Introduction

Differenced thyroid cancer (DTC) is a rare disease in children and adolescents, it concerns approximately 1.4% of all pediatric malignancies. Papillary thyroid carcinoma (PTC) is the most common subtype of DTC in pediatric as well as in adult with necessity of radio iodine therapy after surgery.

Methods

A cohort of children with PTC diagnosis were follow up in our clinic after surgery and for more than 03 years after the first radio iodine therapy, they were assessed with clinical examination, biochemical and radiologic assessments.

Results

20 children (07 Boys and 13 girls) with age rang between 06 to 16 years, with no history of exposure to external irradiations, 15 children underwent total thyroidectomy once a time and 05 went through twice time surgery. Lymphnodes surgery was performed in 13 cases. Radio iodine therapy with 1.8 to 3.7 GigaBq were administrate in once a time for 08 children, in two times for 03 cases, and more than three times in 09 patients. The post therapeutic scan showed iodine uptake outside the thyroid bed in 15% of the patients (lung metastases) while 85% had uptake only in the thyroid bed. In our study 12 patients have an excellent response with indetectable thyroglobuline after more than five years of follow, whereas 05 patients have biochemical incomplete response and 03 patients present recurrence disease.

Conclusions

We conclude that young patients with DTC have a more aggressive clinical presentation with more frequent lymph node and distant metastasis comparing to what is usually seen in adults. The patients treated with high activities of radioactive iodine, especially children cases, should be carefully followed up during their whole lifespan.

References: