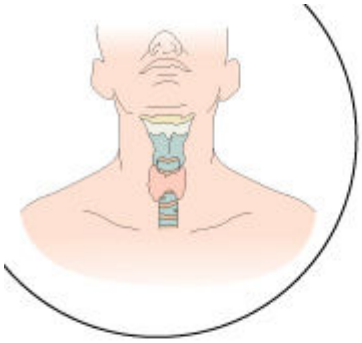
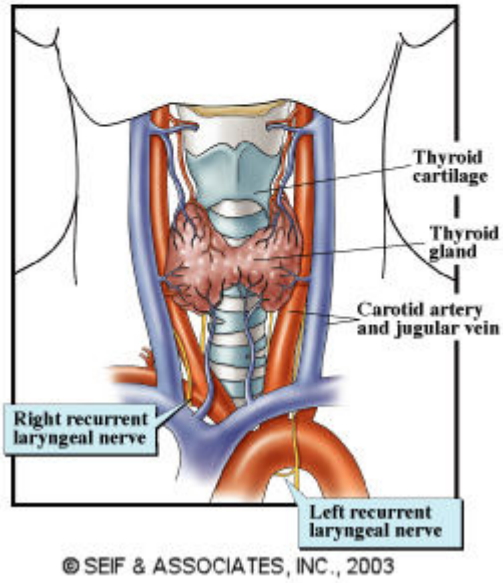
Thyroid Cancer

Thyroid cancer is a disease in which cancer (*malignant*) cells are found in the tissues of the thyroid gland. The thyroid gland is the large gland in your neck. It is located in the front of your neck under the skin and muscle layers. The thyroid works to make thyroid hormone. Thyroid hormone has an effect on nearly all tissues of the body. The thyroid works to regulate the body's metabolism. Metabolism is the breakdown and use of food in our body. Thyroid cancer is a very uncommon cancer and is successfully treated in most cases.



SYMPTOMS

- Enlargement of the thyroid gland or swelling of the neck.
- Hoarseness or a change in your voice.
- Cough or coughing up blood.
- Difficulty swallowing.
- Shortness of breath if the windpipe in pushed upon.
- No symptoms at all for many people.



RISK FACTORS

- Thyroid cancer occurs most often in people between the ages of 25 and 65 years.
- People who have been exposed to radiation or have received radiation treatments to the head and neck during infancy or childhood have a greater chance of developing thyroid cancer.
- The cancer may occur as early as 5 years after exposure to radiation or may occur up to 20 years later.
- People with *goiter* (enlarged thyroid) or a family history of thyroid disease have an increased risk of developing thyroid cancer.
- Thyroid cancer is more common in women than in men.
- Asian people have a greater risk of developing thyroid cancer.

DIAGNOSIS

- See your caregiver if you feel lumps or swelling in any parts of your neck.
- Your caregiver will check your thyroid.
- If a lump is found, an ultrasound or special scan may be done.
- Your caregiver may order blood tests to see if a lump in the thyroid is making too much thyroid hormone.
- Sometimes a biopsy is taken. This is the removal of a small piece of tissue which can be examined under a microscope by a specialist (pathologist). This is often done with a very fine needle. The pathologist can tell if the tissue sample contains cancer.

There are four main types of thyroid cancer. This is based on how the cancer cells look under a microscope: The four types are named:

- Papillary.
- Follicular.
- Medullary.
- Anaplastic.

TREATMENT

Some types of thyroid cancer grow faster than others. The chance of recovery depends on the type of thyroid cancer, whether it is in the thyroid only or has spread to other parts of the body, and the patient's age and overall

health. The prognosis (what is likely to happen) is better for patients younger than 40 years old who have cancer that has not spread beyond the thyroid. Most thyroid cancers are not fatal. **Patients are treated with surgery to remove part or all of the thyroid and sometimes with radiation and chemotherapy.**

- **Papillary cancer** is a common form and less harmful type of thyroid cancer often affecting women of child-bearing age. It can be triggered by exposure to radiation.
- **Follicular cancer** accounts for about 20% of all thyroid cancer cases and is more likely to recur (come back after treatment) and spread.
- **Medullary cancer** can run in families; however, 80% of thyroid cancer cases are not inherited. If you are found to have this gene, your children should be tested and if they have the gene, their thyroid can be removed before they get cancer. **This is important** because 90% of children carrying the gene will get cancer.
- **Anaplastic cancer** is the rarest and most malignant form of thyroid cancer. It spreads quickly to structures such as the trachea, causing compression and breathing difficulties. It is usually fatal but makes up only a tiny percentage of the uncommon thyroid cancer. It is such an aggressive type of cancer that it is difficult to completely get rid of. Ninety percent of patients will die within 6 months.

PROGNOSIS

- Most people who get thyroid cancer will have a good outcome. This, of course, depends on the type of cancer and if it has spread. Your caregiver will discuss this with you and help you make the right decisions for a good outcome.
- The recurrence (return) rate of thyroid cancer is low and depends on the stage of disease.
- Ten years after diagnosis the chances of recurrence are:
  - 10% with stage I.
  - 20% with stage II.
  - 30% with stage III.
- Many recurrences are treatable, particularly if the cancer can be removed with surgery.

Document Released: 11/10/2005 Document Re-Released: 03/14/2011
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