

# Do I Have Thyroid Cancer: Should Everyone Ask This Question?

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Published on 20<sup>th</sup> December 2023

Doi: <https://doi.org/10.52314/kjent.2023.v2i2.28>

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*Cite this article as:* Thavarool Sajith Babu. "Do I Have Thyroid Cancer: Should Everyone Ask This Question?" Kerala Journal of ENT and Head & Neck Surgery 2, no. 2 (2023): 1–2.

"Do I have a thyroid cancer?" If everyone asks this question and starts a screening, we would be detecting more and more thyroid cancers. That is the impact of screening which may not have any survival benefit rather more economic burden, health resource utilization and more complications, as was seen in the Korean population. Thyroid cancer diagnosis is increasing over the decades worldwide as well as in India due to various factors which includes overdiagnosis by imaging. Is there a real increase in thyroid cancers due to some environmental factors, is a question to ponder!

The rapid increase in thyroid cancers in Korea from 12.2 per 1,00,000 population during 1993-97 to 59.9 during 2003-2007 was the highest reported incidence and is attributed to the nationwide screening done with ultrasound scan.<sup>1</sup> A similar trend of overdiagnosis was observed in Italy, France (70%), United States, Australia (45%), Japan and Nordic countries (25%).<sup>2</sup> In India, the rate was seen to increase 37% among women and 27% among men on comparing periods of 2006-2008 and 2012-2014. There was regional difference in India among the different cancer registries, with highest reported incidence of 14.2 per 1,00,000 population in Thiruvananthapuram.<sup>3</sup>

The screening detected thyroid cancers in Korea increased from 15.9% in 1999 to 56.1 % in 2008, with 94.4% of these tumors being less than 20mm in size.<sup>4</sup> Among these population, the detection of tumors less

than 10 mm increased considerably. The Japanese studies have shown that tumors less than 10 mm (micro papillary carcinoma) can be kept under active lifelong surveillance and surgery may be considered only if there is increase over 13mm, appearance of lymph node metastasis or other diseases in thyroid or parathyroid. The American Thyroid Association guidelines also recommends investigations only in thyroid nodules more than 10mm, so that overdiagnosis and over treatment can be avoided.

Screening of thyroid cancers is not recommended as a routine and hence this question of "do I have thyroid cancer" should not be encouraged. However, patient should be well informed so that the preferences can be made, as there is still a small chance of progression and high risk (less than 3%) even in papillary cancers of less than 10mm. A clear distinction should be made between differentiated thyroid cancers and other higher risk categories for which an experience pathologist and clinician plays a vital role.

## END NOTE

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**Financial Support:** Nil

**Acknowledgements:** None

**Conflict of Interest:** None declared

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