa 10 sanno wuxuu kaa illaaliyaa inuu kugu dhaco kansarka mandhaciirka. Weydii bixiyaha daryeelkaaga caafimaadka haddii aspirin kugu haboonyahay. Dhiig baxa gudaha waa halista qaadashada aspirin.

### 2. Cun cuntooyin caafimaadan

- Cun cuntooyin badan oo dhir ku saleysan.
- Cun cadad xadidan oo hilibka cas ah oo ka fogow hilibka la warshadeeyay.
- Xadid cunista cuntooyinka la warshadeeyay iyo warshadeynta qasaceysan.
- Haku tiirsanaan dheeraadka cuntada kaliya nafaqooyinka. Hel nafaqooyinka cuntada dabiiciga.

### 3. Cab khamri yar ama ha cabinba

Cabista sare iyo dhexaad ee khamrida ayaa kordhin karto halista kansarka mandhaciirka. Cadadka khamrida oo badqabka ah waxay ku xirantahay jidhka qofka. Halista kansarka mandhaciirka kuma korodho 1 cabitaan maalintiiba oo dumarka iyo 2 cabitaano maalintii oo ragga ah.

### 4. Dhaqaaq wax badan oo naso in yar badanaa

Howsha jirka oo joogtada ku saleysan waxay ku xirneyd halista hoose ee kansarka mandhaciirka.

### 5. Hel fitamiin D kugu fillan

Heerarka hoose ee fitamiinka D waxay kordhin kartaa halista kansarka mandhaciirka. Ka hortag heerarka hoose ee cunista cuntooyinka ee fitamiinka D. Fitamiin D waa salmoonka, tuunada, kaluunka cagaarka, iyo jaalaha ukunta. Sidoo kale waad cuni kartaa cuntooyinka fitamiin D-ee la xoojiyay oo qaado dheeraadyada.

Maqaarkaaga wuxuu sameyn karaa fitamiin D markii ay gaarto qoraxda. Kareemka qoraxda waa lagu talliyay markii ay banaanka ka yihiin waqti muddo la kordhiyay. Marsashada kareemka qoraxda waxay xadeyn kartaa cadadka fitamiin D ee uu maqaarka sameeyo.

### 6. Joogteey culeys caafimaadan

Cayilka xaqiiqda halis kale oo ah kansarka mandhaciirka. Tasmada miisaanka weyn (BMI) waa tallaabada dufanta jirka. BMI ee 18.5 illaa 24.9 waxaa loo tixgeliyay culeys caadi ah. Raadraaca culeyskaaga, cuntada, kaloorka, iyo heerarka howsha ayaa kugu caawin karo buuxinta yoolalkaaga.

### 7. Jooji sigaar cabista

Haddii aad sigaar cabtid, jooji! Weydii bixiyahaaga daryeelka caafimaadka wixiicaawinta ee lagu joojinayo. Waxaa jiro la talinta lagu joojinayo sigaar cabista. Daawada waxay kaa caawin kartaa joojinta rabitaan sare iyo ka laabashada aastaamaha.

## Qodobada muhiimka ah

- Kansarka mandhaciirka waxaa loola jeedaa kansarka mandhaciirka ama malawadka. Labadaan xubnaha waxay ka qeyb tahay nidaamka dheefshiidka. Waxay ka caawisaa ka saarida saxarada jirka.
- Burooyinka waa nabro ka baxo leenka gudaha ee mandhaciirka ama malawadka. Inkasta oo burooyinka ugu badan ayna noqdon kansarka, ku dhawaad dhammaan kansarada mandhaciirka waxay ku bilowdaan sida burooyin.
- Baaritaanka kansarka mandhaciirka wuxuu badbaadiyaa nolol. Waxay ka hortagtaa kansarka iyada oo la helayo oo laga saarayo burooyinka ka hor inta aysan noqon kansar. Waxaan kaloy arkaan kansarka xili hore markii daaweynta ay aad ugu badantahay.
- Halisaha waa fursada dhacdo inay dhaceysa. Halista kansarka wuxuu ka qeyb yahay nolosha qof walba.
- Waxyaabaha kordhiyaa halista waxaa loo yaqaan xaqiiqaha halista. Waxaa jiro xaqiiqaha halis badan ee kansarka mandhaciirka.
- Xaqiiqaha halista qaar waxay kordhisaa halista kansarka mandhaciirka wax ka badan dadka kale. Xaqiiqaha halista ee saameyso waqtiyeynta baaritaanka kansarka mandhaciirka waxaa ku jiro da'da iyo caafimaadka. Halista kansarka mandhaciirka waxaa lagu kooxeeyay isku celceliska, la kordhiyay, iyo halis sareyso.
- Qaadashada aspirin iyo noolaanshaha hab nololeed caafimaadan waxay ku caawin kartaa ka hortaga kansarka mandhaciirka dheeraadka ku ah baaritaanka kansarka.

### **Kansarka maku sugayo adigana ha sugin**

Inta lagu jiro safmarka COVID-19, tirada dadka helayo baaritaanka kansarka lagu talliyays hoos ayuu u dhacay. Baaritaanada aad seegtay waxay kuu hogaamin kartaa baaritaan daahay iyo fursado kugu seego daaweynta.

Ha sugin oo ha dayicin jadwalka daryeelka caafimaadka. Ka taxadar nafsadaada adiga sameynayo baaritaanada jadwalka kansarka. Kala hadal dhaqtarkaaga goorta iyo inta jeer ee la baarayo.

Wax badan oo fariinta NCCN oo in “Kansarka Uusan ku Sugaynin Adigana Ha sugin” waxaa laga heli karaa [NCCN.org/resume-screening](https://www.nccn.org/resume-screening).

# 2

## Isku celceliska halista ee kansarka mandhaciirka

- 15 Baaritaanka wuxuu ku bilowdaa da'da 45
- 16 Waxaa jiro dooqyada baaritaanka
- 18 Shahaashada labaad waxay noqon kartaa 10 sanno
- 19 Qodobada muhiimka ah





Inta badan dadka ku jiro halista kansarka mandhaciirka wuxuu leeyahay isku celceliska halis. Isku celceliska qatarta waxay ku saleysantahay da'da iyo maqnaanshaha xaqiiqaha halis weyn.

## Baaritaanka wuxuu ku bilowdaa da'da 45

Sannooyin, dadka qabo isku celceliska halista waxay ku bilaabaan baaritaanka kansarka mandhaciirka 50 sanno jir. Laakin, kansarka mandhaciirka wuxuu ku jiraa sare u kaca dadka ka hooseeyo 50 sanno jir. Haddeer, dadka leh isku celceliska halista waxay ku bilaabaan baaritaanka 45 sanno jirka.

Halista kansarka mandhaciirka waxay ku kala duwanyihiin qowmiyad ahaan iyo jinsiyad. Mareykanka, qiimooyinka ugu sareeyo ee kansarka mandhaciirka waxay ka dhacaan shaqsiyaadka Madowga. Shaqsiyaadka Madowga

waa inay bilaabaan baaritaanka kansarka mandhaciirka oo da'da 45 ama ka horeeyo haddii kansarka mandhaciirka wuxuu ku jiraa qoyska.

Dadka qaar ee ka hooseeyo 45 sanno jir waxaa ku dhaco kansarka mandhaciirka. Qaarkood waxay leeyihiin halis korodhay ama sareyso ee kansarka mandhaciirka, laakin dadka kale ma lahan xaqiiqaha halista weyn. Kala hadal bixiyayaahaga daryeelka caafimaadka ee ku saabsan haddii ay aheyd inaad bilowdid baaritaanka kansarka ka hor da'da 45.

Dadka qabo caafimaad wanaagsan waa inay maraan baaritaanka kansarka mandhaciirka oo illaa da'da 75. Haddii aad u dhaxeysid 76 iyo 85 sanno jir, baaritaanka kansarka waa go'aanka shaqsiga ee la gaarayo kadib markii aad la hadashid bixiyaha daryeelkaaga caafimaad. Wax ka weydii faa'idada iyo qasaaraha baaritaanka ee iftiinka caafimaadkaaga. Baaritaanka kansarka mandhaciirka looma baahno haddii aad ka weyntahay 85 sanno jir.

**Da'aha  
45 illaa 75**

**Hel baaritaan  
(illaamaa aadka  
leedahay jirada  
halista geliso  
noloshu).**

**Da'aha  
76 illaa 85**

**Baaritaanka waa  
go'aan shaqsiyeed.  
Baro waxa ay  
kuu tahay adiga  
faa'idada iyo  
qasaaraha.**

**Da'aha  
86 iyo ka  
weyn**

**Baaritaanka  
looma baahno.**

## Waxaa jiro dooqyada baaritaanka

Dadka qabo isku celceliska halista ee kansarka mandhaciirka waxay leeyihiin dooqyada baaritaanka oo dhoor ah. Baaritaanka ugu wanaagsan waa midka aad sameysid. Baaritaan walba wuxuu ka wanaagsanyahay baaritaan la'aan. Weydii dhaqtarkaaga wax ku saabsan faa'idada iyo qasaaraha dooqa baaritaan walba.

