



THYROID CANCER

Different thyroid cancer descriptions impact patient anxiety and treatment choices

BACKGROUND

Thyroid cancer is becoming increasingly diagnosed and is the fastest rising cancer in women. Many of these cases are of very small papillary thyroid cancers which may not be clinically meaningful and, thus, may not even need to be treated. Indeed, some physicians are now offering the chance to have the thyroid cancer be monitored (active surveillance), rather than having the cancer removed by surgery. However, a diagnosis of cancer produces a significant emotional response in most patients. Further, it is often difficult for patients to understand the difference between a cancer that can be easily treated and is unlikely to cause death (like most types of thyroid cancer) and a cancer that will require strong chemotherapy, cause hair loss and likely an early death. This study was to see how describing the papillary thyroid cancer in other terms might lead to less patient worry and therefore allow greater use of active surveillance of this low-risk cancer.

THE FULL ARTICLE TITLE

Nickel B et al Effect of a change in papillary thyroid cancer terminology on anxiety levels and treatment preferences: A randomized crossover trial. *JAMA Otolaryngol Head Neck Surg.* 2018 Oct 1;144(10):867-874.

SUMMARY OF THE STUDY

This study was an online survey given to 550 random adults in Australia that had not been diagnosed with thyroid cancer. These volunteers were asked to consider how anxious they were upon hearing different phrases used to describe a new diagnosis of papillary thyroid cancer. The following different phrases characterizing the

papillary thyroid cancer were used: “papillary thyroid cancer”, “papillary lesion”, or “abnormal cells”. They were then presented with three choices of treatment: removing the entire thyroid by surgery, removing only the lobe of the thyroid where the cancer was found, or active surveillance (monitoring the thyroid cancer with no surgery).

There were 550 volunteers who completed the online study (50.7% female, average age 49.9 years). Nearly 9% had a non-thyroid cancer diagnosis and >50% had at least one immediate family member with a cancer diagnosis. The researchers found that the words “papillary thyroid cancer” were associated with the most anxiety. This resulted in more individuals selecting some form of perhaps unnecessary thyroid surgery rather than active surveillance.

WHAT ARE THE IMPLICATIONS OF THIS STUDY?

Rephrasing how physicians counsel patients regarding a diagnosis of low risk papillary thyroid cancer can influence how thyroid cancer is managed. Use of words other than “cancer” can lower patients’ anxiety about this diagnosis. This can allow patients to have greater comfort in knowing that some cases of low risk thyroid cancers do not necessarily require surgery. Physicians need to balance between providing appropriate information regarding a diagnosis and a patient’s anxiety with a diagnosis. This study provides insight as an approach that may be helpful to patients who are diagnosed with low risk thyroid cancer.

— Angela M. Leung, MD, MSc

ATA THYROID BROCHURE LINKS

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





THYROID CANCER, continued

ABBREVIATIONS & DEFINITIONS

Papillary thyroid cancer: The most common type of thyroid cancer. There are 4 variants of papillary thyroid cancer: classic, follicular, tall-cell and noninvasive

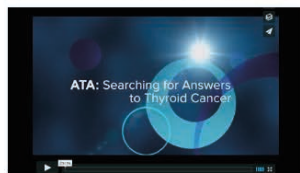
follicular thyroid neoplasm with papillary-like nuclear features (NIFTP).

Thyroid Awareness Monthly Campaigns

The ATA will be highlighting a distinct thyroid disorder each month and a portion of the sales for Bravelets™ will be donated to the ATA. The month of **December** is **Thyroid and Development Awareness Month** and a bracelet is available through the **ATA Marketplace** to support thyroid cancer awareness and education related to thyroid disease.



Watch how your donations help find answers to thyroid cancer



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www.thyroid.org/donate/

