

# Surgical treatment of thyroid disease. Descriptive analysis and histopathology of a series of 92 cases.

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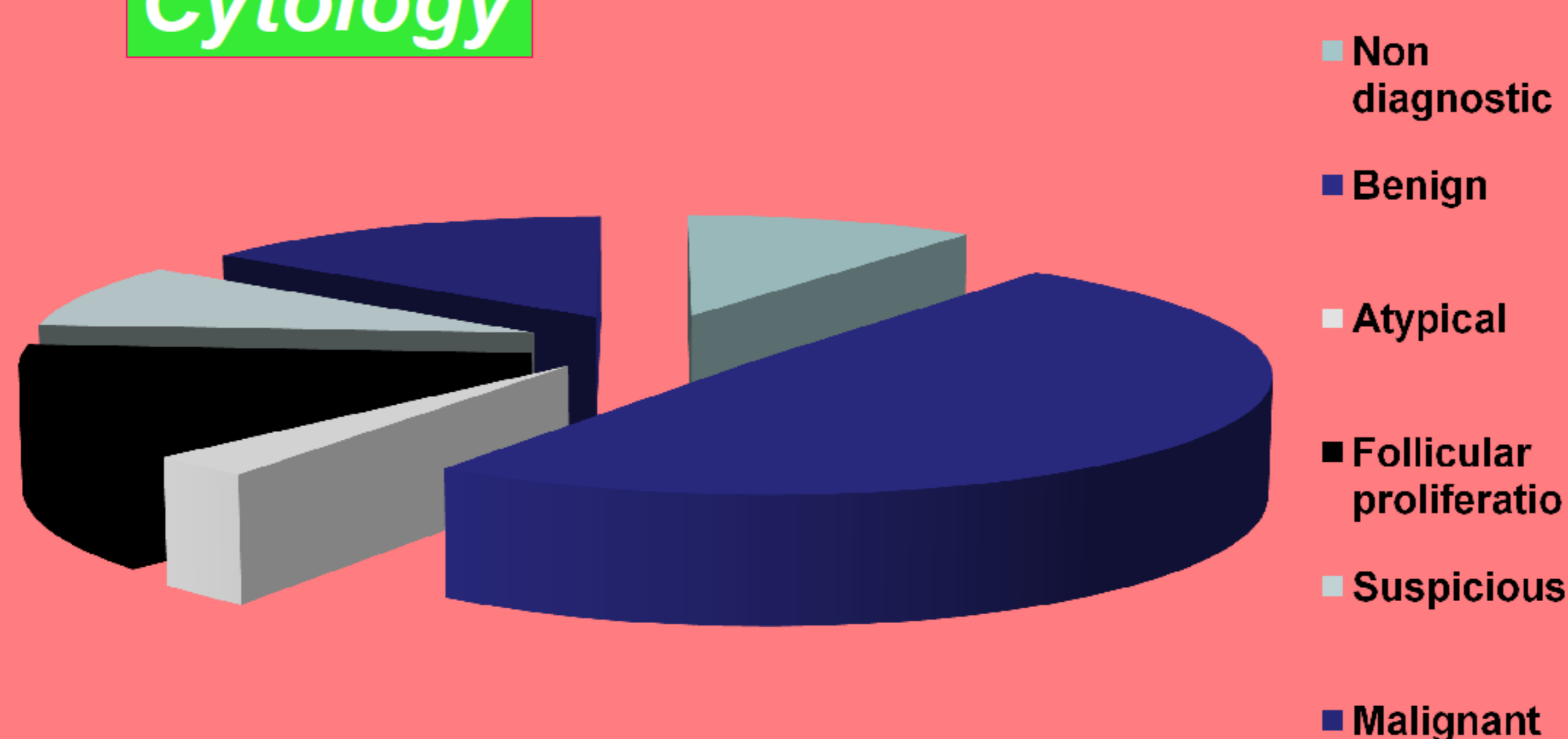
## Objectives:

Retrospective study of patients undergoing thyroid surgery at the Hospital Virgen de la Luz, Cuenca (Spain) during the years 2010-2013.

