

BONE METASTASIS OF MEDULLARY THYROID CANCER AFTER A LONG TIME

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Introduction - Purpose : Medullary thyroid carcinoma (MTC) is an uncommon thyroid tumor that usually behaves aggressively. MTC is a rare malignancy that may metastasize to liver, lungs and bones. After resection, serological surveillance for calcitonin and carcinoembryonic antigen (CEA) is used to prompt a radiographic search for metastatic disease.

Methods - Tools : We report a case of a 72-year-old man who presented with a bone metastasis 28 years after he underwent thyroidectomy for organ-confined MTC.

Findings : During follow-up, patient developed a pain in the back. Lumbar and thoracic magnetic rezonans showed the presence of extradural mass to the toracic vertebra (T11) suspicious for malignancy. A high serum level of calcitonin (6046 pg/mL, normal < 8) and serum carcinoembryonic antigen (CEA) was (128 ng/mL, normal < 4) evoked the idea of a medullary thyroid carcinoma (MTC). Complete T11 laminectomy, total resection of the extradural toracic mass and histological examination of the specimen confirmed the presence of metastatic MTC. Immunohistochemistry showed positive tumor cells for calcitonin, confirming the involvement of parafollicular calcitonin-producing C-cells. A patient with recent diagnosis of MTC and metastases bone was referred to our department for further treatment. The reported patient recovered well from surgery of his metastasis, and the 1-year follow-up showed a clinically and radiologically stable disease.

Discussion : Bone metastasis of medullary thyroid cancer after 28 years are extremely rare, and only a few cases have been reported in the literature so far.

Keywords: Medullary thyroid carcinoma, bone metastases, after a longtime