THYROID CANCER

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Cancer of the thyroid is a disease in which cancer cells are found in the tissues of the thyroid gland. Thyroid cancer is the fastest increasing cancer in both men and women. It is the most common endocrine cancer. Thyroid cancer is a cancerous tumor or growth located within the thyroid gland. Thyroid cancer is one of the few cancers that has increased in incidence rates over recent years. It occurs in all age groups from children through seniors. Many patients, especially in the early stages of thyroid cancer, do not experience symptoms. However, as the cancer develops, symptoms can include a lump or nodule in the front of the neck, hoarseness or difficulty speaking, swollen lymph nodes, difficulty swallowing or breathing, and pain in the throat or neck. There are several types of thyroid cancer: papillary, follicular, medullary, anaplastic, and variants. Papillary and follicular thyroid carcinomas are referred to as well-differentiated thyroid cancer and account for 80–90% of all thyroid cancers. Variants include tall cells, insular, columnar, and Hurthle cells. Their treatment and management are similar. If detected early, most papillary and follicular thyroid cancer can be treated successfully. Medullary thyroid carcinoma (MTC) accounts for 5-10% of all thyroid cancers. Medullary cancer is easier to treat and control if found before it spreads to other parts of the body. There are two types of medullary thyroid cancer: sporadic and familial. Genetic testing (of the RET proto-oncogene should be performed in all patients with MTC to determine whether there are genetic changes that predict the development of MTC. In individuals with these genetic changes, removal of the thyroid during childhood has a high probability of being curative. Anaplastic thyroid carcinoma is the least common and accounts for only 1–2% of all thyroid cancer. This type is difficult to control and treat because it is a very aggressive type of thyroid cancer. Factors associated with thyroid cancer include a family history of thyroid cancer, gender (women have a higher incidence of thyroid cancer), age (the majority of cases occur in people over 40, although thyroid cancer affects all age groups from children through seniors), and prior exposure of the thyroid gland to radiation. While the prognosis for most thyroid cancer patients is very good, the rate of recurrence can be up to 30%, and recurrences can occur even decades after the initial diagnosis. Therefore, it is important that patients get regular follow-up examinations to detect whether the cancer has re-emerged. Monitoring should continue throughout the patient's life time. Periodic follow-up examinations can include a review of the medical history together with selected blood tests appropriate for the type of cancer and stage of treatment.