

HISTO-PRONOSTIC FACTORS OF METASTATIC DIFFERENTIATED THYROID CANCER IN 80 PATIENTS

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Background/Purpose: The objective of the study was to investigate risk factors in differentiated thyroid cancer (DTC) with distant metastasis.

Methods: Among a total of 1759 patients treated and followed for DTC at the nuclear medicine department of CHU Bab El Oued, 80 patients with distant metastasis were recruited for this study. All patients have received iterative doses of radioiodine and had regular follow up

Results: Results of pathology showed pure papillary in 29, pure follicular in 18, follicular variant of papillary in 16, and others histology forms in 17 patients. For TNM classification, 14% of patients (11) were at stage II (under 45 years) and 86% (69) at stage IVc. 78% of total metastasis were located equally in lung and bone, 15% in both, and 7% in brain and liver. Papillary forms have more lung than bone metastasis (15/11) and follicular forms rather more bone metastasis (14/4). 68% (54) of metastatic patients have nodular capsular infiltration (NCI) and only 3 metastatic patients do not have NCI. 59% (47) of metastatic patients have thyroid capsular infiltration (TCI). 49% (39) of metastatic patients have vascular invasion (VI).

Discussion & Conclusion: This study shows that age, nodular capsular infiltration, thyroid capsular infiltration and vascular invasion are the main important risk factors to develop distant metastasis in DTC and may constitute key arguments for iterative dose of radioiodine.