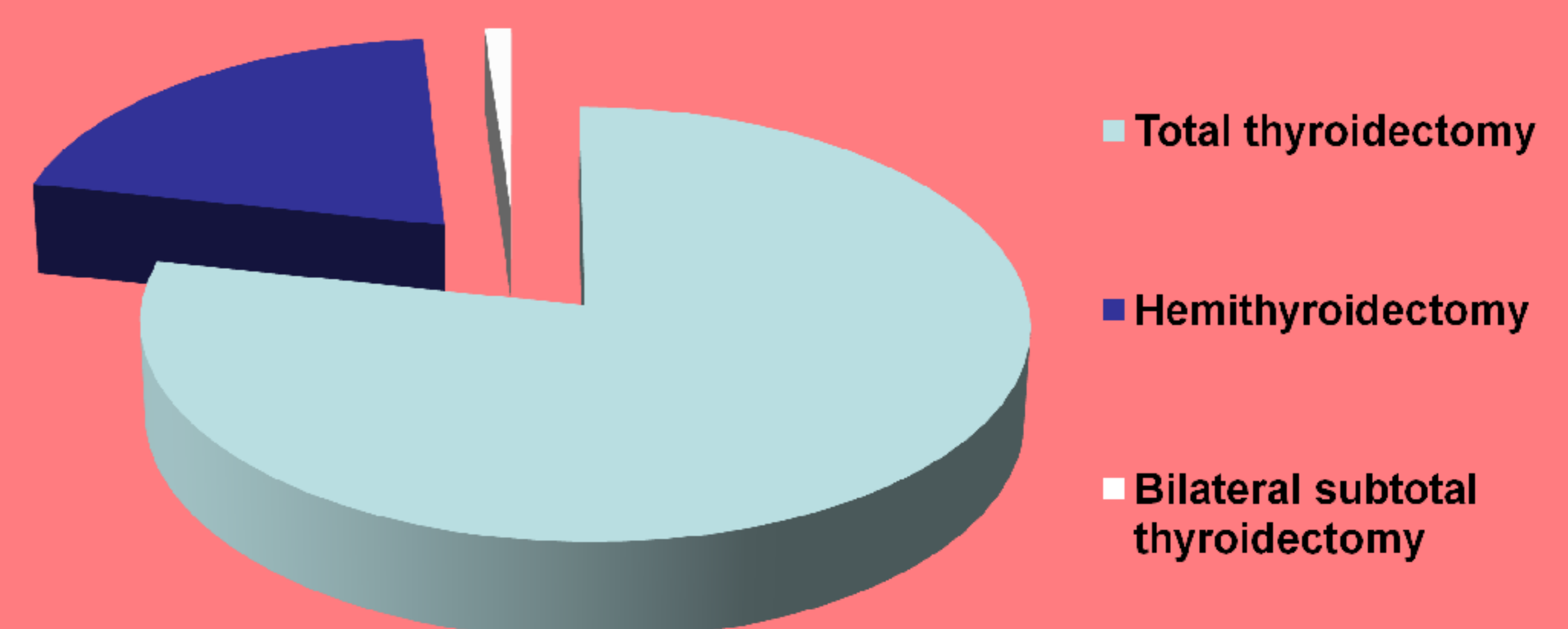
## Methods:

We evaluated data of 92 patients basically with nodular thyroid disease, who were studied and treated in our hospital.

