Thyroid Cancer

The thyroid gland is in the lower neck below the voice box. The thyroid secretes hormones that control the rate of metabolism in the body.

If you have any questions, please ask your nurse or physician.

Many types of cancer can arise from the thyroid gland. Differentiated thyroid cancers are the most common.

There are 3 types of differentiated thyroid cancers:
- Papillary cancer, which is the most common type
- Follicular cancer
- Hurthle cell cancer

Most differentiated cancers have good outcomes with the right treatment.
Other types of cancer that arise from the thyroid gland include:

- Anaplastic cancer
- Medullary cancer
- Lymphoma

**Causes of thyroid cancer**

You have a higher risk of getting thyroid cancer if you:

- Are a woman
- Are exposed to radiation
- Have a low-iodine diet
- Have certain hereditary conditions

Genetic mutations (abnormal genes) are sometimes found in thyroid cancer. The pattern of mutations varies in different types of thyroid cancer.

**Symptoms**

Most patients with thyroid cancer may see a lump or swelling in the neck. An imaging study such as an ultrasound, CT scan or MRI may show a nodule (growth) on the thyroid gland.

Some other signs and symptoms of thyroid cancer include:

- Voice changes
- Trouble breathing or swallowing
- Coughing that does not go away

Some patients may have enlarged lymph nodes in the neck due to spread of cancer.

**Diagnosing thyroid cancer**

If your physician finds a lump or nodule on your thyroid gland, they will order more tests. These tests check to see if you have cancer and if it has spread in the body.

To confirm a cancer diagnosis, your surgeon will perform a biopsy. This means the surgeon will remove a small piece of tissue from the nodule in the thyroid to check for cancer.

Fine needle aspiration (FNA) is the most common method of biopsy. The surgeon will remove tissue through a thin needle. They will use an ultrasound to direct the needle precisely into the nodule. Then, they will examine the tissue under a microscope.

Sometimes, the biopsy will not provide enough information about the nodule. If this happens, your surgeon may order more testing or even remove part of the thyroid gland. Removing part of the thyroid gland will require surgery. If your surgeon finds cancer, they may perform a “completion thyroidectomy” (removal of the remaining thyroid gland).
After a surgeon removes the thyroid cancer, many patients will require treatment with radioactive iodine. After the iodine treatment, your surgeon will conduct a whole body scan. This checks if the cancer has spread outside of the neck.

The surgeon may order a CT scan or an MRI scan if it appears that the cancer may be pressing on the airway (voice box and windpipe).

Your surgeon might order a PET scan if the thyroid cancer is the type that does not take up iodine.

Resources

cancer.org/cancer/thyroidcancer/
cancer.gov/cancertopics/pdq/treatment/thyroid/Patient/page1

For more information, please contact:
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