

ANALYSIS OF FACTORS PREDICTING BILATERAL LATERAL NECK METASTASES WITH UNILATERAL PAPILLARY THYROID CARCINOMA

Jun, Hak Hoon¹, Kim, Seok-Mo²; Lee, Yong Sang².

¹Department of Surgery, CHA Bundang Medical Center, CHA University, Seongnam-si, Republic of Korea; ²Gangnam Severance Hospital, Yonsei University College of Medicine, Gangnam, Republic of Korea.

Background/Purpose: Papillary thyroid carcinoma (PTC) frequently involves lymph nodes in lateral compartment, but unilateral PTC rarely metastasizes to bilateral lateral nodes. The aim of this study was to analyze the clinicopathologic features of patients with PTC limited in one lobe showing bilateral lateral neck node metastases (N1b).

Methods: Between January 2010 and October 2012, 457 patients with unilateral PTC with lateral neck metastasis were analyzed. Of these patients, 426 had ipsilateral metastasis (Group I) and 31 had bilateral metastases (Group II). The clinicopathologic characteristics of the two groups were evaluated.

Results: Age, thyroiditis, capsular invasion of primary tumor and central neck nodes metastasis were similar in two groups. Bilateral metastases were significantly related to these clinicopathologic features; male (25.5% vs. 51.6%; $p=0.001$), the mean size of primary tumor ($1.31 \pm 0.90\text{cm}$ vs. $1.87 \pm 1.06\text{cm}$, $p=0.002$), multifocality (21.8% vs. 38.7%, $p=0.022$) and aggressive subtype in PTC (8.7% vs. 74.2%, $p=0.005$).

Discussion & Conclusion: Even though the primary tumors are located in one lobe, the male patients, with multifocal tumor, primary tumor size $> 1\text{cm}$, and aggressive subtype of PTC should undergo meticulous preoperative evaluation of bilateral lateral neck compartments to determine the need for bilateral lateral neck dissection.