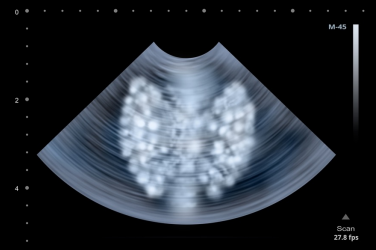
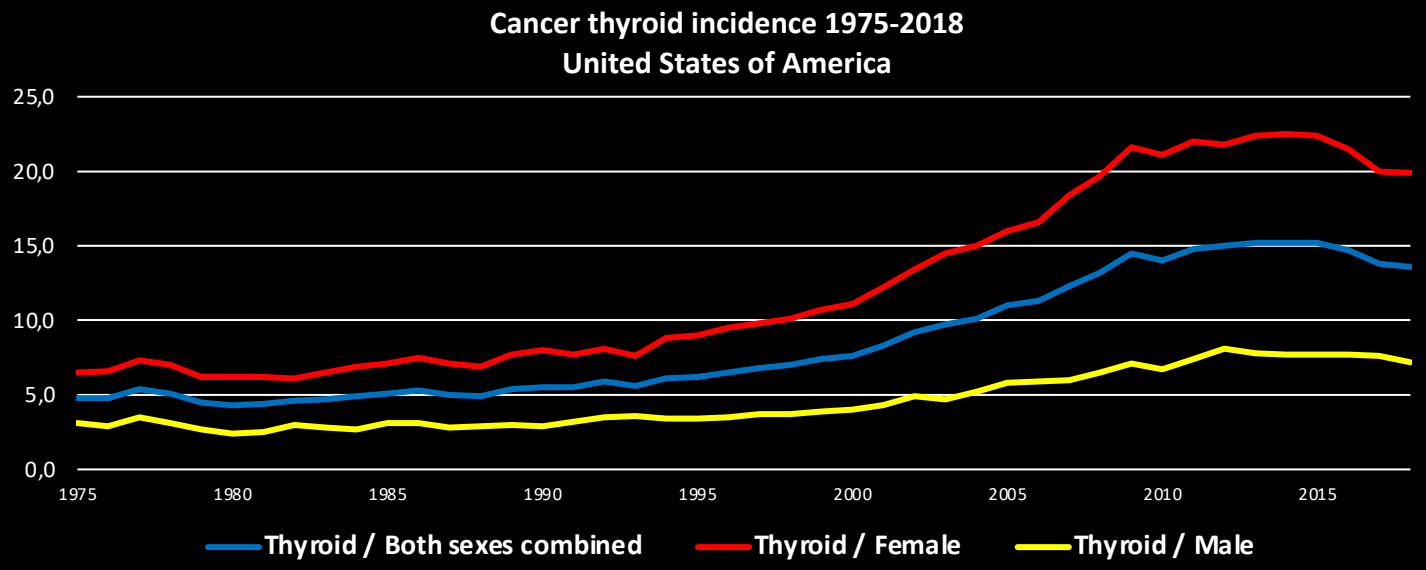


THYROID CANCER

- **Thyroid cancer** is a rare type of cancer that affects the thyroid gland.
- It's most common in people in **their 30s and those over the age of 60**.
- **Women are 2 to 3 times more** likely to develop it than men