### Baaritaanka muuqaalka

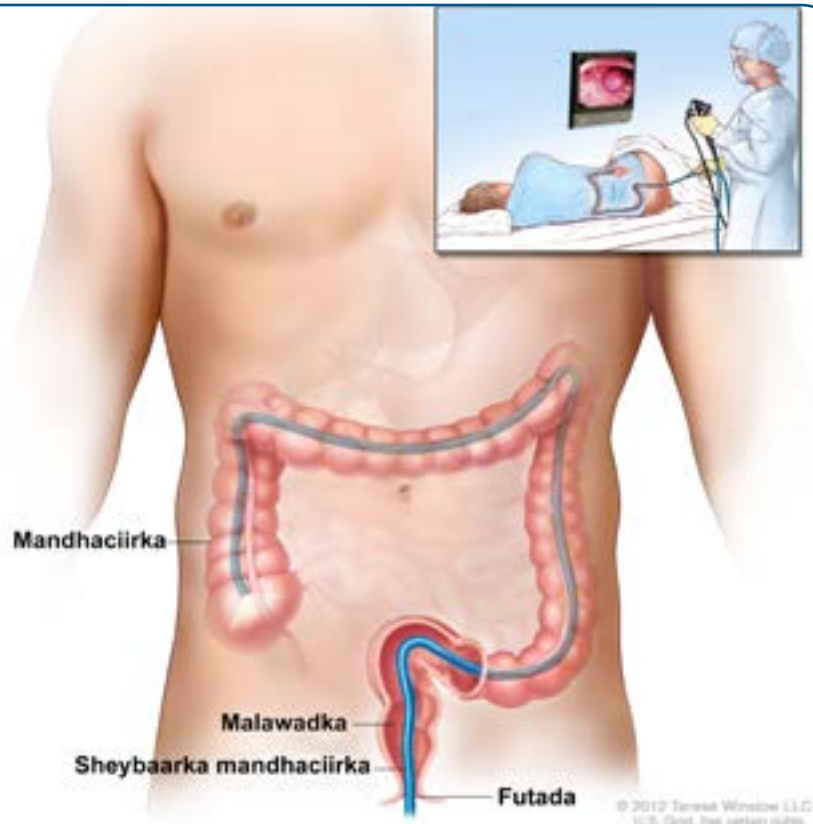
Baaritaanka muuqaalka wuxuu isticmaalaa aaladaha caafimaadka ee u ogolaado dhaqaatiirta inay arkaan gudaha jirkaaga. Waxaa ku jiro sheybaarka mandhaciirka, sheybaarka futada dabacsan, iyo raajada kumbuyuutarka (CT) sawirka mandhaciirka. Raajada mandhaciirka waa loo baahanyahay haddii ay jiraan natiijooyin aan caadi aheyn iyo sheybaarka futada ama CT sawirka raajada.

Baaritaanka muuqaalka wuxuu u baahanyahay in saxara hayntaada laga nadiifiyo saxarada. Diyaarinta saxarada waxay ka koobantahay cunto biyo ah iyo jilciye xoogan. Raac tilmaamaha diyaargarowga dhaqtarkaaga baaritaanka ka hor. Haddii saxaradaada aysan si cad ugu filneyn, dib ayaad u balansan kartaa, ku celin kartaa baaritaanka, ama samey baaritaan ka duwan.

Muuno baarida waa nidaam ka saaro muunooyinka unugyada oo baaritaan dheeraad ah. Qaliinka ka saarida burada waa nooca muunada ee soo saarto burooyinka oo dhan (ku kora darbiga saxarada gudaha). Muuno baarida waxaa la sameyn karaa kaliya inta lagu jiro sheybaarka mandhaciirka iyo sheybaarka futada dabacsan. Aalada jarida ayaa laga geliyaa dhinaca dhammaadka sheybaarka caloosha si uga soo saaraan unugyada. Inta badan burooyinka waxaa looga soo saari karaa sheybaarka caloosha. Marmar ah, qaliinka waa loo baahanyahay.

### Sheybaarka mandhaciirka

Sheybaarka mandhaciirka waa nidaam u ogolaado dhaqaatiirta inay arkaan gudaha saxarada. Waa lagu suuxinayaa inta lagu jiro nidaamka. Dhaqtarka wuxuu adeegsanayaa aalad gacanta lagu haysto ee loo yaqaan sheybaarka caloosha. Sheybaarada caloosha ee loo naqshadeeyay sheybaarka mandhaciirka waxaa loo yaqaan sida sheybaarada mandhaciirka. Kaliya tuubada duuban, qaabeysan qeyb qalabka ah waxaa la geliyaa futada, oo malawadka kore, iyo mandhaciirka. Aalada waxay leedahay iftiin, kaamirad, iyo aalada jarida.



## Dooqyada baaritaanka oo isku celceliska halista



### Baaritaanka muuqaalka

### Faa'iooyinka

### Qasaaraha

#### Sheybaarka mandhaciirka

Baaritaanka mandhaciirka iyo malawadka iyo aalada dhuuban oo si tartiib ah loo geliyo futada

- Baaritaanka halka-tallaabo— ma jiraan baaritaan dheeraad ah oo loo baahanyahay
- Hakadyo aad u dheer oo u dhaxeeyo baaritaanada haddii natiijooyinka ay caadi tahay

- Diyaarinta saxarada waa loo baahanyahay
- Lagu dhameystiro meel ka baxsan guriga
- Suuxdin ayaa la adeegsadaa
- Halis yar oo dhiig bax ah, caabuq, iyo dhaawac

#### Sheybaarka futada dabacsan

Baaritaanka qeybta ugu dambeyso ee mandhaciirka iyo aalada dhuuban oo si tartiib ah loo geliyo futada

- Hakadyo dheer oo u dhaxeeyo baaritaanada haddii natiijooyinka ay caadi tahay
- Suuxdinta looma baahno

- Diyaarinta saxarada waa loo baahanyahay
- Lagu dhameystiro meel ka baxsan guriga
- Ma qiimeyso mandhaciirka oo dhan
- Sheybaarka mandhaciirka ayaa loo baahanyahay haddii laga helo burooyin

#### Sawirka mandhaciirka CT Raajada mandhaciirka

- Hakadyo dheer oo u dhaxeeyo baaritaanada haddii natiijooyinka ay caadi tahay
- Suuxdinta looma baahno

- Diyaarinta saxarada waa loo baahanyahay
- Lagu dhameystiro meel ka baxsan guriga
- Waxaa dhaafi karo burooyinka simman
- Dib u baar ama sheybaarka mandhaciirka waa loo baahanyahay haddii burooyin laga helo

### Baaritaanka saxarada ku saleysan

#### Baaritaanka saxarada bata ee DNA-ga ku saleysan (mt-sDNA)

Baaritaanka sheybaarka oo raadiyaa calaameeyayaalka hiddaha ee kansarka saxarada ku jiro

- Saxarada adiga ayaa guriga ku qaado
- Ma jiraan diyaarin loo baahanyahay
- Ma jiraan halisaha jirka

- Sheybaarka mandhaciirka ayaa loo baahanyahay haddii natiijooyinka aysan caadi aheyn
- Uma saxsano sida baaritaanada muuqaalka
- Baaritaanada joogtada ah xittaa haddii natiijooyinka ay caadi yihiin

#### Baaritaanka ku saleysan-guaiaac ee xasaasiga sareeyo iyo baaritaanka saxarada difaaca jirka (FIT)

Baaritaanka sheybaarka raadiyo cadad yar oo dhiiga ku jiro saxaro

### Baaritaanka saxarada ku saleysan

Baaritaanka saxarada ku saleysan wuxuu u sahlanyahay inuu yeesho badelkii baaritaanada muuqaalka. Guriga, waxaad ku qaadeysaa muunada saxaradaada weel. Waxaad kadib ku soo direysaa muunada sheybaarka oo baaritaan ah. Baaritaanada saxarada waxaa ku jiro baaritaanka dhiiga saxarada (FIT), baaritaanka dhiiga muunooyinka saxarada, iyo baaritaanka saxarada DNA bato (mt-sDNA).

Inkastoo ay sahlantahay, baaritaanada saxarada ma ahan si wanaagsan sida baaritaanada muuqaalka ee lagu raadinayo burooyinka noqda kansar. Intaas waxaa dheer, baaritaanka waa nidaam labo tallaabo ah haddii natiijooyinka baaritaanka saxarada aan caadi aheyn. Tallaabada labaad waa helida sheybaarka mandhaciirka oo 6 illaa 10 bilood gudahood ee baaritaanka saxarada. Ma jiraan baaritaan dheeraad ah oo loo baahanyahay haddii natiijooyinka sheybaarka mandhaciirka kadib FIT ama mt-sDNA waa caadi.

### Shahaashada labaad waxay noqon kartaa 10 sanno

Markii natiijooyinka aad baareysid ay caadi tahay, baaritaanka xiggo waxaa lala sameyn karaa qaab walboo baaritaan. Waqtiga hakadka u dhaxeeyo baaritaanada wuxuu ku kala duwantahay sida ku saleysan qaabka baaritaanka hore. **Fiiri Hagida 2** oo hakadyada baaritaanka isku celceliska halista ah.

Dib u baarista sheybaarka mandhaciirka wuxuu leeyahay hakadka ugu dheer oo 10 sanno ah. Dib ugu baarista sheybaarka futada dabacsan waxaa lagu sameyn karaa 10 sanno haddii aad sameysid baaritaanka saxarada FIT sannad walba.

Hakadka baaritaanka muuqaalka kadib waxaa lagu sixi karaa sida ku saleysan tayada baaritaanka hore. Hakadka 1-ka sanno ah ayaa loo baahan karaa haddii saxaradaada aysan si ku fillan u dhammaan ama nidaamka aan la dhameystirin.

## Hagaha 2. Dib u baarista ku saleysan halista caadi ah



Dooqyada baaritaanka



Waqtiga illaa dib loo baaro haddii natiijooyinka hore ay caadi yihiin

Sheybaarka mandhaciirka	Dib u baarista oo 10 sanno gudahood
Sheybaarka futada dabacsan	Dib ugu baar 5 illaa 10 sanno
Sawirka mandhaciirka CT	Dib u baarista oo 5 sanno gudahood
Baaritaanka saxarada bata ee DNA-ga ku saleysan	Dib u baarista oo 3 sanno gudahood
Baaritaanka ku saleysan-guaiac ee xasaasiga sareeyo	Dib u baarista 1 sanno gudahood
Baaritaanka saxarada difaaca jirka	Dib u baarista 1 sanno gudahood

Haddii aad heshid burooyinka kansarka hore ama kansarka mandhaciirka, aqri Sadarka 4 si aad wax uga baratid tallaabooyinka xiggo.

