



THYROID CANCER

Older age and advanced disease are risk factors for complications after thyroid cancer surgery

BACKGROUND

Thyroid cancer is the fastest rising cancer, especially in women. The first step after a diagnosis of thyroid cancer is usually surgery. Thyroid surgery is a fairly safe procedure with very low complication rate. Among the most common complications are damage to the vocal cords, damage to the parathyroid glands that control calcium levels and bleeding. This study looked at the risk of complications after thyroid surgery and if there are specific risk factors for complications in older adults in the US.

THE FULL ARTICLE TITLE

Papaleontiou M et al Extrathyroidal population-based assessment of complications following surgery for thyroid cancer. *J Clin Endocrinol Metab*. April 28, 2017 [Epub ahead of print].

SUMMARY OF THE STUDY

The authors used a combined Medicare-SEER cancer registry database to look at all thyroid surgeries performed for cancer in Medicare patients. They looked at both thyroid surgery-specific complications (such as nerve/vocal cord injury or low calcium) as well as general complications (such as heart or lung problems or infections). Of more than 27,000 patients (50% of which were over 65 years old), the rate of general com-

plications was 6.5% and the rate of thyroid-surgery specific complications was 12.3%. Patients were more likely to have a complication if they had surgery for advanced cancer, more extensive surgery, were sicker (had other medical problems) and/or older.

WHAT ARE THE IMPLICATIONS OF THIS STUDY?

These rates of complications after thyroid surgery for thyroid cancer in this study are higher than previously reported and are increased with increasing age. One limitation of this study is that it did not indicate the experience of the surgeon in these cases. It is well known that surgeons that do a lot of thyroid surgery (high volume surgeons) have a much lower complication rate than surgeons that do only a few thyroid surgeries per year. However, this study does confirm that the extent of surgery should be individualized based on patient and disease factors.

— Melanie Goldfarb, MD

ATA THYROID BROCHURE LINKS

Thyroid Cancer (Papillary and Follicular): <https://www.thyroid.org/thyroid-cancer/>

Thyroid Surgery: <https://www.thyroid.org/thyroid-surgery/>

ABBREVIATIONS & DEFINITIONS

Thyroidectomy: surgery to remove the entire thyroid gland. When the entire thyroid is removed it is termed a total thyroidectomy. When less is removed, such as in removal of a lobe, it is termed a partial thyroidectomy.

Hypocalcemia: low calcium levels in the blood, a complication from thyroid surgery that is usually short-term and relatively easily treated with calcium pills. If left untreated, low calcium may be associated with muscle twitching or cramping and, if severe, can cause seizures and/or heart problems.

SEER: Surveillance, Epidemiology and End Results program, a nation-wide anonymous cancer registry generated by the National Cancer Institute that contains information on 26% of the United States population. Website: <http://seer.cancer.gov/>