Estimated new cases 2022
43,800

Incidence rates 2014-2018
14.1 per 100,000

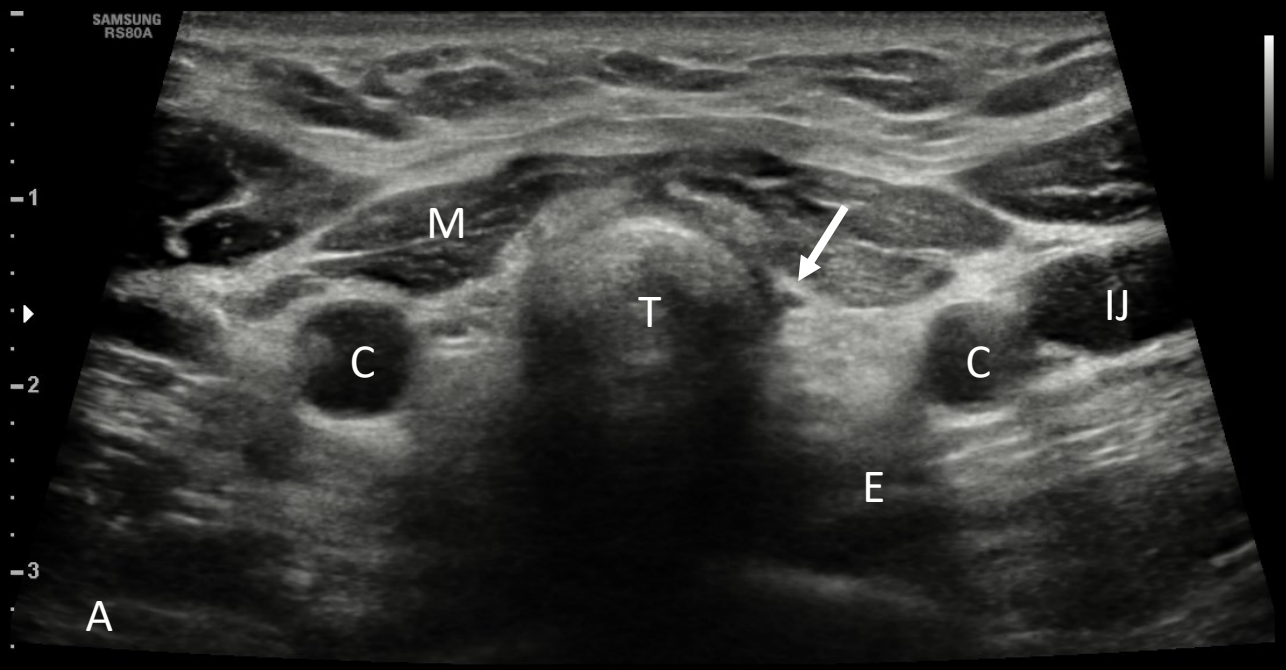


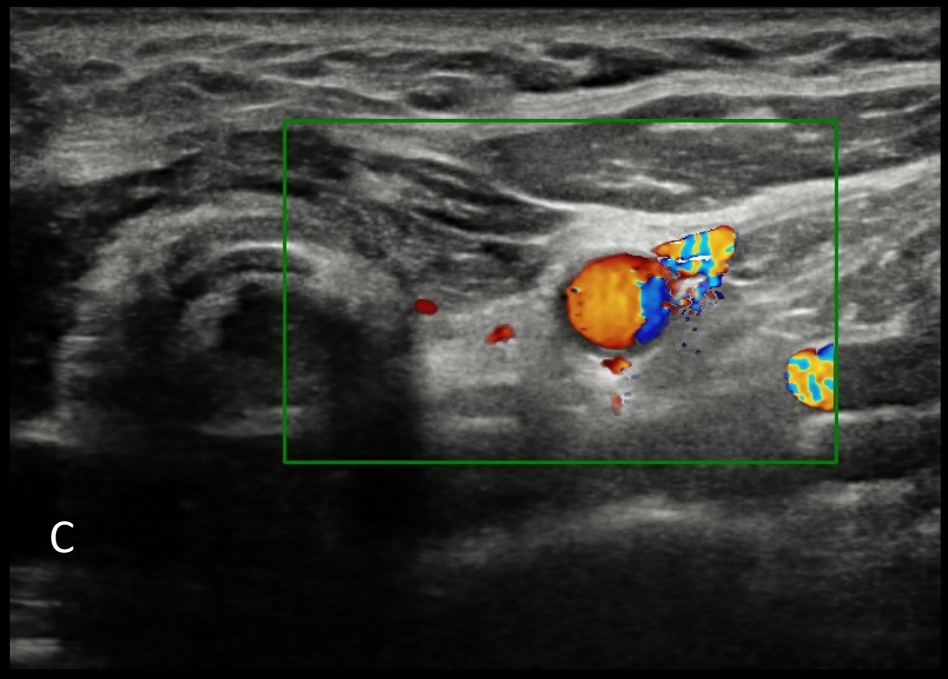
Estimated deaths 2022
2,230

Detahs rates 2015-2019
0.5

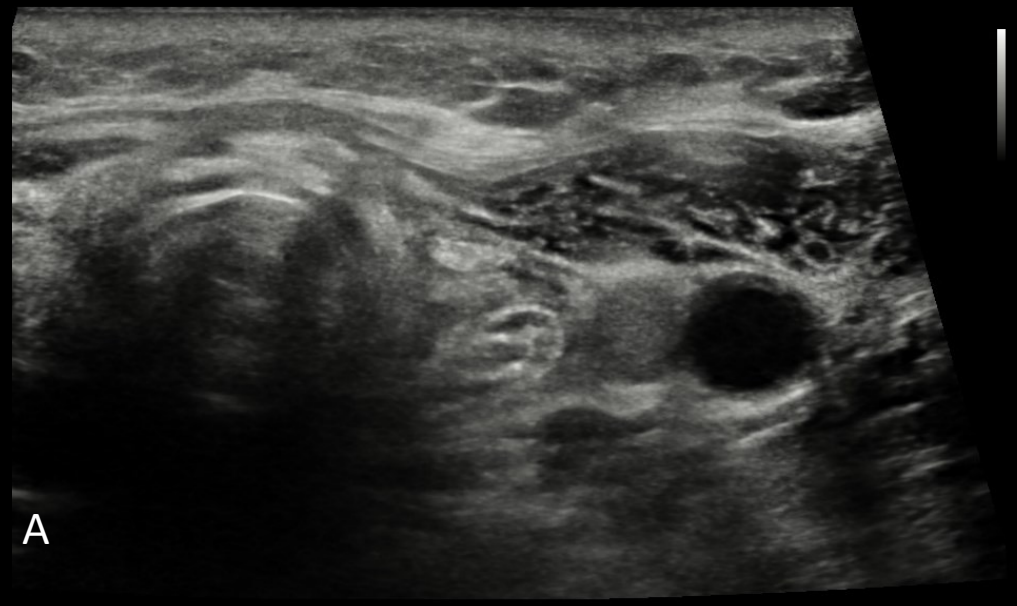
Ultrasound can help determine recurrence in postoperative patient

