

DIFFUSE SCLEROSING VARIANT OF PAPILLARY THYROID CARCINOMA: A ULTRASONOGRAPHIC AND CLINICOPATHOLOGIC ANALYSIS OF 8 CASES

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Background/Purpose: Diffuse sclerosing variant of papillary thyroid carcinoma (DSPC) is a rare variant of papillary thyroid carcinoma (PTC), and the ultrasonographic and Clinicopathologic features of this carcinoma have not been fully characterized. The aim of this study was to report ultrasonographic and Clinicopathologic features of 8 patients diagnosed with pathologically proven DSPC.

Methods: We investigated ultrasonographic and Clinicopathologic features of eight patients diagnosed with pathologically proven DSPC between 2006 and 2012 in our hospital.

Results: Diffuse hyper-echoic, coarse, heterogeneous echogenicity, multiple scattered microcalcifications, absent definite local lesions, absent normal thyroid tissue were visualized on ultrasonography in 7 patients. 1 patient only has unilateral and the isthmus changes above. On color doppler flow imaging, abundant blood supply was visualized in the thyroids in all the 8 patients. 7 patients in all 8 patients had bilateral cervical lymph node metastases with multiple scattered microcalcifications inside, including one case associated with liquefaction. 8 patients, 7 patients (including 1 patient of liver and lung metastasis) underwent bilateral total thyroidectomy and bilateral neck lymph node dissection, while 1 patient underwent Bilateral total thyroidectomy and unilateral neck dissection. All were treated postoperatively by radioiodine and endocrine suppression.

Discussion & Conclusion: The ultrasonographic features of DSPC are characteristic. Ultrasonography plays an important role in the diagnosis of DSPC. To prolong patients' survival time, DSPC should be treated surgically as soon as possible, assisting radioiodine and endocrine suppression therapy after surgery.