

REOPERATIVE THYROID SURGERY IN MULTINODULAR GOITER

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Background/Purpose: Reoperative thyroid surgery is an operation associated with a higher complication rate than that seen with the initial operation. In patients who have undergone less than a total thyroidectomy for either benign or malignant thyroid diseases, the potential exists for recurrent or residual disease in the remaining thyroid tissue

Methods: We analyze the surgical indications and complications occurred in 32 cases of reinterventions for multinodular goiters with or without degeneration, in a 10-year period. Reoperative thyroid surgery was performed on 32 patients with benign or malignant thyroid diseases. Altogether 32 patients has undergone one prior thyroid operation. These patients were classified as undergoing a completion thyroidectomy (group 1) or an operation for recurrent disease (group 2). Group 1 (12 patients) were those who underwent a secondary thyroid operation regardless of whether the malignancy was diagnosed by permanent sections or the thyroid remnant was too large for adequate postoperative radioiodine therapy. In group 2 (20 patients), reintervention was carried out for recurrent benign or malignant disease.

Results: Group 1 consisted of 12 of the 32 patients, and they underwent completion total thyroidectomy. Of 20 group 2 patients, 4 underwent reoperative surgery for recurrent thyroid cancer. The remaining 16 patients with a history of benign thyroid disease underwent revision surgery for recurrent thyrotoxicosis (3 patients, 9,3%), recurrent nodular goiter (8 patients, 25%) or recurrent multinodular goiter (5 patients, 15,6%) .

Discussion & Conclusion: Though some surgeons hesitate to do revision thyroid surgery for fear of the complications, the overall incidence of complications is low, this kind of surgery being performed safely with little morbidity to the patient.