

Thyroid Gland Cancer with Distant Metastases – National Data

*Irīna Liepiņa¹, Antra Bērziņa², Artūrs Ozoliņš¹,
Zenons Narbutis¹, Jānis Gardovskis¹*

¹ *Rīga Stradiņš University, Department of Surgery, Latvia*

² *Oncology Centre of Latvia, Clinic of Therapeutic Radiology and Medical Physics*

Introduction. The incidence of thyroid cancer with distant metastases varies from 5 to 33%, depending on morphology. It has been proven as poor prognostic factor for survival, with only 50% of patients surviving more than 10 years.

Aim, Materials and Methods. The aim of this study was to analyse national data about patients with thyroid gland cancer distant metastases.

The national cancer registry includes data about 1202 thyroid cancer patients during the period 2012–2016 from whom 24 patients were with distant metastasis.

Results. Patients mean age was 58 years (25–81 years). Female to male ratio was 2.4:1. Morphological types of cancer with distant metastases were papillary – 10/1006 (0.9%), follicular – 9/148 (6%), medullary – 3/40 (7.5%), anaplastic – 2/8 (25%). Localisation of distant metastases were in lungs – 15, bones – 8, liver – 1. Five patients had multifocal metastases. In four cases localisation of primary cancer was diagnosed after an operation on metastases. 20 patients underwent surgical treatment and four were defined as unresectable. During the study period, mortality rate for papillary cancer was 20%, follicular – 22%, medullary – 67%, anaplastic cancer – 100%.

Conclusions. Anaplastic and medullary cancer with distant metastases has low survival. In case of papillary cancer, distant metastases are rare and overall prognosis is better. Those patients with cancer distant metastases should be treated aggressively, as this is the population that is most likely to die of thyroid cancer.