## Qodobada muhiimka ah

- Dadka qabo isku celceliska halista kansarka mandhaciirka waxay ku bilaabaan baaritaanka 45 sanno jir. Waa inaadan yeelan xaqiiqaha halis walboo weyn.



### **Waxaan rabnaa jawaab celintaada!**

Yoolkeena waa bixinta warbixin waxtar oo sahlan in lagu fahmo kansarka.

Qaado sahankeena si aad noo ogeysiisid waxa aan si sax ah u sameyno iyo waxa aan si wanaagsan u sameyn karno:

[NCCN.org/patients/feedback](https://www.nccn.org/patients/feedback)

- Waad dooran kartaa nooca baaritaanka aad qaadaneysid.
- Baaritaanka tijaabada ugu wanaagsan waa midka aad heshid. Ka hadal faa'idada iyo qasaaraha qaabka baaritaan walba ee bixiyayaashaada daryeelka caafimaadka si markaas aad u sameysid dooq la ogeysiiyay.
- Waqtiga illaa baaritaanka xiggo uu ka duwanyahay sida ku saleysan qaabka baaritaanka hore. Baaritaanka looma baahno 10 sanno oo kale haddii aad haysatid natiijooyin caadi ah ee sheybaarka mandhaciirka. Dib u baarista baaritaanada saxarada kadib laga bilaabo 1 illaa 3 sanno.



Kansarka mandhaciirka ayaa had iyo jeer u maleeyay sida “cudurka qof waayeel ah.” Haddeer, daraasado ayaa muujiyay in qofka dhashay 1990 ama kadib ayaa aad ugu badan in 2 illaa 4 jeer ku dhaco kansarka mandhaciirka marka la barbardhigo qofka dhashay 1950. Sababtoo ah midaan, aad ayay muhiim u tahay in la isku baaro 45 sanno jir.

– Lara, ka badbaadaha kansarka Rectal

# 3

## Taariiqda caafimaadka qoyska

- 
- 21 Taariiqda halista sareyso

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  - 23 Taariiqda halista korodhay

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  - 24 Qodobada muhiimka ah



Kansarka mandhaciirka kuma dhaco qoysaska badankood. Qiyaastii 1 oo 3 dii qofba ee qabo kansarka mandhaciirka waxay leeyihiin xubin qoys oo qabo sidoo kale. Taariiqda qoyska waxay sare u qaadaa halistaada, laakin micnaheeda ma ahan inaad hubtid inuu kugu dhaco kansarka mandhaciirka.

## Taariiqda halista sareyso

Qoysaska qaar, qaraabada dhiiga kala duwan waxay qabaan kansarka mandhaciirka. Markii kansarka ku dhaco da'yarta ama qaraabo badan oo kaa fog, waxaa sabab u noqon karo cudurka kansarka dhaxalka.

Cudurka kansarka dhaxalka waxaa sababo hiddaha aan caadiga aheyn oo maro hoosta laga bilaabo dhalashada illaa canuga. Waa dhif.

Daryeel bixiyahaaga caafimaadka ayaa ka shakin karo inaad qabtid cudurka kansarka dhaxalka. Haddii ay sidaas tahay, waxay kuu gudbinayaan taqasus hiddooyinka. Taqasusyadaan waxay baaraan oo qorsheeyaan maareynta ee cudurka kansarka dhaxalka.

Waxaa jiro dhoor noocyo oo cudurada kansarka dhaxalka oo geliyaa qofka halis sareyso oo kansarka mandhaciirka:

- Cudurka la iska dhaxlo waxaa sababo qaladka la dhaxlay (badelma) oo is lahaansho la'aanta sameynta hiddooyinka (MMR). Mararka qaar, Cudurka la iska dhaxlo waxaa loo yaqaan sida kansarka mandhaciirka aan burooyinka aheyn ee dhaxalka (HNPC), laakin isku mid ma ahan.
- Cudurada burada waa koox cudurada kansarka ee sababo burada mandhaciirka badan. Mida ugu caansan waa burooyinka aan kansarka aheyn (FAP).

## Ogow

### taariiqda qoyskaaga

Taariiqda qoyska waa mid ka mid ah xaqiiqaha halista ugu muhiimsan oo kansarka mandhaciirka. U diyaar garow inaad u sheegtid daryeel bixiyahaaga caafimaad warbixinta xigta:

- Nooca kansarka, haddii uu wax jiro, ka midka ah qaraabada dhiiga
- Da'dooda ee cudurada kansarka
- Da'dooda haddeer ama da'da waqtiga dhimashada
- Xaaladaha caafimaadka la dhaxlay iyo ciladaha dhalashada ee qoyskaaga

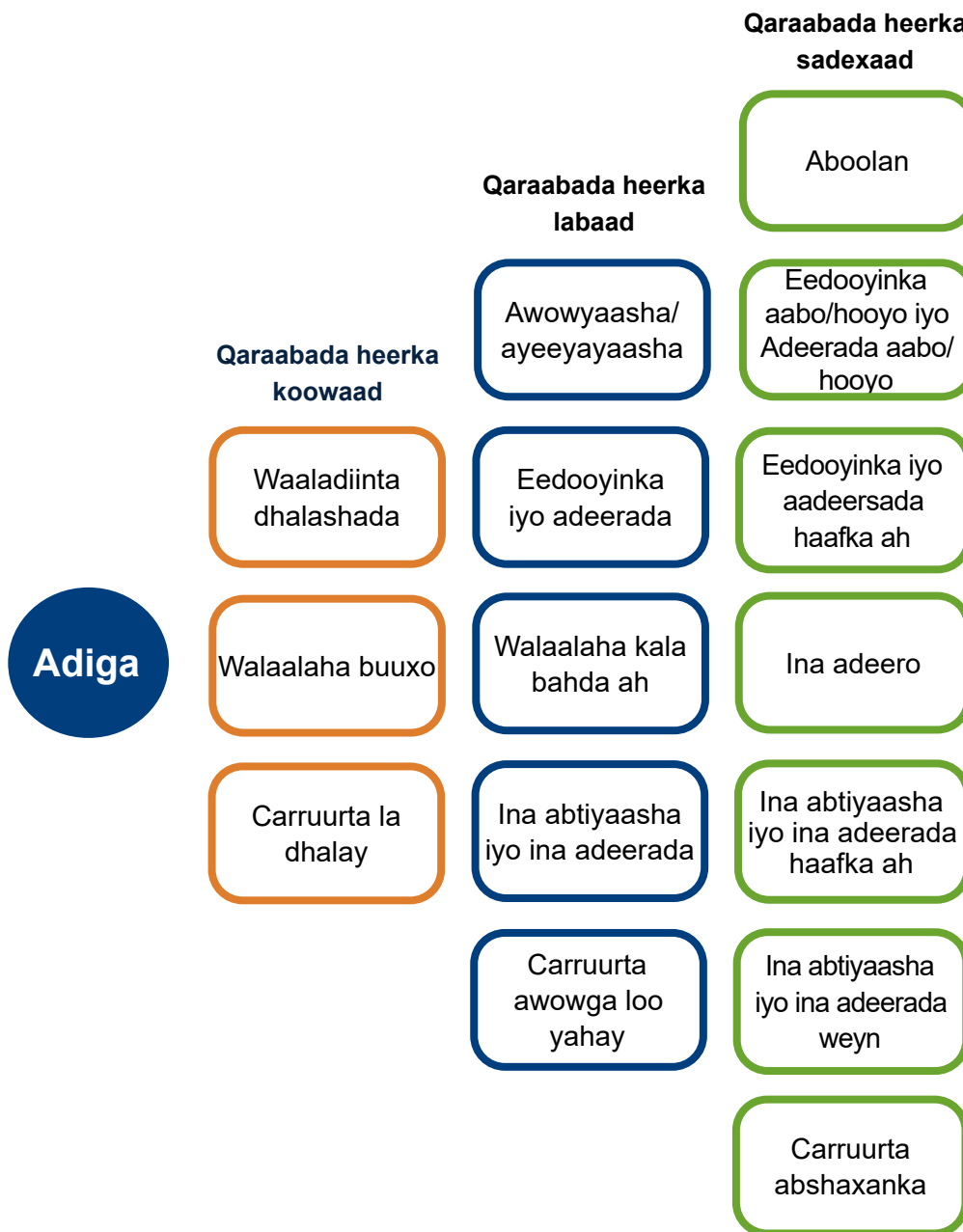


Baaritaankeyga hiddaha, oo igu aqoonsaday MSH2 badelmo (Cudurka la iska dhaxlo), waxay iga caawisay inaan go'aano gaaro oo ku saabsan daaweynta mustaqbalka iyo fahamka halista mustaqbalkeyga ee kansarada kale. Tan waxay ii ogolaatay fursada loogu firfircoonaanayo daryeelkeyga caafimaad.

– Wenora, Ka badbaadaha kansar sadex jeer

## Qaraabada dhiiga

Qaraabada dhiiga waa xubnaha qoyska oo aad wada dhalateen dhalasho ahaan. Taariiqda caafimaadka qaraabada dhiigaaga wuxuu muhiim u yahay go'aansashada halistaada kansarka mandhaciirka. Waxaad wadaagtaa qiyaastii (50%) hiddahaaga ah oo qaraabada heerka koowaad. Hal rubac (25%) oo hidahaaga waxaa lala wadaagaa qaraabada heerka labaad. Adiga iyo qaraabada heerka sadexaad waxaad waadagtaan 12.5% hidaha ah.





