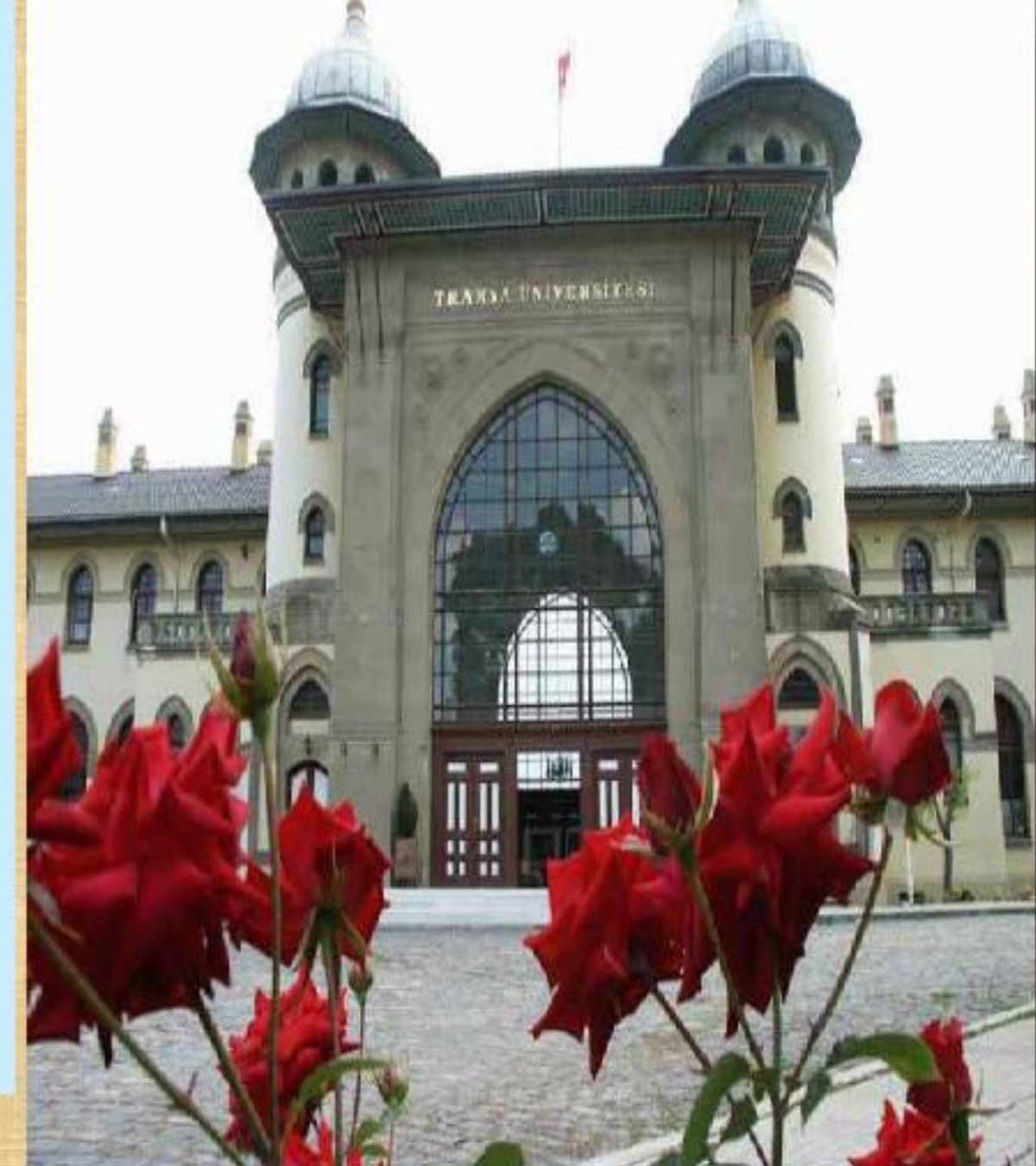




Transient Amenorrhea: A Very Rare Complication of Radioactive Iodine Ablation Therapy for Papillary Thyroid Carcinoma



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- Radioactive iodine (RAI) treatment has been used in the treatment of differentiated thyroid cancer (DTC) since 1946. RAI treatment is recently used as adjuvant treatment for ablation of residual tissue following thyroidectomy and in the treatment of metastases of thyroid cancer. Some acute (nausea, vomiting, ageusia, salivary gland swelling and pain) and long-term side effects (sialadenitis, pulmonary fibrosis, second primary malignancies) may be observed following RAI treatment. In 12-31% of young women, menstrual irregularities have been reported after high dose radioactive iodine treatment applied for the treatment of DTC. In this report, we presented two patients with DTC treated by RAI ablation, in whom transient amenorrhea had occurred. Basal FSH and LH levels elevated in these 2 patients within 3 months after RAI treatment, but all normalized within 6 months (table). We suggest that it is important to evaluate premenopausal patients with DTC for the development of RAI related menstrual irregularity and inform these patients for the possibility of treatment related ovarian dysfunction.

- Table

		Patient 1	Patient 2
Age		42	41
RAI dose (mCi)		100	150
3 months after RAI	LH (1.9-12.5 IU/L)	72.75	39
	FSH (2.5-10.9 IU/L)	95.17	50.5
	E ₂ (19.5-144.2 IU/L)	2.19	<5
6 months after RAI	LH(1.9-12.5 IU/L)	30.9	14
	FSH(2.5-10.9 IU/L)	7.17	17
	E ₂ (19.5-144.2 IU/L)	130.61	128