



THYROID CANCER

Should small, low-risk thyroid cancers even be called “cancer”?

BACKGROUND

Thyroid cancer is the fastest rising cancer in the United States. Most of this increase is due to the identification of small (<1 cm) thyroid cancers. Most small thyroid cancers are low-risk for both recurrence and spread outside of the thyroid and have an excellent prognosis. However, many patients still experience some psychological harm from being diagnosed with even a low-risk cancer because the word evokes certain fears and anxieties. Clinicians now offer to watch these small cancers with regular ultrasound exams instead of surgery to appropriate patients (active surveillance). However, this is still considered a cancer. Experts wonder if it would be appropriate to change the terminology for the diagnosis so as not to evoke the same patient reaction but also not minimize the need for surveillance and follow-up, since a small percentage do recur and spread outside of the thyroid.

The current study is an analysis of 3 community focus groups of the general public conducted in Australia to consider a terminology change for small low-risk papillary thyroid cancer.

THE FULL ARTICLE TITLE

Shih P et al 2020 Terminology change for small low-risk papillary thyroid cancer as a response to overtreatment: Results from three Australian community juries. *Thyroid*. Epub 2020 Nov 25. PMID: 33238815.

SUMMARY OF THE STUDY

Three community focus groups were conducted in Australia. Participants were recruited from social media

advertising and random phone calling from a diverse sample of 3 separate communities (Sydney, Wodonga and Cairns). Over a 2 day period that consisted of presentations by experts as well as live question and answer sessions, 40 participants voted on keeping or changing the “cancer” terminology and provided their reasoning.

Participants were divided on whether to change the terminology for small low-risk thyroid cancers. Many changed their opinion over the course of the two day focus group. All participants agreed that there should be increased education for patients and the public and that health professionals have a responsibility to reduce the harms of overtreatment.

Reasons to support terminology changes are potential reduction of psychological harm from cancer diagnosis, would lead to health systems changes, and potentially have positive social and financial implications. Reasons for not supporting a terminology change include need for truth as to the malignant nature of the disease as well as lack of strong evidence and research.

WHAT ARE THE IMPLICATIONS OF THIS STUDY?

Currently, from the patient perspective, there is no consensus on whether to change the terminology of a low risk thyroid cancer diagnosis. More evidence and research is needed over larger geographic areas.

— Melanie Goldfarb, MD, MS, FACS, FACE

ATA THYROID BROCHURE LINKS

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



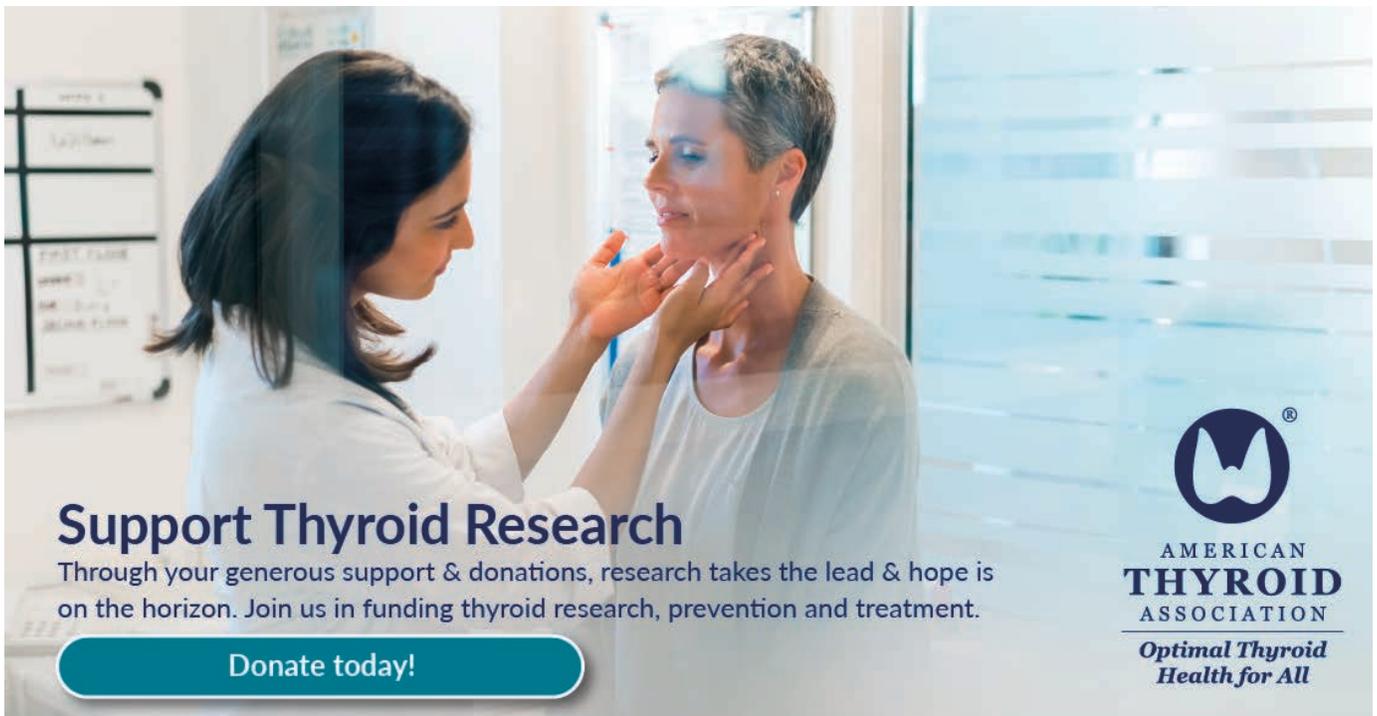


THYROID CANCER, continued

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).

Papillary microcarcinoma: a papillary thyroid cancer smaller than 1 cm in diameter.



Support Thyroid Research
Through your generous support & donations, research takes the lead & hope is on the horizon. Join us in funding thyroid research, prevention and treatment.

[Donate today!](#)



AMERICAN
THYROID
ASSOCIATION
*Optimal Thyroid
Health for All*