



HYPERTROPHIC HASHIMOTO'S THYROIDITIS MIMICKING THYROID LYMPHOMA

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BACKGROUND

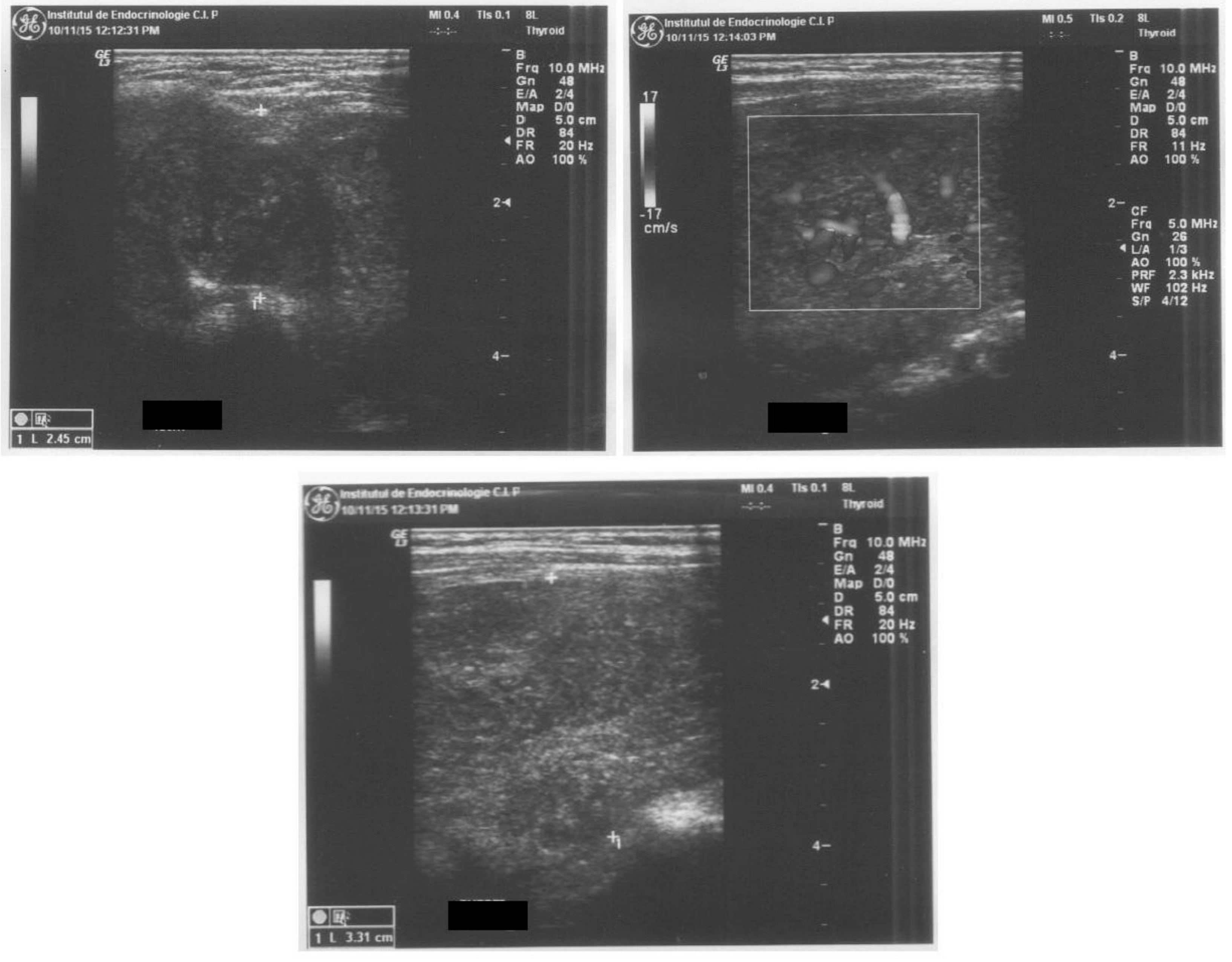
- ✓ Hashimoto's thyroiditis is a well known risk factor for primary thyroid lymphoma. The risk of PTL is between 40 and 80 times higher in patients with HT;
- ✓ The most common presentation of thyroid lymphoma is a rapidly enlarging, painless goiter. Other symptoms such as dyspnea, dysphagia, and hoarseness may arise as a result of the pressure effects of the mass. Cervical lymphadenopathy is present in the majority of cases.

AIM

- ✓ To present a case of a rapidly enlarging goiter due to HT accompanied by enlarged lymph nodes and pressure on surrounding structures.

CASE REPORT

- ✓ 85 years old female;
- ✓ Progressive enlargement of the thyroid since May 2015;
- ✓ Dysphonia, dyspnoea;
- ✓ Concomitant medication: indapamide, metoprolol and candesartan for high blood pressure



Thyroid ultrasound showing an intense hypoechoic, heterogeneous massive goiter. High blood flow on CFD examination; (upper left: isthmus, upper right and lower: left lobe)

Thyroid function and autoimmunity			
	Jul 2015	Nov 2015	Jan 2016
TSH (mU/L)	4.1	4.9	3.80
ft4 (pmol/L)		9.1	10.8
Anti-TPO (UI/ml)		>1000	>1000
Anti-TGL (UI/L)		>3000	>3000
Calcitonin (pg/mL)		2.2	



Computed tomography showing a massive goiter (right lobe 88(v)/32(tr)/53(ap) mm; left lobe 91(v)/43(tr)/44(ap) mm). Dense, homogeneous, iodophil structure.

Pathology and immunohistochemistry		
	Lymph node (Aug 2015)	Thyroid biopsy (Dec 2015)
Pathology	small B-cell NHL	chronic thyroiditis
IHC	reactive lymph node	reactive lymphocytes
Follicles		
CD20	+	+
CD10	+	
CD23		+
BCL2	-	-
Ki67	High	+
D1 cyclin	-	
Parafollicular		
CD3	+	
CD5	+	+
CD8		+

AS OF MAY 2016

- ✓ Levothyroxine 50 µg/day
- ✓ No chemotherapy, no corticotherapy
- ✓ No further growth of the goiter;
- ✓ No further aggravation of the compression symptoms;
- ✓ No new symptoms.

CONCLUSIONS

- ✓ Hypertrophic HT can clinically and imagistically mimic thyroid lymphoma;
- ✓ An open biopsy of the thyroid may be required in these cases.

BCL2 = B-cell lymphoma 2; CD = cluster of differentiation; ft4 = free thyroxine; IHC = immunohistochemistry; HT = Hashimoto's thyroiditis; NHL = non-Hodgkin lymphoma; PTL = primary thyroid lymphoma; TGL = thyroglobulin; TPO = thyroperoxidase; TSH = thyroid stimulation hormone;