American Thyroid Associationwww.thyroid.org

Thyroid Cancer FAG



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WHAT IS THE THYROID GLAND?

The thyroid gland located in the neck produces thyroid hormones which help the body use energy, stay warm and keep the brain, heart, muscles, and other organs working normally.

1 SYMPTOMS

What are the symptoms of thyroid cancer?

Thyroid cancer may be detected as a lump (nodule) in the neck, but often cancers are found accidentally, during imaging tests performed for other reasons. Rarely, thyroid cancer may cause pain, difficulty swallowing, or hoarseness.

2 CAUSES

What causes thyroid cancer?

In most patients, we do not know why thyroid cancer forms. It is more common in people who have a history of radiation exposure to the thyroid gland or a family history of thyroid cancer, but this is not the case for most people diagnosed with thyroid cancer. Thyroid cancer is more common as we get older.

3 DIAGNOSIS

How is thyroid cancer diagnosed?

A diagnosis of thyroid cancer is typically made by an ultrasound-guided needle biopsy of a thyroid nodule or is made after the nodule is removed during surgery. Although thyroid nodules are very common, less than 1 in 10 contain a thyroid cancer. There are no blood tests to diagnose thyroid cancer.

ITREATMENT

What are the types of thyroid cancer?

Papillary thyroid cancer is the most common type of thyroid cancer (70% to 80% of thyroid cancers). Follicular thyroid cancer (10% to 15% of thyroid cancers) tends to occur in somewhat older patients than does papillary cancer. Medullary thyroid cancer (5% to 10% of thyroid cancers) is more likely to run in families and may be diagnosed by genetic testing. Anaplastic thyroid cancer (less than 2% of thyroid cancers) is the least common but most aggressive type.

How is thyroid cancer treated?

The primary therapy for patients with thyroid cancer is surgery (see *Thyroid Surgery brochure*). Thyroid hormone therapy is usually required for the rest of one's life. When cancer appears more aggressive radioactive iodine (see Radioactive lodine brochure) may be used following surgery. The process of

receiving radioactive iodine typically involves raising thyroid stimulating hormone (TSH), a low iodine diet (see Low lodine Diet brochure), and sometimes other blood tests or imaging prior to treatment. Radioactive iodine is usually well-tolerated, with few side effects.

What is the follow-up of thyroid cancer patients?

Periodic follow-up examinations are essential for all thyroid cancer patients and include seeing your treating doctor and blood tests, such as TSH and thyroglobulin. Periodic neck ultrasounds are also done to look for possible recurrence of cancer. If there are any signs of the cancer further testing may need to be performed.

What is the prognosis of thyroid cancer?

Overall, the prognosis of thyroid cancer is very good, especially for patients younger than 55 years of age and for those with small cancers, most of whom may be cured. Even those patients who are unable to be cured of their thyroid cancer are able to live many years and feel well despite their cancer.

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FURTHER READING

Further details on this and other thyroid-related topics are available in the patient information section on the American Thyroid Association® website at www.thyroid.org.

