

Fine needle thyroid biopsy - time to change of indications?

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OBJECTIVES

After a period of enthusiasm for the early detection of cancer, apparently we are entering a period of skepticism, questions and side effects in the form of unnecessary operations and their complications and costs. This also applies to thyroid cancer, and actually nodules and lesions visible only in ultrasound. To poke or not to poke? Do biopsies or not do? Therefore, we would like to present our observations.

RESULTS

In Years 2013 and 2014 we have performed 2189 ultrasound guided fine needle biopsy of thyroid gland. Indication were determined in accordance with the recommendations of the National Society of Endocrinology. Ambulatory patients (1702) were referred by family doctors and specialists, hospital patients (487) only by endocrinologists. Based on biopsy were diagnosed 6 cases of thyroid cancer (0,3%) but only 1 (0,06%) in outpatients and 5 by inpatients (1%). The results "suspicion" about the cancer as follicular or oxyphilic lesions was by 29 (1,3%) patients. Other diagnoses as inflammation or pseudoathypia was found by 0,5% biopsies and 518 (24%) biopsies was non diagnostic according to the Bethesda system, which does not mean without diagnostic significance. We must point out that patients referred for biopsy by endocrinologists with palpable changes have a much larger risk of finding pathological changes than be referred only based on ultrasound image.

All patients except one with an established tumor of the thyroid have clear clinical symptoms, in the form of compression and / or rapid tumor growth. The risk of cancer is found in the thyroid biopsy, if there are no clinical symptoms seem very small in our region. However, the decision to take or omission of such diagnosis in patients with incidentally detected changes in the ultrasound must be taken together with the patient, because the patient will bear the consequences for delayed treatment of cancer or complications of unnecessary surgery.

Conclusion

The decision on whether to carry out a biopsy the thyroid gland and its possible therapeutic consequences should be taken jointly with the conscious patient, especially in areas with low incidence of thyroid cancer.