

HISTO PROGNOSTIC FACTORS IN 1759 ALGERIAN PATIENTS WITH DIFFERENTIATED THYROID CANCER (DTC)

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Background/Purpose: To show the importance of histo-prognostic factors of DTC in establishing therapeutic strategy based on systematic radioiodine treatment

Methods: 1759 Algerian patients treated for DTC in nuclear medicine department of Bab El Oued hospital were enrolled. All patients underwent thyroid surgery and had diagnostic of DTC in Pathology. All patients received radioiodine and were followed regularly.

Results: Mean age of patients is 49.38 ys (median 48ys). 86% of patients are females (males 14%). The average age of diagnostic of thyroid cancer was done at 40.32 ys (median of 39). Results of pre-operative fine needle aspiration (FNA) were available in only 38% of patients. for FNAs, cytology results have been positive (suggesting thyroid cancer) in 28% of cases and negative in 41%. Total thyroidectomy was performed in 97% of patients and without lymph node dissection (LND) in 77% of cases. Mutlifocality was found in 22% of patients and size of the tumor was above 1 cm in 65% of cases and >4cm in 20%. In Pathology, Pure papillary carcinoma (PTC, 48%), follicular variant of papillary thyroid carcinoma (FVPTC, 27%) and Pure Follicular Thyroid carcinoma (PFTC,10%). Vascular invasion (39%), nodule capsular invasion(48%) and thyroid capsular invasion (30%). All patients received one week low diet iodine, domperidone, corticosteroids and 4 GBq of I131. For TNM classification, 37% of patients were in T1 and 37% in T3-T4 . For N, 83% were in indeterminate status Nx. For M, 5% were M1 among them 78% of total metastasis were located equally in lung and bone, and 15% in both.

Discussion & Conclusion: This study shows that radioiodine should be applied more extensively in DTC patients with LND miss.