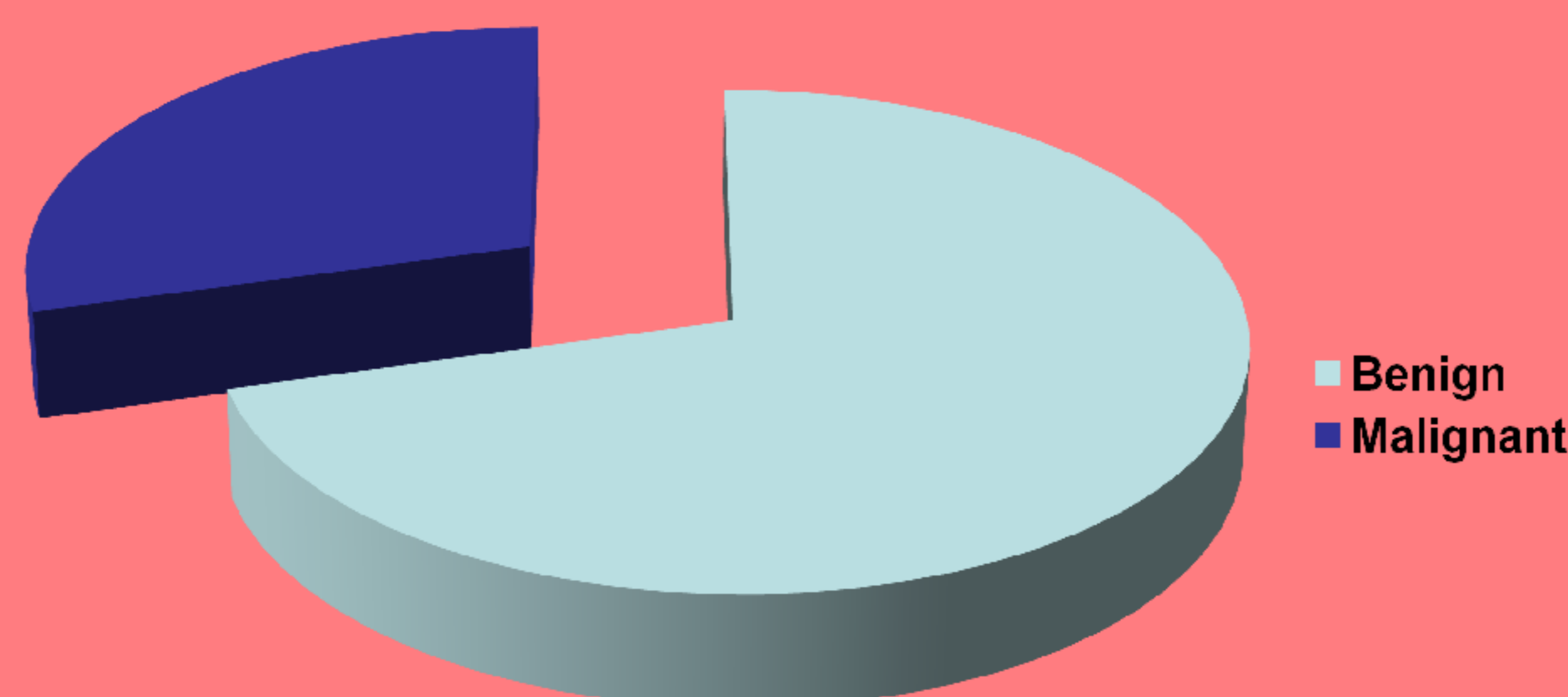
## Cytology



## Surgical Treatment



## Histopathology



## Results:

Our series is made up of 92 patients (25% men and 75% women) with an average age of 52 years. The most common form of presentation (47.8%) was recent emerging thyroid nodule, having less than a year. In 19 cases (20.6%) it was found incidentally, mainly by ultrasound. In most cases, 58 (63%), monitoring prior to surgery was less than or equal to 1 year. Ultrasound findings showed mostly mixed multiple nodules (32.6%). The results of cytology were nondiagnostic in 7.6%, 35.9% benign, atypical 2.2%, 9.8% follicular proliferation, suspicious of malignancy 6.5%, 10.9% malignant. In 25 cases (27.1%) was not done FNA. In 86.9% thyroid function was normal. Total thyroidectomy was performed in 78.3%, in 20.6% hemithyroidectomy and bilateral subtotal thyroidectomy in 1.1%. Surgery was performed in 65% of cases by the most experienced surgeon. The pathology was benign in 70.6% and malignant in 29.3% cases.

## Conclusions:

The most common presentation in our thyroid disease amenable to surgical treatment is emerging thyroid nodule. In 20.6% of cases it was an incidental finding. Total thyroidectomy was the technique of choice (78.3%). 29.3% of the cases presented a thyroid carcinoma.

## References:

- 1.-Smith JJ, Chen X, Schneider DF, Broome JT, Sipple RS, Chen H, Solórzano CC. Cancer after thyroidectomy: A multi-institutional experience with 1,523 patients. *J Am Coll Surg.* 2013;571-580.
- 2.-Raja N, Basharat AK, Ishtiaq AC. Prevalence of malignancy in goitre-A review of 718 thyroidectomies. *J Ayub Med Coll Abbottabad.* 2009; 21(4): 134-136.