THYROID NODULES CLASSIFIED AS BETHESDA 3: FINAL DIAGNOSIS

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INTRODUCTION AND OBJECTIVES

The Bethesda System classifies suspicious thyroid nodules or those with a large size after fine-needle aspiration (FNA) depending on the risk of malignancy through its cytology study. Bethesda category 3 (B3) implies atypia of uncertain significance or follicular lesion of undetermined significance. Objectives: To determine the final diagnosis of category B3 nodules and the number of cases in which a second or third FNA results in a conclusive category (B2, B4, B5 or B6).

PATIENTS AND METHODS

Observational retrospective study of patients with thyroid nodules classified as B3, evaluated between January 2012-December 2015 at “Hospital Universitario Reina Sofía” in Córdoba. Results were analysed with SPSS 19.0. Statistical analysis: Student's t-test to compare means and Chi-squared test/ Fisher's exact test to compare proportions.

RESULTS

<table>
<thead>
<tr>
<th>Pathology group after surgery</th>
<th>54 patients (61.4%). Total thyroidectomies (55.6 %).</th>
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</thead>
<tbody>
<tr>
<td>Adenoma (42.6%)</td>
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<tr>
<td>Benign follicular nodule (24.1%)</td>
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<tr>
<td>Papillary carcinoma (18.5%)</td>
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<td>Others (9.2%)</td>
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<td>Nodular Hashimoto (5.6%)</td>
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Nodules

- Suspicious on ultrasonography 65.9%.
- Maximum diameter 29.9 ± 14.1 mm.
- Symptoms related 22.8% (dysphagia the most prevalent).

Final diagnosis (88 patients)

- Benign pathology (40 patients) 45.50%
- Malignant pathology (14 patients) 15.90%
- Unknown pathology (34 patients) 38.60%

CONCLUSIONS

1. The prevalence of thyroid malignant illness classified as B3 in our study is concordant with the previous published studies, being adenoma the most frequent pathology after thyroidectomy.

2. In nodules firstly categorized as B3, a second or third FNA is determinate in less than half of the cases.

REFERENCES