

Follicular Variant of Papillary Thyroid Carcinoma: Is New Classification Needed?

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Introduction. Papillary thyroid carcinoma (PTC) is the most common histologic type of thyroid gland cancer. One of the most common subtypes is classical PTC (CPTC) and the second follicular variant of PTC (FVPTC). In addition, FVPTC has been divided into encapsulated (EFVPTC) and non-encapsulated subtype of FVPTC (NFVPTC). Differentiation in FVPTC subtypes is crucial in carrying out an appropriate treatment strategies. There is a perspective, the histopathologic nomenclature for EFVPTC without capsular or vascular invasion may be re-classified as a noninvasive follicular thyroid neoplasm with papillary-like nuclear features (NIFTP) with very good prognosis.

Aim, Materials and Methods. The aim of this research is to investigate the encapsulated and non-encapsulated subtypes of FVPTC, as well as surgical treatment tactic of EFVPTC. Histological diagnosis and state of tumor capsules of 166 operated thyroid patients was analyzed retrospectively. Out of these patients, 40 with FVPTC were identified. These 40 patients were divided into two study groups: EFVPTC and NFVPTC.

Results. The FVPTC cases were identified in 40 patients in the study. Only 4 patients (10%) were histologically diagnosed with EFVPTC, and the rest of the patients – 36 (90%) – were diagnosed with NFVPTC. For the patients diagnosed with EFVPTC, two had total thyroidectomy and the other two underwent hemithyroidectomy.

Conclusions. The FVPTC is a unique PTC type with different subtypes. Division of these subtypes needs to be looked at very closely when it comes to the management of patients with one of these lesion subtypes. In EFVPTC more limited surgery may be performed. These findings have shown that reclassification is important for appropriate treatment strategy.