



THYROID CANCER

Patients who tend to prefer maximal medical care receive more intense thyroid cancer follow-up care

BACKGROUND

A cancer diagnosis is frequently associated with major illness and death in our minds and can be very frightening. However, we also know that some cancers, like thyroid cancer, have excellent long-term outcomes. There has been an increase in the number of small, low risk thyroid cancers diagnosed in recent years. Previous studies had shown that frequent follow-up tests after initial successful treatment may not have any benefit. In fact, this approach may cause harm by increasing medical costs and anxiety.

It has been recognized for a long time that individuals have different preferences for their medical care. Some are medical maximizers and others medical minimizers with quite different preferences for more or less medical care. The Medical Maximizer-Minimizer scale was developed to measure these treatment preferences.

The aim of this study was to better understand the role of patient preferences on the intensity of follow-up medical care in patients who became disease-free after initial treatment for thyroid cancer.

THE FULL ARTICLE TITLE

Evron JM 2019 role of patient maximizing-minimizing preferences in thyroid cancer surveillance. *J Clin Oncol* 37:3042–3049. PMID: 31573822

SUMMARY OF THE STUDY

Researchers identified adult patients who were diagnosed with thyroid cancer between January 2014 and December 2015. They used cancer registries from Georgia and Los Angeles County. Only patients who were effectively treated and considered cancer-free were included. Surveys were mailed between February 2017 and October 2018. The survey was designed to collect information such as ethnicity, other medical conditions, and about cancer related medical care such as frequency of clinic visits and

imaging tests in the previous year. Information about age, initial cancer staging was collected from the national SEER registries. Patient preference for medical care was assessed using the Medical Maximizer-Minimizer Scale. This scale consisted of 10 statements and identified 3 groups – minimizers, moderate maximizers and strong maximizers. Researchers analyzed the relationship between minimizer-maximizer group and the number of reported doctor visits and imaging tests.

Initially 4317 patients were identified and 2183 patients were disease-free and met the inclusion criteria. Of these, 63% of the patients responded to the survey. About 32% of patients were categorized as minimizers, 42% moderate maximizers, and 26% strong maximizers. Maximizers were more likely to live in Los Angeles county, were older, and had more advanced stage of disease. Significantly greater number of patients in the strong maximizer group reported 4 or more doctor visits (39%), 2 or more neck ultrasounds (30%), one or more radioactive iodine scans or more additional imaging studies in the past year. In the minimizer group only 25% reported 4 or more doctor visits and 2 or more neck ultrasounds in one year.

WHAT ARE THE IMPLICATIONS OF THIS STUDY?

The findings of the study show that patient preference for more medical care was associated with more follow-up doctor visits and imaging tests.

This is important for patients since overtreatment can cause harm in several ways. In the worse-case scenario it can lead to unnecessary tests and treatment side effects. Both patients and physicians need to recognize the different tendencies in medical care preferences and have a careful and detailed discussion to develop an individual care plan.

— Ebru Sulanc, MD





THYROID CANCER, continued

ATA THYROID BROCHURE LINKS

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

ABBREVIATIONS & DEFINITIONS

Cancer registry : Information system designed for the collection, management, and analysis of data on patients with the diagnosis of a cancer

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/>

Thyroid cancer: Papillary and follicular thyroid cancers, which are the most common thyroid cancers. They tend to grow slowly and usually have an excellent prognosis.



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