A 5 year epidemiological and pathological survey of papillary thyroid carcinoma

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In this study, we made retrospective analysis of clinical and pathological data of 41 patients with papillary thyroid cancer, presented and operated at the Department of ENT/Head and Neck Surgery, Sarajevo clinical center in period 2008 to 2012.

All patients were operated with total thyreoidectomy with or without some type of lymph node neck dissection (pastracheal or lateral). There were 20 cases of papillary microcarcinoma (tumors less than or equal to 1 centimeter).

We investigated the clinical and pathological characteristics of papillary microcarcinoma and compared this group with tumors larger than 1 centimeter. In comparison with their larger counterparts, groups >1-2 cm and >1-3 cm, microcarcinomas showed statistically less frequent aggressive behaviour, multicentric focuses, and less affinity for regional metastatic dissemination.

Male gender and age less than 45 years were identified as unfavorable parameters of papillary microcarcinoma. In males, microcarcinoma had similar characteristics as larger tumors. Patients with coexisting Hashimoto thyreoiditis showed better behaviour according to our chosen clinical and pathological parameters.

Multivariate analysis revealed intraglandular dissemination in contralateral lobe, male gender as an independent risk factor for developing metastasis. Nodular goiter has been identified as a protective parameter for metastasis.

Even though our study identified microcarcinoma as tumor with better clinical and pathological characteristics than larger tumors, we can conclude that papillary thyroid microcarcinoma behaves in many ways similar to its larger counterparts and, therefore require similar approach.