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Thyroid cancer incidence and clinicopathological differences in patients with end-stage renal failure

Mahir Kirnap, Aydıncan Akdur, Nazli Gülsoy Kirnap, Eda Yilmaz Akcay and **Gokhan Moray**
Baskent University, Turkey

Aim: In the present, study we aimed to determine the prevalence of thyroid cancer and the clinicopathological properties of papillary thyroid cancer (PTC) in a patient population undergoing dialysis for end-stage renal failure (ESRF).

Materials & Methods: We retrospectively reviewed all thyroid ultrasonography (USG) examinations performed between January 2007 and December 2015 to determine the incidence of nodular thyroid disease in ESRF and normal patient populations. For both patient groups, differences between patient and tumor characteristics were evaluated in patients diagnosed to have PTC.

Results: Among 29.381 patients, who underwent thyroid USG examination, 3.491 were included in the ESRF group (Group 1) and 25.890 in the control group (Group 2). Thyroid cancer was detected in 77 (2.2%) of 3.491 patients in Group 1 and 338 (1.3%) of 25.890 patients in Group 2. Thyroid cancer was significantly more prevalent in patients with ESRF ($p<0.001$).

Discussion: When only patients with papillary thyroid cancer were considered, no significant difference existed between the two groups with respect to the prevalence of PTC, although PTC cases in the ESRF group had a significantly higher rate of aggressive characteristics such as capsule invasion, multifocality, and lymph node metastasis. Whereas thyroid cancer is more common in patients with ESRF compared to normal controls, papillary thyroid cancer was not significantly more prevalent in the ESRF group.

Conclusion: PTC in the ESRF group having more aggressive properties than those in the control group suggests that PTC should be diagnosed earlier in their course, treated more aggressively, and followed more closely in ESRF.

mahirkir@hotmail.com