

ADVANCED DIFFERENTIATED THYROID CANCER WITH AXILLARY AND NECK LYMPHNODE METASTASES

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Background/Purpose: Differentiated thyroid cancer is usually associated with an excellent prognosis and indolent course. Distant metastases are rare events at the onset of thyroid cancer. Among these presentations, metastasis to the axillary lymph nodes is even more unusual: only few cases were previously reported in the literature; there has been no report of axillary lymph node metastasis from follicular thyroid carcinoma.

Methods: We present a case of axillary lymph node metastasis in the context of disseminated differentiated thyroid cancer. The patient underwent near total thyroidectomy and neck and axillary lymph node dissection

Results: The histopathological examination revealed a poorly differentiated follicular carcinoma with "signet ring cells" and Hürthle cell features was established. The patient received radioactive iodine therapy and TSH suppression therapy. Subsequently his serum thyroglobulin level decreased to 44.000 ng/ml from over 100.000 ng/ml. The postoperative course was uneventful and the patient was discharged eight days after surgery.

Discussion & Conclusion: Currently there are only few reported cases of axillary node metastases from thyroid cancer, and to our knowledge, this is the first report on axillary lymph node metastasis from follicular thyroid carcinoma.

Aggressive surgical treatment of advanced differentiated thyroid cancer provides the best chance of cure.