## Taariiqda halista korodhay

Inta badan qoysaska qabo taariiqda kansarka mandhaciirka malahan cudurka kansarka dhaxalka. Qoysaskaan, sababta kansarka ma cada. Kansarka waxaa sababi karo hidooyinka la wadaagay, waaya aragnimada la wadaagay, ama labadaba.

### Taariiqda qoyska ee kansarka mandhaciirka

Waxaad ku jirtaa halis korodhay oo kansarka mandhaciirka haddii qaraabada dhiiga uu yeeshay kansarka mandhaciirka. Sababta hiddaha waxay u badantahay haddii qaraabo badan ay qabeen kansarka mandhaciirka. Waxay sidoo kale aad ugu badantahay haddii kansarkooda uu dhacay kahor 45 sanno jir.

### Taariiqda qoyska ee burada aan kansarka aheyn

Halistaada way korodhay haddii qaraabada heerka koowaad uu qabay burada aan kansarka aheyn. Burada aan kansarka aheyn waa buro caadi ah.

Burada aan kansarka aheyn ee hore waxay leedahay hal ama ka badan oo sadexdaan aastaamo:

- Heerka sare ee unugyada isbadelo – Unugyada isbadelo waa qaabka nabarka unuga aan caadiga aheyn. Heerka sare ee unugyada isbadelo waxay ka koobantahay unugyada u dhow inay kansar noqdaan.
- Cabir balaaran – Burada aan kansarka aheyn way balaarantahay haddii ay tahay 1 sentimiitir oo cabirka ama ka balaaran.
- Daraasada unugyada tuubooyinka dhacaanka ama dhacaanka ah – Nabarka aan kansarka aheyn waa midka ugu caansan, laakin nabraha dhacaanka leh ama burooyinka tuubooyinka dhacaanka ah ayaa aad ugu dhow inay noqdaan kansar. Burooyinka afeysan ee aan kansarka aheyn (TSAs) wuxuu leeyahay qaabka nabraha dhacaanka leh.

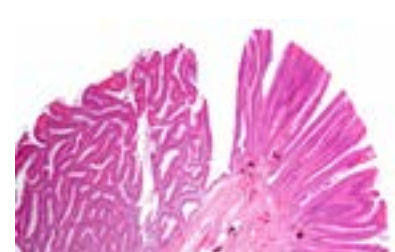
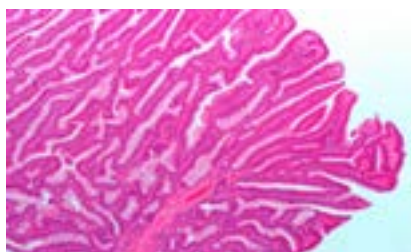
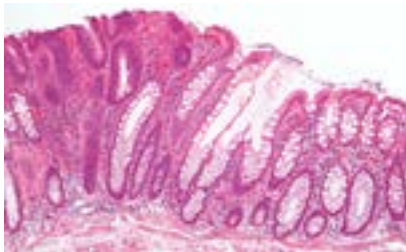
### Qaababka nabraha ee burooyinka aan kansarka aheyn

**Burooyinka waxay leedahay qaababka 3 nabaro. Gudaha burooyinka aan tuubada aheyn, unugyada waxay leeyihiin qaab wareegsan (bidix). Burooyinka dhacaanka leh waxay leeyihiin qanjiro dheer (dhexaad ah). Tuubooyinka dhacaanka burooyinka aan kansarka aheyn waa isku darka labadaba qanjiro (midigta).**

Tuubada mandhaciirka: [https://commons.wikimedia.org/wiki/File:Tubular\\_adenoma\\_2\\_intermed\\_mag.jpg](https://commons.wikimedia.org/wiki/File:Tubular_adenoma_2_intermed_mag.jpg)

Villous adenoma: [https://commons.wikimedia.org/wiki/File:Villous\\_adenoma1.jpg](https://commons.wikimedia.org/wiki/File:Villous_adenoma1.jpg)

Tubulovillous adenoma: [https://commons.wikimedia.org/wiki/File:Tubulovillous\\_adenoma.jpg](https://commons.wikimedia.org/wiki/File:Tubulovillous_adenoma.jpg)



### Taariiqda qoyska ee xaalada unugyada afeysan

Halistaada way korodhay haddii qaraabada heerka koowaad uu qabay xaalada unugyada afeysan (SSP) SSP waa mid ka mid ah dhoor noocyo oo burooyinka ah oo leh ilko-afeysan (afeysan) naqshada unuga. Sida burada aan kansarka aheyn, SSPs waxay kordhiyaan halista kansarka. SSP hormarsan wuxuu leeyahay ama labadaba ee labadaan muuqaalo:

- Unugyada isbadelo – SSP ayaa yeelan karto jeebka (foci) unugyada isbadelo. Burooyinka waxaa loo yaqaan burooyinka simman iyo unugyada isbadelo (SSP-d).
- Cabir weyn – SSP wuu weynyahay haddii uu yahay 1 senti miitir oo cabirka ama ka weyn.

### Baaritaanka halista korodhay

Marka la barbardhigo baaritaanka isku celceliska halista, baaritaanka ku saleysan taariiqda qoyska ayaa inta badan bilaabay xili horeyso oo aad ayay joogto u tahay. **Fiiri Tilmaanta 3** oo baaritaanka ku saleysan taariiqda qoyska.

Jadwalkaaga baaritaanka adiga ayaa lagu xiri karaa. Haddii aysan jirin wax walaacyo ah oo 2 ama ka badan baaritaanada ka hor, waqtiga u dhaxeeyo baaritaanada waa la dheereyn karaa. Xaqiiqaha kale ee laga yaabo inay badesho baaritaanka waxaa ku jiro da'daada iyo tirada iyo da'da xubnaha qoyska ay saameysay.

Haddii aad heshid burooyinka kansarka hore ama kansarka mandhaciirka, aqri Sadarka 4 si aad wax uga baratid tallaabooyinka xiggo.

Waxaad ku caawin kartaa qoyskaaga adiga oo u sheegayo natiijooyinkaaga baaritaanka. Dhaqtarkaaga waxaa u suurto geli karto inay bixiyaan natiijooyinka baaritaanka ama warqad aad wadaagi kartid. Markii qoyskaaga ay ogyihiin taariiqdaada, waxay u gaari karaan go'aano la ogeysiiyay nafsadooda.

### Qodobada muhiimka ah

- Cudurka la iska dhaxlo waa xaalado caafimaad oo aad dhif u ah ee ku jirtaa qoysaska. Iyaga waa xaaladaha halista sareyso ee kansarka mandhaciirka.
- Baaritaanka kansarka mandhaciirka waxay inta badan bilaabatay kahor da'da 40 haddii qoyskaaga uu qabo kansarka mandhaciirka ama burooyinka kansarada hore laakin ma jiraan cudurka kansarka dhaxalka. Waxaa laga yaabaa dib u baaris oo sida ugu dhaqsaha badan ee 5 sanno jirka xittaa haddii aanan burooyin helin.
- Maadaama taariiqda qoyska ay saameysay waqtiyeynta baaritaanka kansarka, wax uga sheeg qoyskaaga natiijooyinka baaritaankaaga. Waxaa kadib u suurto galeyso inay u gaaraan go'aano la ogeysiiyay nafsadooda.

**Waxay ku  
tusiineysaa  
daryeel oo  
waxay la  
wadaagaan  
natiijooyinka  
baaritaanka  
qoyskaaga.**



## Hagaha 3. Baaritaanka ku saleysan taariiqda qoyska



Taariiqda qoyskaaga



Bilow baaritaanka sheybaarka mandhaciirka ee horaantii baraha labada jeer



Wagtiga illaa dib loo baaro haddii natiijooyinka hore ay caadi yihiin

Hal ama ka badan oo qaraabada heerkaaga koowaad wuxuu qabay kansarka mandhaciirka

Da'da 40 ama

10 sanno ka hor baaritaanka koowaad ee qaraabadaada

Dib u baar 5 sanno ee walba

Hal ama ka badan qaraabada heerka labaad iyo sadexaad waxay qabeen kansarka mandhaciirka

Da'da 45 ama

Ka hor da'da 45 haddii kansarka qaraabada lahaa bilow hore

Dib u baar 10 sanno ee walba

Hal ama ka badan oo qaraabadaada heerka koowaad waxay qabeen burooyinka aan kansarka aheyn ee hore ama xaalada unugyada afeysan

Da'da 40 ama

Isku da'da sida da'da qaraabadaada ee cudurka

Dib u baar 5 illaa 10 sanno

### Burooyinka afeysan

**Burooyinka afeysan waxay leeyihiin qaabka unuga ilkaha afeysan. Waxaa jiro 3 noocyo oo burooyinka afeysan. Burooyinka tirada xubinta way afeysantahay, iyo intooda badan waxay keenaan halista kansarka. Burooyinka simman waxay noqon karaan kansar (aad aragtid). Burooyinka afeysan ee kansarka waa dhif oo waxay noqon karaan kansar.**

Afeysan: [https://commons.wikimedia.org/wiki/File:Sessile\\_serrated\\_adenoma\\_2\\_intermed\\_mag.jpg](https://commons.wikimedia.org/wiki/File:Sessile_serrated_adenoma_2_intermed_mag.jpg)



# 4

## Burooyinka mandhaciirka iyo kansarka

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27 Burooyinka kordhiyaa halista

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29 Wakhtiga ilaa dib u baadhista

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30 Kansarka mandhaciirka

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32 Qodobada muhiimka ah



Burada mandhaciirka waa nabar leenka gudaha ee mandhaciirka weyn. Burooyinka la soo saaray waxaa loo dirayaa taqasuska cudurka in la daraaseeyo. Tallaabooyinka xiggo ee daryeelka waxay ku saleysantahay waxa dhaqtarkaaga uu arkay inta lagu jiro sheybaarka mandhaciirka iyo natiijooyinka taqasuska cudurka.

