

# Postępowanie w przerzutach do węzłów chłonnych w przebiegu raka tarczycy

Management of thyroid cancer metastases in lymph nodes

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## Summary

**Background.** We would like to present the specificity, technique and efficiency of neck surgery in patients with lymph node recurrence in the course of thyroid cancer treatment. **Material.** In the ENT Department of Medical University in Poznań, Poland, 16 patients were operated for diagnosed neck relapse of thyroid cancer in the years 2000-2005. All of them were directed from endocrinology or general surgery units, where were previously treated by means of total/partial thyroidectomy: in 7 cases high grade follicular cancer, in 6 medullary, in 2 oxyphilic and 1 anaplastic cancer. **Results.** In 5 patients bilateral (one site radical, one site selective), in 11 unilateral neck dissection were performed. The thyroid gland cancer metastases were predominantly localized in the level IV (in 15 of 16 cases) and in anterior neck compartment, i.e. level VI (7 of 16 cases). In 6 patients the remnant of thyroid tissue were excised. Complication - recurrent nerve paresis occurred in one case. The time of observation ranged from 5 to 57 months. The neck relapse was observed in one patient with undifferentiated thyroid cancer in 8 month time after selective neck dissection. The rest of the group is free of disease.