

Efficacy and Safety of Radiofrequency Ablation Performed by an Endocrinologist for Large Benign Thyroid Nodules

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Introduction & Objectives

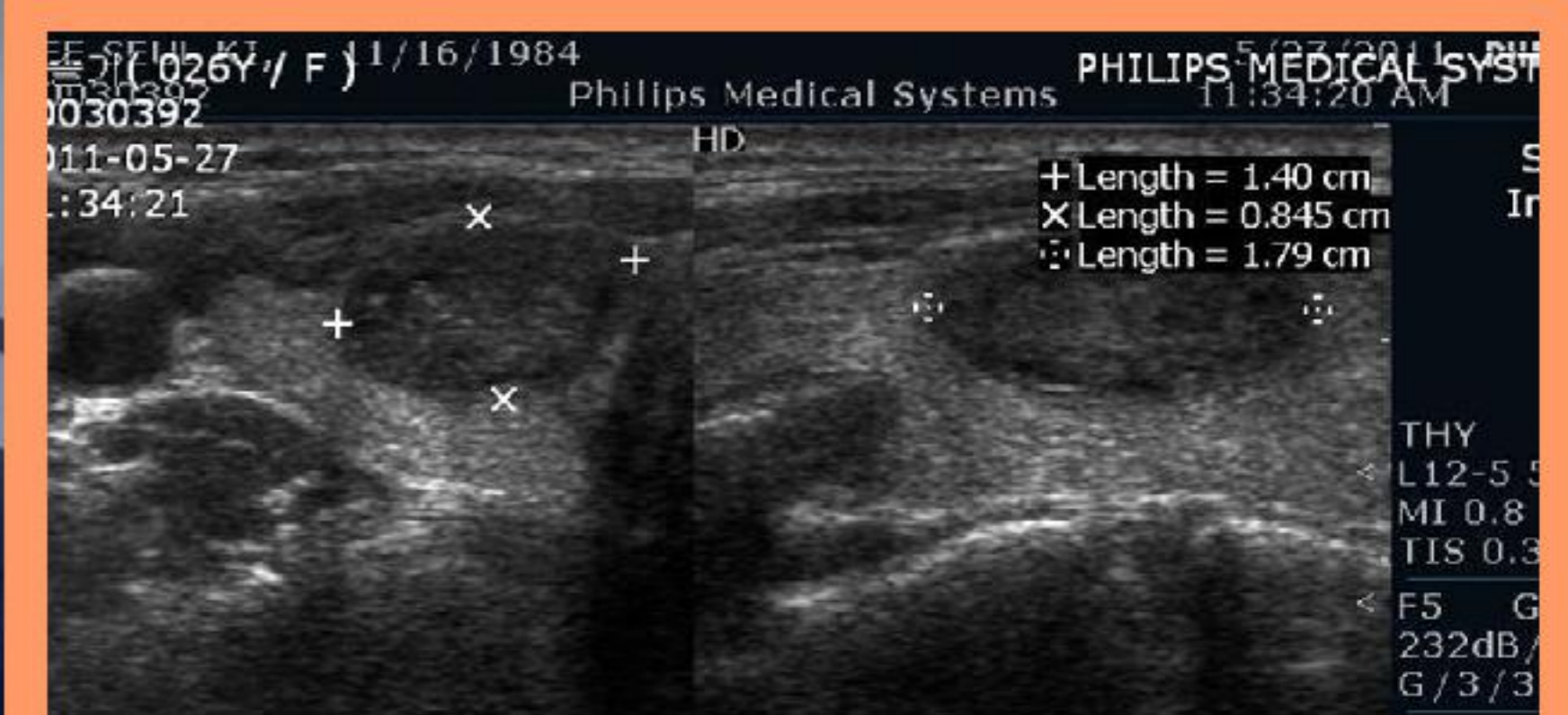
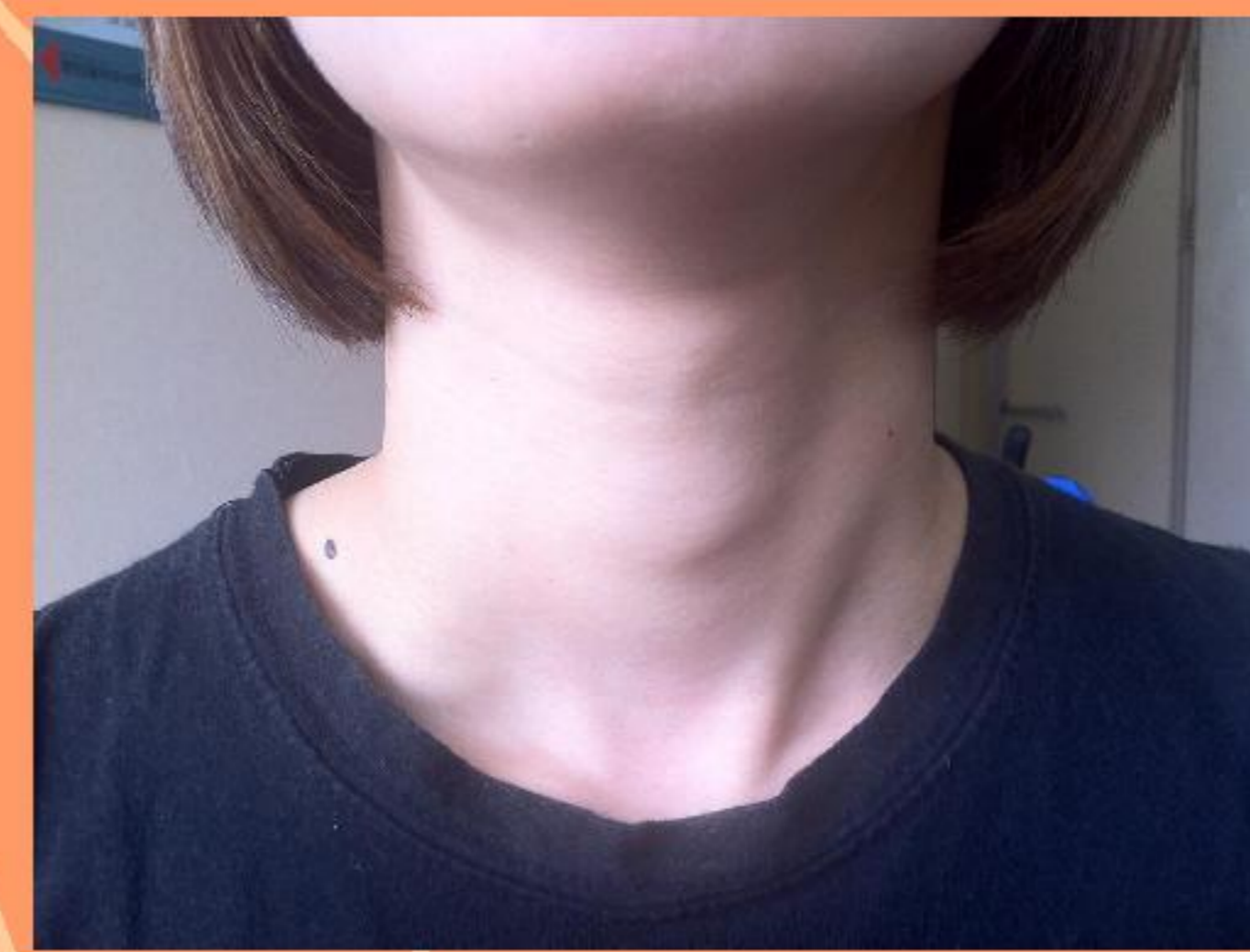
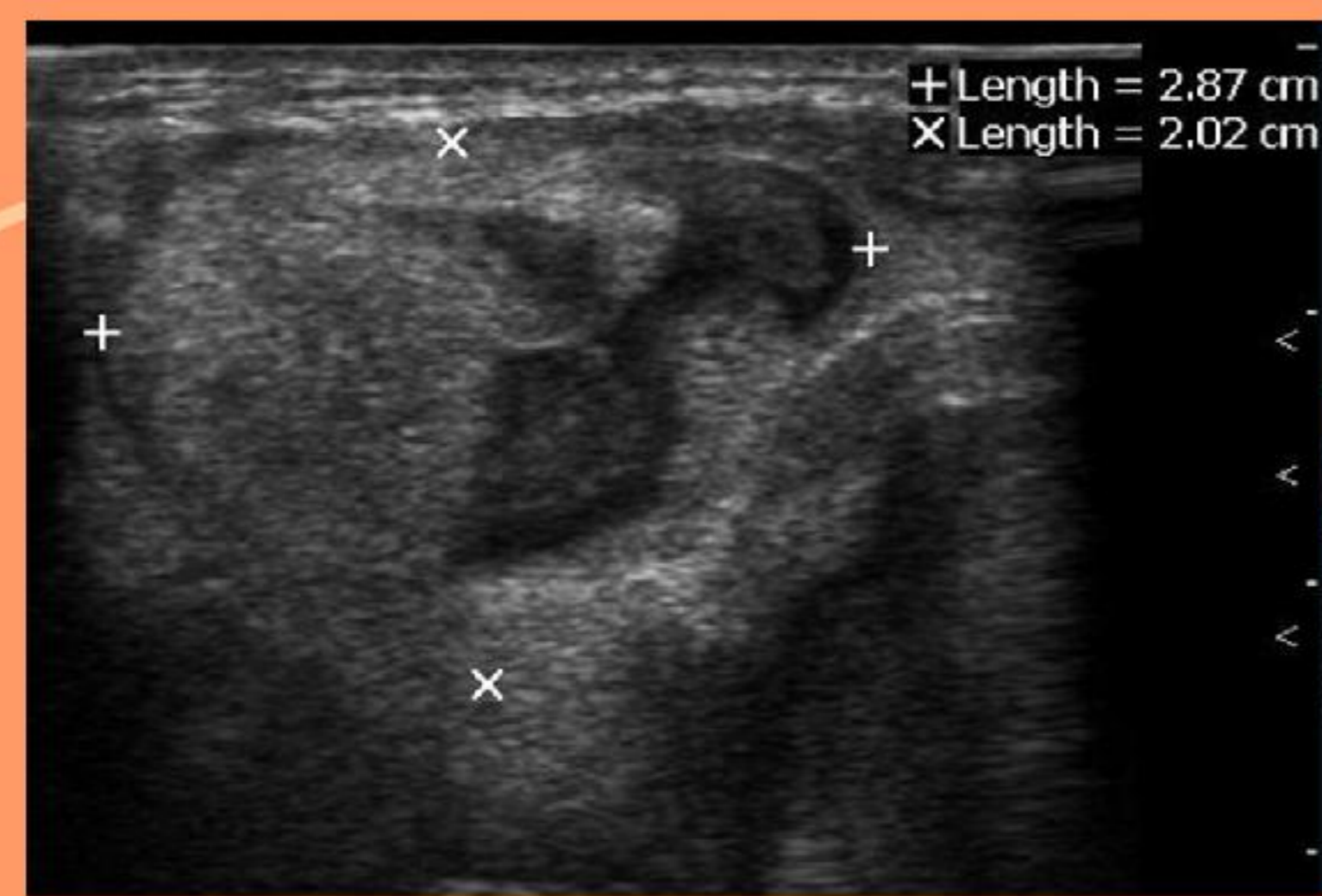
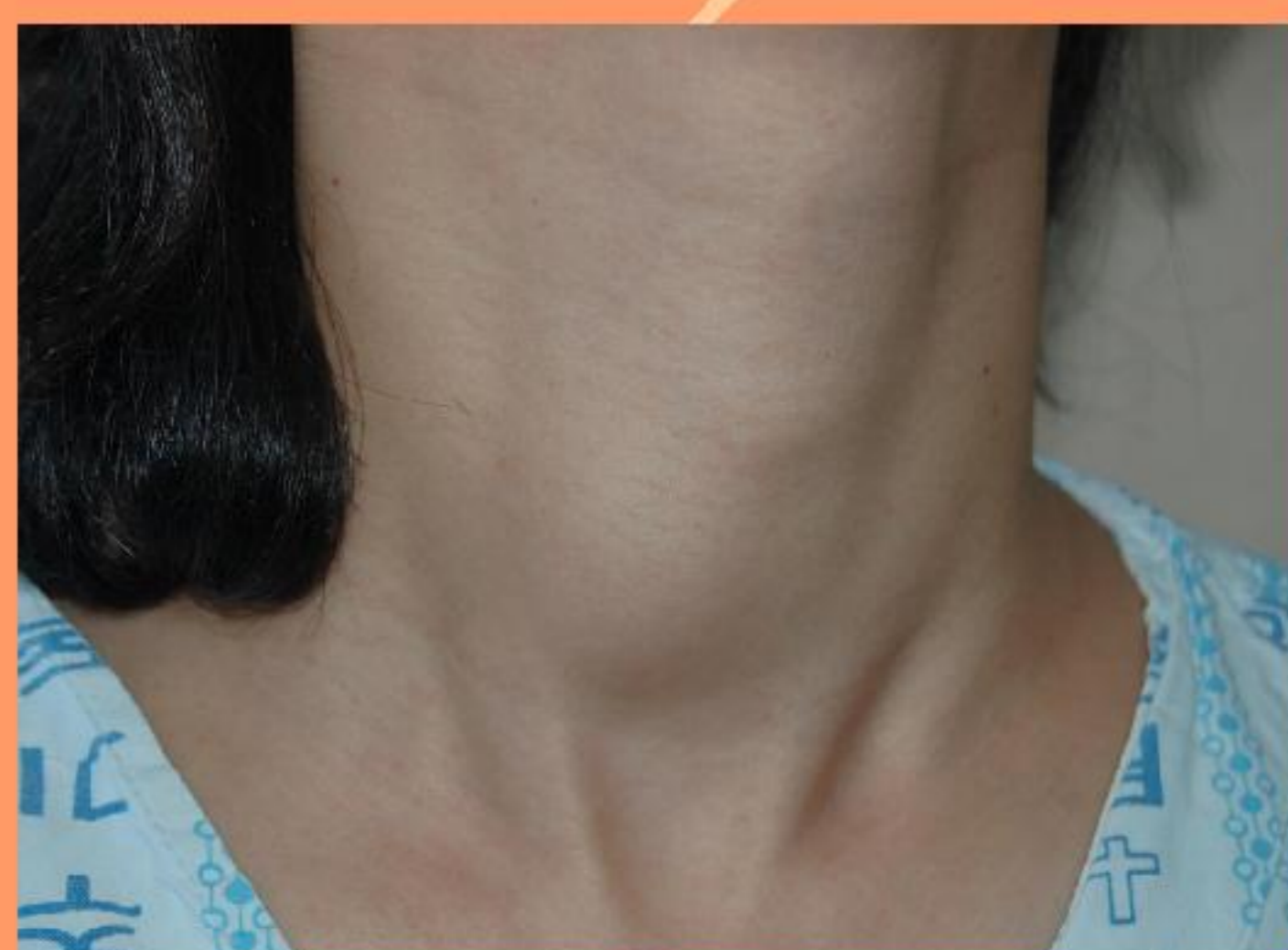
Radiofrequency ablation has recently been used for the treatment of benign thyroid nodules, with outstanding results. However, in most related studies, smaller nodules (<2 cm) were included and the procedure was usually performed by a radiologist or surgeon. Therefore, this study evaluated the efficacy and safety of radiofrequency ablation for nodules >2 cm performed by an endocrinologist with several years of experience performing fine-needle aspiration cytology.

Methods

This study was a cross-sectional analysis of 111 patients who received radiofrequency ablation between April 2010 and July 2013; 73 patients with 75 nodules >2 cm in diameter with at least 6 months of follow-up examinations were included.

Results

The mean follow-up period was 11.5 months. The mean nodule volume decreased from 17.0 ± 15.3 mL preoperatively to 6.0 ± 8.5 mL postoperatively, with a mean volume reduction of 69.7%. There were no major complications, and only 1 patient (1.3%) presented with a minor complication (hemorrhaging of the thyroid parenchyma).



Conclusions

Radiofrequency ablation is a safe method for reducing the size of large benign thyroid nodules and is not associated with any major complications

References:

Shin JH, Baek JH, Ha EJ, Lee JH 2012 Radiofrequency ablation of thyroid nodules: basic principles and clinical application. International journal of endocrinology 2012:919650