## Burooyinka kordhiyaa halista

Inta badan burooyinka aysan kansar noqon, laakin halista kansarka ay korodho haddii aad qabtay hal ama ka badan sadexdaan burooyin:

### Burada aan kansarka aheyn

Burada aan kansarka aheyn ayaa sidoo kale loo yaqaan burooyinka aan kansarka aheyn, burada dhexe, iyo burooyinka caadiga ah. Waa nooca ugu caadisan ee burada mandhaciirka. Waa nabarka qanjirka sida unugyada sameeyo xabta.

Qaar ka mid ah burooyinka aan kansarka aheyn waxay aad ugu badanyihiin inay noqdaan kansar badelkii dadka kale. Kuwaan waxaa loo yaqaan burooyinka aan kansarka aheyn ee “hore”. Burada aan kansarka aheyn ee hore waxay leedahay hal ama ka badan oo sadexdaan aastaamo:

- Heerka sare ee unugyada isbadelo – Heerka sare ee unugyada isbadelo waxay ka koobantahay unugyada u dhow inay kansar noqdaan.
- Cabir balaaran – Burada aan kansarka aheyn way balaarantahay haddii ay tahay 1 sentimiitir oo cabirka ama ka balaaran.
- Daraasada unugyada tuubooyinka dhacaanka ama dhecaanka leh – Burooyinka tuubooyinka dhacaanka ah waxay leedahay 3 noocyo

nabarka qaababka loo yaqaan tuubada, nabraha dhacaanka, iyo dhacaanka tuubada. Tuubada qaabka ayaa ugu caadisan, laakin nabraha dhacaanka leh ama burooyinka tuubooyinka dhacaanka ah ayaa aad ugu dhow inay noqdaan kansar.

### Burooyinka simman

Burooyinka simman (SSP) waxay sare ugu kacdaa darbiga mandhaciirka oo wuxuu leeyahay qaabka unuga iliga afeysan. SSPs ga hore wuxuu leeyahay halis sareyso oo inay kansar noqoto. SSP hormarsan wuxuu leeyahay ama labadaba ee labadaan muuqaalo:

- Unugyada isbadelo – SSP ayaa yeelan karto jeebka (foci) unugyada isbadelo. Burooyinka waxaa loo yaqaan burooyinka simman iyo unugyada isbadelo (SSP-d).
- Cabirka weyn – SSP wuu weynyahay haddii uu yahay 1 senti miitir oo cabirka ama ka weyn.



Dhammaan aad ayaan u mashquulsannahay nolosheena gaarka ah iyo xirada. Si kastaba, baaritaanka kansarka mandhaciirka waa dhaqso oo sahlanyahay iyo, haddii loo dhameystiro qaab waqtiyeysan, waxaa loola jeedi karaa kala duwanaanshaha u dhaxeeyo nolosha iyo dhimashada.

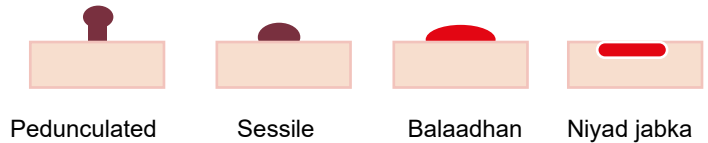
– Evan, Badbaadaha kansarka futada

## Burooyinka laga helay sheybaarka mandhaciirka

Muuqaalada qaar ee burooyinka kansarka hore waxay soo muujinayaan halis korodhay oo kansarka mandhaciirka. Muuqaalada qaar, sida cabirka burada iyo qaabka, waxaa la arki karaa inta lagu jiro sheybaarka mandhaciirka. Muuqaalada kale waxaa lagu arkaa weyneyso.

### Qaabka

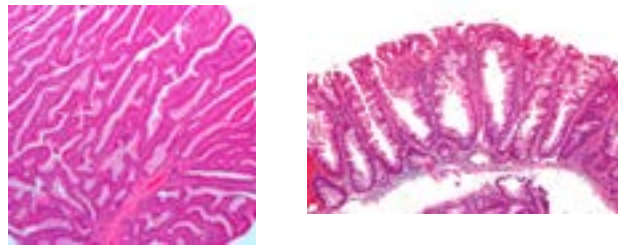
Burooyinka aanan laheyn stalk way adag tahay in la jaro oo waxay u badan tahay inay noqdaan kaansar.



### Nooca

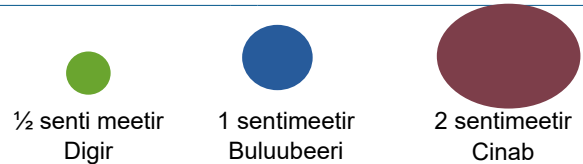
Dhamaan polyps ma laha khatar ah inay noqdaan kaansar. Polyps noqon kara kaansar waxaa kamid ah adenomas (bidix) iyo polyps fiiqan (midig).

Sawirka waxaa qaaday: Villous adenoma: commons.wikimedia.org/wiki/File:Villous\_adenoma1.jpg (bidix). Serrated polyp: commons.wikimedia.org/wiki/File:Sessile\_serrated\_adenoma\_2\_intermed\_mag.jpg (midig).



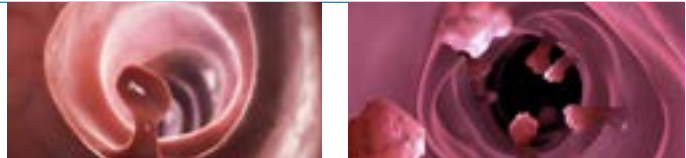
### Cabirka

Waxaa jirta khatar badan oo kaansar ah hadii polyps uu noqdo 1 sentimeetir ama ka balaadho cabir ahaan.



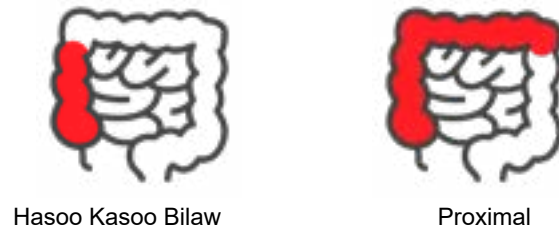
### Tirada

Waxaa jirta khatar badan oo kaansar ah hadii ay jiraan 3 ama wax ka badan oo polyps.



### Goobta

Polyps ku yaal xiidmaha hooseeya waxa uu leeyahay khatar badan oo kaansar (bidix). Polyps yar ee caaga u eeg ee ku yaal xiidmaha waxa uu u baahan karaa shaybaadh badan (midig).



### Dysplasia

Dysplasia waxaa weeye korniin aan caadi ahayn. Dysplasia aad u sareeya ayaan in badan caadi ahayn marka loo eego dysplasia dhexe.

Sawirka waxaa qaaday: Normal colon: commons.wikimedia.org/wiki/File:Colon\_intermed\_mag.jpg (bidix). Low-grade dysplasia: commons.wikimedia.org/wiki/File:Tubular\_adenoma\_-\_colon\_intermed\_mag.jpg (dhexda). High-grade dysplasia: commons.wikimedia.org/wiki/File:Colon\_adenoma\_with\_high-grade\_dysplasia\_intermed\_mag.jpg (midig).



Xiidmaha Caadiga ah      Dysplasia heeryar      Dysplasia heer sare

## Hagaha 4. Ku celinta shaybaadhka kadib marka la iska jaro polyyps yar

Tirada iyo nooca polyp ee la iska jaray

— Mudada dib u baadhista colonoscopy

— Hadii natiijada dib u baadhista ay caadi tahay, mudada ilaa shaybaadhka xiga waa la kordhiyaa

1 ama 2 adenomas	7 ilaa 10 sano	10 sano
1 ama 2 sessile polyyps fiiqan	5 sano	10 sano
Burada afka leh ee soo jireenka ah	3 sano	5 sano
1 ama 2 adenomas sare (dysplasia sare, villous ama tubulovillous histology)	3 sano	5 sano
1 ilaa 2 sessile polyyps fiiqan oo leh dysplasia	3 sano	5 sano
3 ilaa 10 adenomas ama sessile polyyps fiiqan	3 sano	5 sano
11 ama ka badan adenomas ama sessile polyyps fiiqan	1 ilaa 3 sano	Tirada badan ee polyyps ee aad qabtaa waxay muujinaysaa inaad qabto xanuunka polyposis syndrome. Hadii shaybaadhka hide siduhu uu muujinayo in aanad marin ama lagugu samaynin, dib isku baadh.

### Burada afka leh ee soo jireenka ah

Burada afka leh ee soo jireenka ah (TSAs) waa naadir. Waxay leeyihiin qaab korniin fiiqan oo waxay u muuqaan mid sida iliga oo kale ah. Waxay yeelan karaan dysplasia. Hadii aad hore u qaaday TSA, waxay u badan tahay inaad qaado polyp kale taas oo khatar badan ugu jira inuu noqdo.

### Wakhtiga ilaa dib u baadhista

Marka la arko mid ama laba adenomas ee la iska jaro, wakhtiga u dhaxeeya ilaa dib u baadhistu waa

lamid ah oo khatar dhexe ayuu leeyahay. Hadii polyp uu soo baxo, waxay qaadanaaysaa sanado badan inuu isku badalo kaansar. Khatarta dib u soo noqoshada polyp waxay ku badan tahay polyp fiiqan, markaa mudada u dhaxaysa ayaa gaaban. **Eeg Tilmaamaha 4** ee mudada u dhaxaysa shaybaadhka polyyps yar marka la arko ee la jaro.

