## Meningioma in a Patient with Tall Cell Papillary Thyroid Carcinoma

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#### Introduction

- Tall cell papillary thyroid carcinoma is known to be associated with an adverse outcome, namely with the early development of locally recurrent or metastatic disease
- Therefore the administration of therapeutic radioactive iodine is considered absolutely necessary in the management of such patients
- A meningioma may occur in a patient with another neoplastic disease, having also been described in patients with thyroid carcinoma

# Aim

 The aim was to describe the case of a patient who presented with a tall cell thyroid carcinoma and was also found to harbor a meningioma

#### **Methods**

- A female patient, aged 59, presented with a thyroid nodule measuring 1.8 cm on ultrasound
- Diagnostic evaluation involving thyroid hormone measurement, 99mTc-scanning and fine needle aspiration biopsy revealed the presence of malignancy within a cold nodule
- Surgery was performed
- Histology revealed the presence of a tall cell thyroid carcinoma
- Thereafter, the administration of a therapeutic dose of radioactive iodine was planned

### Results

- A brain CT scan revealed the presence of a tumor in the area of the left temporal lobe
- As tall cell papillary thyroid carcinoma may be associated with metastatic disease, the possibility of metastatic disease within the brain was discussed
- In order to exclude the presence of tissue absorbing radioactive iodine in the brain a whole body scan with low dose <sup>131</sup>I iodine was performed
- The scan confirmed that the tumor was not absorbing radioiodine
- Subsequently, a therapeutic dose of <sup>131</sup>I was administered

#### **Conclusions**

- A meningioma may occur in a patient with another malignancy
- In the case of a patient with thyroid cancer a meningioma can pose therapeutic difficulties, as it may mimic thyroid cancer metastatic disease in the brain, making specific diagnostic evaluation before the administration of therapeutic radioiodine necessary