

NEW POSSIBILITIES OF FINE NEEDLE ASPIRATION BIOPSY (FNAB) IN DIAGNOSIS OF THYROID CANCER METASTASES

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Background/Purpose: To evaluate the possibility of the determination of thyroglobulin (Tg) and calcitonin in neck regional lymphatic nodules for the early diagnosis of thyroid cancer metastases.

Methods: We have examined 127 patients – 114 of them with papillary and 13 with medullary carcinoma. Earlier all the patients underwent thyroidectomy with central lymphodissection. We have carried out FNAB of lymphatic nodules followed by cytological examination. Apart from FNAB aspirate was taken in a test tube for the determination of Tg and calcitonin.

Results: Metastases of papillary carcinoma in lymphatic nodules have been verified cytologically in 19 patients of 27 and of medullary carcinoma – in 7 patient of 3. All the 26 patients showed tumor markers in aspirate from lymphatic nodules – Tg (200 – 3000) and calcitonin (more than 200) in considerable amount. All the patients underwent surgery. In all cases tumor metastases in lymphatic nodules histologically were confirmed. In 8 patients Tg in aspirates from lymphatic nodules was also found in considerable quantities. At the same time thyroid cancer metastases were not confirmed cytologically. All the 8 patients underwent surgery. During postoperative histological examination lymphatic metastases were confirmed.

Discussion & Conclusion: The discovery of Tg and calcitonin in aspirates of lymphatic nodules allows to diagnose thyroid cancer metastases at early stages.

The determination of Tg and calcitonin in regional neck lymphatic nodules must be included in the standard of postoperative observation of patients with thyroid differentiated and medullary carcinoma.