

TOTAL THYROIDECTOMY IN PAPILLARY THYROID CANCER: EXPERIENCE FROM AN UNIVERSITY HOSPITAL OF IODINE-DEFICIENT REGION.

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Background/Purpose: Subgroup of Papillary thyroid cancer patients are known to behave aggressively. We report our experience of papillary thyroid carcinoma and assess the impact of total thyroidectomy on recurrence or survival.

Methods: During 2007-12, 76 patients of papillary thyroid cancer were managed at department of surgery. Age of the patients ranged from 14-70 years with mean age of 40.6 years. The male: female ratio was 2:3.

Results: Tumor characteristics: size ranged from 0.8-10 cm, extrathyroidal spread in 14 (18.4%) while distant metastases were seen in 9 (11.8%). Procedures included total thyroidectomy(76); modified / radical neck dissection(21), shaving of tracheal cartilage (2), excision of distant metastases(1).

Multicentricity was found in 18(23%) and microcarcinoma 4 . Aggressive variants included tall cell variant in 3, insular in 2, sclerosing in 1, Oncocytic variant in 2. 50 were categorized as low-risk and 26 high-risk. The follow-up ranged from 3 months to 5 years. 18 were lost in follow up. One had locoregional recurrence while disease specific mortality occurred in 3 because of pulmonary metastases.

Discussion & Conclusion: Though 34% patients belonged to high-risk, disease specific mortality and recurrence was seen only in 5% cases. Total thyroidectomy reduces loco-regional recurrence and improves survival.