

PRIMARY CARCINOMA IN ECTOPIC THYROID

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Ectopic thyroid is rare, and primary carcinoma in ectopic thyroid is even more rare. We present a case of papillary carcinoma in ectopic thyroid in a lady age 50 years who presented with a right sided neck mass.

CASE REPORT

A 50 years lady was admitted in our department on 15.01.1991, with swelling on the right side of the neck below the angle of the mandible. The mass was 8x5cm in size, mobile and non tender. Routine local, systemic and laboratory investigations revealed no primary lesion. Patient was examined under general anaesthesia, particular attention was paid to nasopharynx, pyriform fossa, larynx, tracheo bronchial tree and esophagus but no lesion was found. Blind biopsies were taken from nasopharynx, vallecula and pyriform fossa, Histopathological result showed no abnormality.

The thyroid scan showed a good and uniform concentration of activity in near normal sized thyroid gland, no cold area was seen. Abdominal ultrasound was normal.

An incisional biopsy was taken from the mass, the result showed as papillary carcinoma thyroid. (Fig-I, II) The mass was excised as a whole. It was directly in contact with external jugular vein, but was not it. This mass was also subjected to histology

examination the result for this was the same as before papillary carcinoma.

The primary lesion was suspected in the normally located thyroid gland, with thyroid scan not revealing even minimal microscopic lesion. We decided to excise the whole normal thyroid for serial biopsies. Total thyroidectomy was done and the whole mass was sent for histopathological examination and this time on serial sections, it did not reveal any malignancy.

Whole body scan, but no evidence of metastatic activity was seen in the lungs, liver, lymphnodes and skeleton, except some concentration in the normally located thyroid bed. Therefore it was advised that^{1 131} ablative dose should be given to knock out the thyroid remnants. Patient was given^{1 131} ablative dose, patient is free of the disease for the last six years, and she is still under followup.

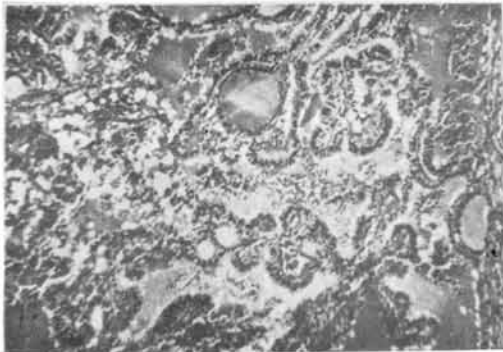
DISCUSSION

In an extensive study about the carcinoma in Ectopic thyroid² Waston and Pool found three lingual carcinoma in series of 167 thyroid malignancies. Nine case were reported by Cromatie and Nelson.³

Wapshaw⁴ reported 12 cases and Millet et al⁵ reported 15 cases. Fish and Moore⁶ found 21 cases of lingual thyroid carcinoma Ward et al⁷ noted that 5 out of 6 lingual thyroid carcinoma occurred in male patients.



Sauk⁸ reported 27 cases of ectopic malignancies in thyroid tissues including the thyroglossal duct. Potdar and Desai⁹ reported the last known case in 1971. It would appear that the development of cancer in a lingual thyroid is a definite clinical entity, but our case the, ectopic thyroid gland was not a lingual thyroid, it was situated in the lateral side of the neck in the jugulo diastatic area. We did not find any such reported case any where, while going through the available literature.



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