



Should incidental microcarcinomas change management of patients with thyroid cancer?

Casril Liebert¹, Paul Stimpson² and Ian Proctor³

¹ University College London Medical School, UK

²Department of Head & Neck Cancer, University College London Hospital, UK

³Department of Cellular Pathology, University College London Hospital, UK

Abstract

Introduction: Papillary thyroid microcarcinomas (PTMC), <10mm maximum diameter, found incidentally in thyroidectomy histological assessment have an excellent prognosis. In the setting of a known primary thyroid malignancy, diagnosis of ‘multifocality’ (2 or more foci) may be given, upstaging the disease and potentially overtreating with unnecessary surgery and radio-iodine ablation. This study aims to evaluate the frequency of incidental thyroid microcarcinomas in patients undergoing thyroid surgery for benign and malignant cases. The impact of incidental microcarcinomas was assessed among patients with confirmed thyroid malignancy with a focus on subsequent change in patient management.

Methods: A retrospective review of thyroidectomy histopathology and multi-disciplinary team (MDT) meeting reports was performed. The frequency of incidental microcarcinomas was calculated and a chi-squared test was performed to assess independence between incidence rates in cancer versus benign cases.

Results: 120 thyroidectomies (52 cancers, 68 benign) showed 17 (14.2%, n=120) incidental microcarcinomas with no significant difference between the two groups ($X^2 = 1.94$, $df=1$, $n=120$, $p=0.16$). 80% of findings in malignant cases were deemed ‘multifocal’ and involved more aggressive management, whereas 85.7% in the benign group had conservative management.

Conclusion: PTMC incidental findings have a similar frequency in malignant and benign cases. This suggests that patient management decisions should be carefully considered for microcarcinomas in malignant cases and active surveillance should be taken to avoid overtreating an otherwise low-risk lesion. A detailed discussion regarding the relevance of incidental PTMC is warranted for all patients and future studies should assess how clonality of the incidental lesion can assist decision-making.

Biography

Casril is a medical student at University College London, UK, studying an intercalated degree in Surgical Sciences. He has a passion for researching surgical oncology and exploring the possibilities of novel techniques to improve healthcare.