Tirada badan ee polyyps soo baxda ayaa leh walaac. In la yeesho 3 ilaa 10 polyyps waxa uu kordhiyaa khatarta kaansarka xataa hadii polyyps aanu balaadhan. In la yeesho wax ka badan 11 polyyps waxaa keeni kara xanuunka kaansarka la

## Hagaha 5. Dib u baadhista kadib marka la iska jaro polyps kaansarka kahor ee balaadhan

Nooca polyp ee la iska jaray	Mudada dib u baadhista colonoscopy	Hadii natiijada dib u baadhista ay caadi tahay, mudada ilaa shaybaadhka xiga waa la kordhiyaa
Pedunculated polyp	3 sano	
Polyp Sessile, balaadhan, ama kakan oo aan lahayn waxyaabo kale oo laga warwaro	1 ilaa 3 sano	3 sano
Polyp sessile, balaadhan ama kakan: <ul style="list-style-type: none"> <li>• Qaba khatar badan oo dib u soo noqosho</li> <li>• Iyada oo yaryar oo jarjaray</li> </ul>	6 bilood	1 sanad 3 sano
Polyp sessile, balaadhan ama kakan: <ul style="list-style-type: none"> <li>• Khatar badan oo kaansar daran ah</li> <li>• Aan si buuxda loo jarin</li> </ul>	Waxaa lagu guddin karaa khabiirka endoscopic ee polyps wayn ama lagu guddin karaa dhakhtarka qaliinka	

kala dhaxlo. Dhaqtarkaaga waa inuu kuu gudbiyaa baaritaanka hiddaha.

Burooyinka weyn way adkaan karaan in la saaro oo waxay yeelan karaan muuqaalo kale oo kordhiya halista kansarka mandhaciirka. Xaaladahaan, baaritaanka waxay dhaceysa wax badan ama waxaa lagu guddinayaa dhaqaatiir ah taqasusyo oo ka saarida burooyinka weyn. **Fiiri Hagaha 5** oo hakadyada baaritaanka kadib markii burooyinka weyn la ogaado oo laga saaro.

Caadi ahaan, burooyinka tirada xubinta ma noqdaan kansarka. Dhaqaatiirta waxay baranayaan haddii burooyinka badan ee weyn noqdaan kansar. Burooyinka tirada badan way

afeysanyihiin oo waxaa loo qaadan karaa sida burooyinka simman.

Haddii ay jiraan soo noqosho, dhaqtarkaaga caloosha wuu ka saari karaa burada ama u gudbiyaa dhaqtar kale oo ku taqasusay burooyinka mandhaciirka.

## Kansarka mandhaciirka

Qiyaastii 1 oo 24 kii qof ee Mareykanka waxaa ku dhacayo kansarka mandhaciirka. Haddii uu kugu dhacay kansarka mandhaciirka, waxaa kugu dhacay halis korodhay oo kansarka mandhaciirka cusub ee (labaad). Halistaan lagama wado soo noqodka kansarka koowaad, oo loo yaqaan soo



noqodka. Halistaan waxaa loogu talloagalay buro cusub oo noqoneyso kansar waqti kadib.

Wixii warbixin ah ee kormeerida kansarka, fiiri *NCCN Guidelines ee Bukaanaada: Kansarka Mandhaciirka* ama *Kansarka Futada* ee [NCCN.org/patientguidelines](https://www.nccn.org/patientguidelines). Tilmaamahaan ayaa sidoo kale ka hadlo baaritaanka dhacaanka bayaloojiga ee isbadelada unugyada (MSI) oo loogu talloagalay dhammaan dadka ku dhacay kansarka mandhaciirka. Haddii unugyada kansarka ay yeeshaan MSI, waanin sidoo kale laga baaro cudurka la iska dhaxlo. Lahaanshaha cudurka la iska dhaxlo ayaa kordhiya halista kansarka mandhaciirka.

Saynisyahanada waxay ogaadeen wax badan oo ku saabsan kansarka. Sida darteed, daaweynta maanta waxay si wanaagsan ugu shaqeysaa badelkii daaweynada la soo dhaafay. Sidoo kale, dad badan ee qabo kansar ayaa leh wax ka badan dooqa hal daaweyn.



## Yay ugu samaayn badan tahay?



Maraykanka, Dadka madaw ayay u badan tahay inay qaadaan kaansarka xiidmaha, ay qaadaan iyaga oo yaryar oo ay ku dhintaan kaansarka marka loo eego qoomiyadaha kale.

Sidoo kale, Dadka madaw waxay la kulmaan caqabado badan oo shaybaadhka kaansarka mandhaciirka ah.

Waxa aad qaadi kartaa talaabooyin aad ku heleyso shaybaadhka oo aad ku yaraynayo khatarta kaansarka xiidmaha:

- ✓ Waxa aad bilawdaa ka sheekeyntiisa wakhti hore. Wixii ka horeeya da'da 45 jir, waxa aad kala hadashaa khatartaada kaansarka xiidmaha bixiyahaaga daryeelka caafimaadka.s
- ✓ Baro taariikhda qoyskaaga ee kaansarka xiidmaha, taas oo u baahan karta shaybaadh hore.
- ✓ Waxa aad wax ka barataa ikhtiraayada badan ee jira ee shaybaadhka kaansarka xiidmaha.
- ✓ Waxa aad bilawdaa shaybaadhka wakhtigiisa oo jadwalka dib ha uga dhigin shaybaadhka la socodka.
- ✓ Cun cunto kaa ilaalinaysa kaansarka xiidmaha oo iska ilaali cuntooyinka aan caafimaadka qabin.

## Qodobada muhiimka ah

- Waxaad ku jirtaa halis korodhay oo kansarka mandhaciirka haddii uu kugu dhacay burooyinka qaar. Kuwaan waxaa ku jiro burada aan kansarka aheyn iyo burooyinka afeysan.
- Kadib markii laga saaro burooyinka, waqtiyeynta baaritaanka xiggo wuxuu ku saleysnaanayaa dhoor xaqiiqo, sida tirada burooyinka. Waqtiyeynta ayaa sidoo kale ku saleysan haddii burooyinka ay leeyihiin unugyada u eeg caadiyan, aanan si buuxdo looga saarin, ama qabaan muuqaalada halista sareyso.
- Haddii uu kugu dhacay kansarka mandhaciirka, waxaa kugu dhacay halis korodhay ee qaadista burada kansarka ah ee cusub. Raac tallooyinka kormeerida ee tilmaamaha daaweynta.



Colonoscopy waxa uu u sahlaa dhakhaatiirta inay xaliyaan xanuunka daalka mudada dheer. Inaad maqasho kalmadaha "waxa aad qabtaa kaansar" waxay badashaa nolosha. Laakiin in la ogaaday kaansarkayga xiidmaha ee heerka II wakhti hore waxay badbaadisay noloshayda.

– Caafimaad qaba

# 5

## Xanuunka oolka caloosha

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34 Oolka mudada dheer iyo kaansarka

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35 Bilawga shaybaadhka kaansarka

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35 Wakhtiga ilaa dib u baadhista

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37 Qodobada muhiimka ah



Xanuunka oolka calooshu waxa uu keenaa olol iyo waxyeelo mudo dheer ah oo dheefshiid ah. Labada nooc ee xanuunkan ee badanaa keena kaansarka xiidmuhu waa Crohn's colitis iyo ulcerative colitis.

## Oolka mudada dheer iyo kaansarka

Oolku waxaa weeye jawaab celinta daran ee jidhka. Waxa uu dhacaa marka uu shay uu kiciyo nidaamka difaaca jidhka. Nidaamkan waxa uu u diraa unugyada difaaca inay weeraraan waxa kiciyay. Weerarka ayaa keena astaamo, sida barar iyo damqasho.

Oolka caadiga ah waxa uu ka caawiyaa jidhka inuu bogsado. Oolka mudada dheer waxa uu keeni karaa waxyeelo. Oolka mudada dheer waxa uu keeni karaa unugyo aan si caadi ah u korin oo loo yaqaan dysplasia. Dysplasia waxa uu isku badali karaa kaansar mudo kadib.

Xanuunka oolka calooshu (IBD) waxaa weeye jawaab celin aan caadi ahayn oo nidaamka difaaca ah oo unugyada qaar ee digaarka xiidmaha. Crohn's colitis oo nooca loo yaqaan xanuunka Crohn's oo saameeya xiidmaha. Ulcerative colitis waxa uu ku dhacaa xiidmaha iyo malawadka.

Qaadida Crohn's colitis ama ulcerative colitis waxay kordhisaa khatartaada kaansarka xiidmaha. Khatartu waxay sii badataa hadii aad qabto waxyaabaha soo socda:

- Olol firfircoon ama daran, oo mudo dheer socda oo xiidmaha ah.

- Olol xadi badan oo xiidmaha ah.
- Dysplasia ku yaal digaarka xiidmaha. Heerka sare ee unugyada isbadelo waxay ka koobantahay unugyada u dhow inay kansar noqdaan.
- Xanuun loo yaqaan sclerosing cholangitis, oo keena olol iyo dhuubnaan tuunbooyinka beerka ilaa xiidmaha.
- Qaraabo leh kaansarka xiidmaha, gaar ahaan hadii kaansarku uu ku dhacay wixii ka horeeyay 50 sano jir.

Hadii aad qabto olol kaliya ku dhaca malawadka, waxa aad mari kartaa shaybaadhka soo socda ee khatarta caadiga ah. Akhri Cutubka 2 ee macluumaadka shaybaadhka.



