Differentiated thyroid carcinoma: Retrospective analysis of 50 patients with 5 years follow-up

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Introduction

The study aim was to evaluate the outcome on a sample of patients with differentiated thyroid carcinoma and a minimal 5 years follow-up.

Subjects and methods

The clinical records of all patients (pts) with thyroid carcinoma who had their primary treatment at our medical centre - IPOFG - in the year of 1990 were retrospectively reviewed. From a total of 69 pts, 19 were excluded (8 with non differentiated thyroid carcinoma and 11 were lost to follow-up).

From the fifty pts, 43 (86%) female and 7 (14%) male, with differentiated thyroid carcinoma and a minimal follow-up of 5 years were analysed (mean: 87 months). The age at diagnosis ranges from 11 to 87 years (average: 45 yr.; mean: 42.5 yr.). Histologically, 47/50 (94%) cases of papillary carcinoma (in 8 with follicular variant) and 3/50 (6%) follicular were found.

At the time of initial examination, 31 (62%) cases showed a single thyroid nodule, 8 (16%) cervical lymph nodes, 6 (12%) single thyroid nodule + cervical lymph nodes, 4 (8%) multinodular goiter and 1 (2%) multinodular goiter + cervical lymph nodes.

Therapeutic approach

All patients studied had undergone a thyroid surgical procedure: 43 (86%) total thyroidectomy and 7 (14%) unilateral lobectomy. Of these pts, permanent parathyroprival hypocalcemia (> 6 months substitutive therapy) occurred in 14 (28%) cases. Radioiodine was administered postoperatively to 37 (74%) pts, with a mean time interval of 3.3 months. From the total of pts treated with radioiodine, 3/37 (8.1%) had clinical registration of acute complications (nausea, xerostomia and diarrhoea).

Clinical outcome

From the total of 50 pts, 36 had no postoperative events. Fourteen showed metastization in the course of the disease: 6 cases were diagnosed when first radioiodine was performed (one pt remain with evidence of disease), in 7 cases new lesions were diagnosed during the course of the disease (2 pts remain with evidence of disease), and in one case a cervical recurrence occurred and patient died - Fig. 1.

In 13 cases metastases were shown: cervical lymph nodes in 8 cases, bone metastasis in 1 case, cervical lymph nodes + brain + lung metastases in 1 case, cervical lymph nodes + lung metastases in 2 cases and lung metastases in 1 case.
**Conclusion**

In the studied population, with a mean follow-up interval of 88.5 months, 92% (46) pts were in remission, 6% (3) were with evidence of disease and one pt died due to thyroid carcinoma.

![Postoperative events diagram]

**Fig. 1.**

**References**