Waxaa muhiim ah in la ogaado astaamaha kaansarka xiidmaha oo la barto jidhkaaga. Ha sugin ama u malayn in kaansarku aanu kugu dhici doonin.

– Lara, ka badbaadaha kansarka Rectal

## Bilawga shaybaadhka kaansarka

Xanuunka Crohn's iyo ulcerative colitis waxay badanaa bilawdaan wixii ka danbeeya 30 jirka. Waxaa jira mar kale oo ay kor u kacaan labada xanuunba nolosha inta danbe.

Bilaw shaybaadhka kaansarka xiidmaha wakhti hore oo adiga kugu haboon:

- 8 sano kadib marka astaamaha IBD ay bilaabmaan
- Wakhti ka horeeya 8 sano hadii taariikhda qoyska ay ku jirto kaansarka xiidmuhu
- Sanadkan hadii aad martay sclerosing cholangitis

Dysplasia way adag tahay in la arko maadaama oo ay badanaa ku dhacdo si balaadhan iyo meelaha caadiga u eeg ee digaarka xiidmaha. Waxaa wanaagsan in la is baadho marka IBD aanu firfircoonayn iyada oo la adeegsanayo qaabka ugu wanaagsan ee lagu arkayo gidaarka xiidmaha.

Shaybaadhku waxa uu markasta noqonayaa colonoscopy. Dhakhtarkaaga ayaa si aayar ah u gelin doona aalada dabadaada iyo xiidmahaaga iyada oo lagu suuxiyay. Sadexda ikhtiyaar ee IDB waa:

- Endoscopy aad u muuqaal wanaagsan oo leh laydh cad (HD-WLE) waxa uu soo saaraa malaayiin dhibcood oo midab ah (bigal) sawirada xiidmahaaga. Sawirad way cadaadaan marka tirada bigsaladu ay kordhaan.
- Dye-spraying chromoendoscopy iyada oo la isticmaalayo endoscopy ayaa lagu muujiyaa gudaha xiidmaha.
- Chromoendoscopy muuqaalka ah (VCE) iyada oo la adeegsanayo sawir dhuuban oo aan loo adeegsan dyes halkii laga adeegsan

lahaa laydh cad oo la filter gareeyay. Noocan waxaa loo yaqaan VCE obtikaalka.

Inta la wado shaybaadhka, ugu yaraan 32 muunadood oo unugyada ah ayaa laga jari doonaa (biopsied) afar qaybood oo xiidmaha ah. Dhakhtarkaaga ayaa go'aamin doona unuga la jari doono oo waxa uu isku jirsiin doonaa biopsies 10 sentimeetir. Muunado badan ayaa laga jari doonaa wixii aag dhuuban ah (adkaansho), cufka ku yaal gidaarka xiidmaha, ama wixii kale ee aag ah ee aan caadi ahayn.

Sidoo kale, inta la wado chromoendoscopy, dhakhtarkaagu waxa uu samayn doonaa biopsies unugyada aan caadi u eekeyn oo lagu arko dye ama laydh gaar ah.

## Wakhtiga ilaa dib u baadhista

Hadii shaybaadhkaagii ugu danbeeyay lagu arkay adkaansho, waa inuu ku eekaa khabiirka IBD. Adkaanshaha xiidmuhu waxay noqon karaan kaansar. Talaabada xigta ee daryeelka colectomy. Colectomy waxaa weeye qaliin lagu jaro qayb ama dhamaan xiidmahaaga. Hadii shaybaadhka lagugu sameeyo, waa in dib lagu baadhaa 1 sano kadib.

Hadii polyps ama dysplasia aan lagugu arag, dib isku baadh 1 sano kadib hadii aad qabto khatar badan oo kaansar ah. Waxyaabaha khatar badan lagu garto waxaa kamid ah olol taagan, taariikh qoyska ah, iyo sclerosing cholangitis ee hore. Dib isku baadhida 2 ilaa 3 sano hadii ay jirto khatar yar oo kaansar.

Polyps badanaa waa la iska jaraa inta la wado shaybaadhka kaansarka. Polyps qaar ayaa u baahan kara in la iska jaro endoscopic mucosal resection (EMR) ama endoscopic submucosal dissection (ESD). Inta lagu jiro EMR, polyp kor ayaa looga qaadaa digaarka xiidmaha oo waxaana laga saaraa xadiga loo yaqaan snare. ESD waxa uu isticmaalaa shay sida mindida ahoo lagu jaro polyps.

Hadii polyp oo dhan aan la jarin, waxaa lagu gudbin karaa xarunta khabiirada IBD. Xarunta, polyp ayaa lagu jari karaa endoscopically. Hadii kale, waxa aad la kulmi kartaa dhakhtarka qaliinka oo aad kala hadlayso inaad marto colectomy.

Dib ayaa lagaaga baadhi doonaa kaansarka xiidmaha hadii dhamaan polyp lagaa jaro. Polyps waxaa loo jaraa aayar aayar ama waxa aad qabtay khatar badan oo kaansar oo dysplasia heer sare ah. Mararkan oo kale, dib isku baadh 3 ilaa 6 bilood kadib. Hadii aad qabto waxyaabaha khatarta badan ee kaansarka xiidmaha, dib isku baadh 1 sano kadib. Waxa aad sugi kartaa 2 ilaa 3 sano hadii aanad qabin xaaladaha khatarta badan.

Dysplasia aan muuqan laguma arko endoscope. Waxaa lagu arki karaa muunadaha caadiga ah ee lagu jaray endoscopy-ga laydhka cad. Dhakhtarka xanuunada faaha ee khabiirka ku ah nidaamka dheefshiidka ayaa kaa caawin kara. Hadii dysplasia la xaqiijiyo, waa in aad la kulantaa khabiirka IBD. Talaabooyinka xiga ee daryeelku waxay noqon kartaa chromoendoscopy hadii aanad hore u marin, ama shaybaadh joogto ah.

**Eeg Tilmaamaha 6** wixii mudada dib isku baadhista ee IBD ah.

## Hagaha 6. Dib isku baadhida ku salaysan xanuunka oolka caloosha (IBD)



**Natiijada shaybaadhka kahor colonoscopy**



**Wakhtiga ilaa dib u baadhista**

Lama arag wax polyps ama dysplasia ah

- Dib isku baadh 1 sano kadib hadii aad qabto adayg yar oo aan qaliinka lagu dawaynin
- Dib isku baadh 1 sano kadib hadii aad qabto xaaladaha khatarta sare
- Dib isku baadh 2 ilaa 3 sano kadib hadii aanad qabin xaaladaha khatarta ah

Dysplasia “aan muuqan”—laguma arki karo endoscope —waxaana la ogaaday

- Waa inaad la kulanto khabiirka IBD
- Waxaa dib laguugu baadhi karaa iminka bilaa chromoendoscopy hadii aan hore laguugu samaynin
- Waxaa lagu gudbin karaa dhakhtarka qaliinka

Waxaa la heley midh polyps ama wax ka badan

- Dib u baadhida 3 ilaa 6 bilood kadib hadii polyp loo jaran qurub qurub
- Dib u baadhida 3 ilaa 6 bilood hadii polyp uu qabo dysplasia heer sare
- Dib isku baadh 1 sano kadib hadii aad qabto xaaladaha khatarta sare
- Dib isku baadh 2 ilaa 3 sano kadib hadii aanad qabin xaaladaha khatarta ah

## Qodobada muhiimka ah

- Dadka qaba Crohn's colitis iyo ulcerative colitis waxay khatar badan ugu jiraan kaansarka xiidmaha.
- Wakhtiga caadiga ah ee ay tahay in la bilaabo shaybaadhka kaansarka xiidmuhu waa 8 sano kadib marka ay bilaabmaan astaamaha IBD. Shaybaadhku waxa uu bilaabmaa wakhti hore hadii qoysku uu leeyahay taariikh hore ama sclerosing cholangitis ee kowaad.
- Dysplasia way adkaan kartaa in lagu arko colonoscopy caadiga ah, markaa qaababka cusub oo si dhaanta loogu arko ayaa la isticmaalaa.
- La kulan khabiir IBD ah hadii aad qabto dysplasia adag ama aan muuqan, ama hadii polyp aan lagaa jarin. Wakhtiga ilaa inta mudada shaybaadhka xiga ee 3 bilood ilaa 3 sano ayaa u dhaxeeyaa oo waxa ay ku salaysan tahay khatarta kaansarka.





## Khayraadka

### Kansarka mandhaciirka

#### **Fight Colorectal Cancer**

[FightColorectalCancer.org](https://fightcolorectalcaner.org)

#### **National Cancer Institute (NCI)**

[cancer.gov/types/colorectal](https://cancer.gov/types/colorectal)

#### **National Comprehensive Cancer Network (NCCN)**

Colon Cancer

[nccn.org/patients/guidelines/content/PDF/colon-patient.pdf](https://nccn.org/patients/guidelines/content/PDF/colon-patient.pdf)

Rectal Cancer

[nccn.org/patients/guidelines/content/PDF/rectal-patient.pdf](https://nccn.org/patients/guidelines/content/PDF/rectal-patient.pdf)

### Shaybaadhka kaansarka xiidmaha

#### **Fight Colorectal Cancer**

[fightcolorectalcaner.org/resources/colorectal-cancer-screening](https://fightcolorectalcaner.org/resources/colorectal-cancer-screening)

#### **MyPathologyReport**

[mypathologyreport.ca](https://mypathologyreport.ca)

#### **National Cancer Institute (NCI)**

[cancer.gov/types/colorectal/patient/colorectal-screening-pdq](https://cancer.gov/types/colorectal/patient/colorectal-screening-pdq)

## Xanuunka kaansarka la kala dhaxlo

### **MedlinePlus**

Familial adenomatous polyposis

[medlineplus.gov/genetics/condition/familial-adenomatous-polyposis](https://medlineplus.gov/genetics/condition/familial-adenomatous-polyposis)

Cudurka la iska dhaxlo

[medlineplus.gov/genetics/condition/lynch-syndrome](https://medlineplus.gov/genetics/condition/lynch-syndrome)

## Xanuunka ololka caloosha

### **Cleveland Clinic**

[my.clevelandclinic.org/health/diseases/15587-inflammatory-bowel-disease-overview](https://my.clevelandclinic.org/health/diseases/15587-inflammatory-bowel-disease-overview)

## Ka Badbaadida

### **National Comprehensive Cancer Network (NCCN)**

Survivorship Care for Healthy Living

[nccn.org/patients/guidelines/content/PDF/survivorship-hl-patient.pdf](https://nccn.org/patients/guidelines/content/PDF/survivorship-hl-patient.pdf)

Survivorship Care for Cancer-Related Late and Long-Term Effects

[nccn.org/patients/guidelines/content/PDF/survivorship-crl-patient.pdf](https://nccn.org/patients/guidelines/content/PDF/survivorship-crl-patient.pdf)

# Kaalmaha ay tahay in la barto

## **burada aan kansarka aheyn**

Unug sida dheecaanka ah oo waynaada oo soo saara malax. Sidoo kale loo yaqaan adenomatous polyp, polyp soo jireenka ah, iyo polyp caadiga ah.

## **dabada**

Daloolka ay kasoo baxdo saxaradu jidhka.

## **biopsy**

Qaliin lagu jaro unug ama lagu nuugo muunad dareere ah si looga baadho xanuun

## **qaraabada dhiiga**

Dadka dhiiga la wadaago ee qaraabada ah.

## **jaantuska cufka jidhka (BMI)**

Cabirka jidhka ee baruurta kaas oo ku salaysan dherarka iyo miisaanka.

## **colectomy**

Qaliinka lagu jaro xiidmaha.

## **xiidmaha**

Unugyada laalaaban ee cuntada la cuno ay dareeraha inta ay iskaga badasho ay isku badasho adkaha.

## **colonoscope**

Aalad la iska geliyo dabada oo xiidmaha lagaga shaqeeyo.

## **sheybaarka futada dabacsan**

Qaab lagu eego gudaha xiidmaha iyada oo la adeegsanayo aalad la iska geliyo dabada.

## **computed tomography (CT) colonography**

Raajiga xiidmaha.

## **Cudurka marinka dheefshiidka**

Xaalad caafimaad oo keenta barar mudo dheer ah.

## **Xanuunka Crohn**

Xaalad caafimaad oo keenta barar mudo dheer oo nidaamka dheefshiid ah.

## **depressed polyp**

Korniin aan caadi ahayn oo ka hooseeya unugyada ku xeeran.

## **nidaamka dheefshiidka**

Unugyo u badala cuntada qaybo yaryar oo jidhku u isticmaalo tamar.

## **dye-spraying chromoendoscopy**

Nidaam lagu eego gudaha xiidmaha iyada oo la adeegsanayo bar wasakh iyo aalad soo saarta sawir wanaagsan.

## **dysplasia**

Qaabka korniin unug oo aan caadi ahayn.

## **endoscope**

Aalad la geliyo daloolka dabiiciga ah si gudaha jidhka shaqo looga qabto.

## **endoscopic mucosal resection (EMR)**

Nidaam joojisa korniinka iyada oo kor u qaada oo ku jarta xadhiga daloolka dabiiciga ah la geliyay.

## **endoscopic submucosal dissection (ESD)**

Nidaam lagu jaro unuga koray mindi gaar ah oo la iska geliyo daboolka dabiiciga ah.

## **esophagus**

Unug sida tuunbada ah oo kale oo u dhaxeeya cunaha iyo caloosha.

## **FAP**

familial adenomatous polyposis

## **shaybaadhka fecal immunochemical (FIT)**

Shaybaadhka lagu eego wax yar oo dhiig soo raaca saxarada.

## **flat polyp**

Korniin aan caadi ahayn oo aan kasoo bixin ama waxyar kasoo baxa unugyada ku xeeran.

## **flexible sigmoidoscopy**

Qaab lagu eego gudaha xiidmaha qayta ugu danbaysa iyada oo la adeegsanayo aalad la iska geliyo dabada.

### **endoscopy muuqaalka wanaagsan ee laydhka cad (HD-WLE)**

Qaab lagu eego gudaha xiidmaha iyada oo abuura sawir wanaagsan oo la adeegsanayo aalad la iska geliyo dabada.

### **shaybaadhka dhiiga fecal occult ee aadka u xasaasiga ah**

Shaybaadhka lagu eego wax yar oo dhiig soo raaca saxarada.

### **HNPCC**

kaansarka hidada ah ee aan ahayn polyposis xiidmaha

### **hyperplastic polyp**

Korniin badan oo unugyada oo qaabka ilig fiiqan oo kale ah.

### **sawirid**

Shaybaadh soo saaro sawiro (muuqaalo) jidh gudahiisa ah.

### **xanuunka ololka caloosha**

Koox xaalado caafimaad oo keenta barar mudo dheer oo nidaamka dheefshiid ah.

### **xiidmaha**

Unuga ay cunto marto marka ay caloosha ka baxdo. Sidoo kale loo yaqaan caloosha. Waxa loo qaybiyaa 2 qaybood oo loo yaqaan mindhicir yarada iyo waynada.

### **dhiig yaraanta birtu ku yar tahay**

Xaalad caafimaad oo tirada unugyada dhiiga cas ay ku yar tahay birta ku yar lafteeda.

### **laxative**

Dawooyinka loo isticmaalo si loogu nadiifiyo xiidmaha.

### **qanjidh**

Unuga dhiiga cad oo dareere cad ku jiro.

### **xididka qanjidhka**

Qaab sida tuunbada ah oo kale ah oo yar oo dareeraha maraan loo yaqaan qanjidh maraha.

### **Cudurka la iska dhaxlo**

Xanuun qoyska dhaxdiisa ah oo kordhiya fursada lagu qaadi karo kaansarka

### **microsatellite instability (MSI)**

Khaladka la sameeyay ee yar, soo noqnoqda ee qaybaha DNA-yada inta lagu wado nidaamka naqlinta maadaama oo ay jirto xaalad aan caadi ahayn oo nidaamka dayactirka ahi.

### **dayactirka aan is lahayn ee (MMR) hide sidaha**

Tilmaamaha ku jira gudaha unugyada ee borootiinta ee saxa khaladaadka DNA ee ka dhax dhaca nuqulada DNA-ga ee la sameeyay.

### **mt-sDNA**

DNA saxarada oo bartilmaameedyo badan

### **mucosa**

Qaybta gudaha ee digaarka xiidmaha.

### **Shaybaadhka ku salaysan DNA saxarada oo bartilmaameedyo badan (mt-sDNA)**

Shaybaadh lagu eego samayska hide sidaha ee kaansarka xiidmaha ee saxarada.

### **pathologist**

Dhakhtarka khabiirka ku ah shaybaadhka unugyada si looga eego xanuunka.

### **pedunculated polyp**

Korniin aan caadi ahayn oo sida barkimo waraabada oo kale ah.

### **polyp**

Korniin badan oo gidaarka gudaha ah oo nidaamka dheefshiidka ah.

### **polypectomy**

Nidaamka lagu jaro unugyada aadka u kora.

### **polyposis syndromes**

Koox xanuuno ah oo qoyska ah oo keena colorectal polyps badan.

### **primary sclerosing cholangitis**

Xaalad xanuun oo keena olol iyo yaraan tuunbada beerka ilaa xiidmaha ah.

### **malawad**

Unuga haya saxarada ilaa inta ay jidhka ka baxayso.

### **dib usoo noqosho**

Soo noqodka kaansarka kadib marka in mudo ah laga ladnaado.

### **xaaladaha khatarta**

Mararka qaar kordhinta fursada xaalad.

### **SD-WLE**

sharaxa caadiga ah ee endoscopy laydhka cad

### **sessile polyp**

Korniin badan oo unugyada ah ku xeeran xaga sare iyo hoosta.

### **sessile serrated polyp (SSP)**

Korniin badan oo unugyada kordha iyo duubka dusha iyo fiiqnaanta iliga ee qaabka unuga. Sidoo kale loo yaqaan sessile serrated adenoma.

### **sessile serrated polyp with dysplasia (SSP-d)**

Korniinka unugyada ee qaabka fiiqa ilida iyo korta, duuban.

### **saxaro**

Cuntada aanu isticmaalin jidhku ee kasoo baxda. Sidoo kale loo yaqaan xaarka.

### **adkaansho**

korniin unug oo aan caadi ahayn.

### **serrated adenoma soo jireenka ahaa (TSA)**

Korniin badan oo unugyada oo qaabka ilig fiiqan oo kale ah.

### **cudurka saxarada raaga**

Xaalad caafimaad oo keenta barar mudo dheer ah malawad ama xiidmaha.

### **virtual chromoendoscopy (VCE)**

Qaab lagu eego gudaha xiidmaha iyada oo la adeegsanayo aalad laydhadhka kala saarka la iska geliyo dabada. Sidoo kale loo yaqaan isha VCE.



**nala wadaag.**

### **Qaado sahankeena**

Oo ku caawi in laga dhigo  
NCCN Guidelines ee Bukaanaada inay  
u wanaagsan tahay qof walba!

[NCCN.org/patients/comments](https://www.nccn.org/patients/comments)

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