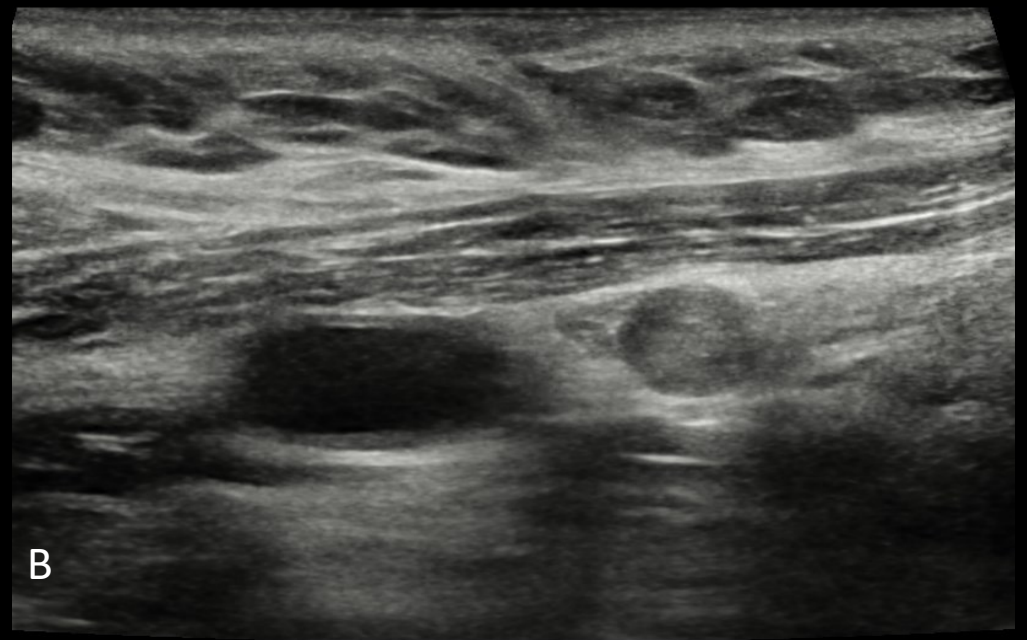
Normal thyroidectomy bed

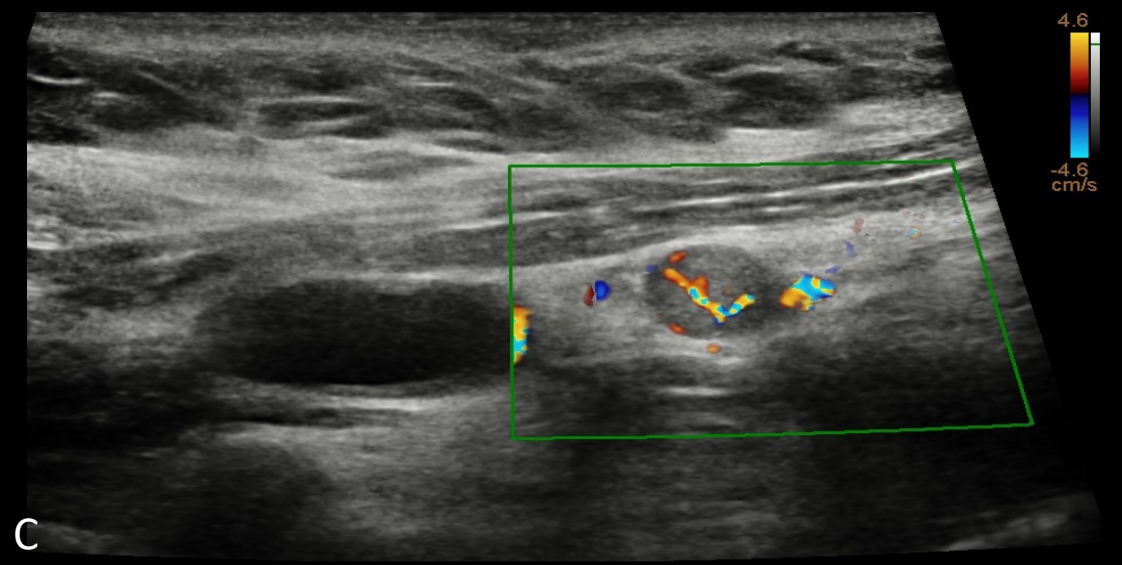


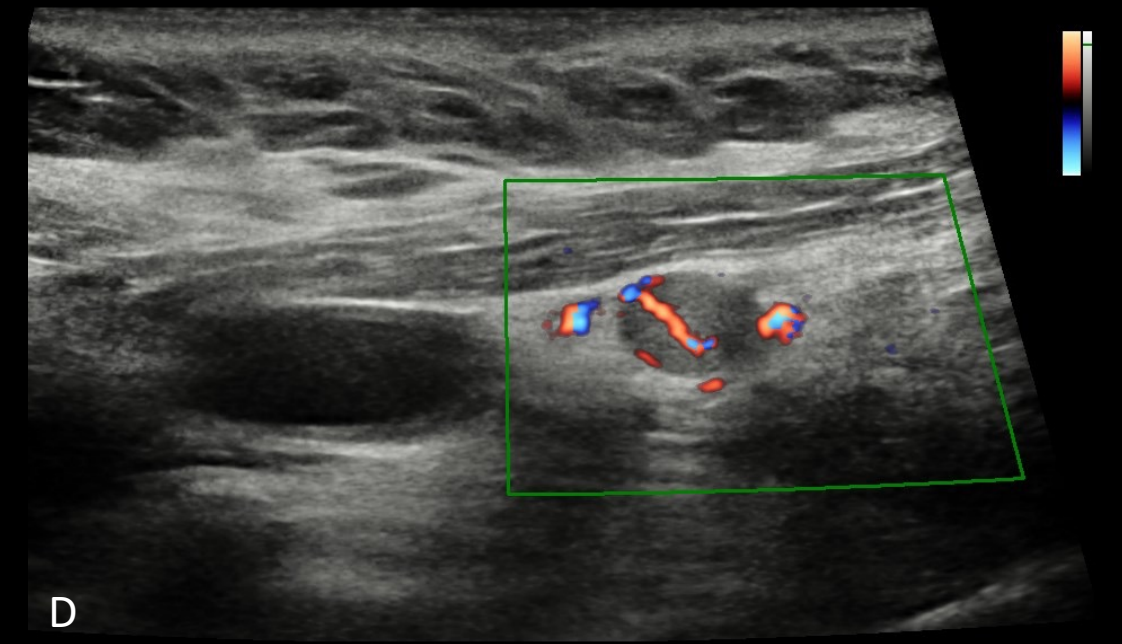


A. Transverse US and B sagital US of the neck shows a normal right and left thyroidectomy fossa, with the typicall echogenic fibroadipose tissue between the trachea (T) and common carotid artery (C). A small 3 mm nodule seen in the left thyroidectomy fossa (small arrow) correspond to the cross-section of a long fibrotic band in B
C. Transverse color Doppler of the left thyroidectomy bed shows hipovascular echogenic tissue.
IJ: internal jugular vein; T: trachea; M: prethyroid muscles; E: esophagus



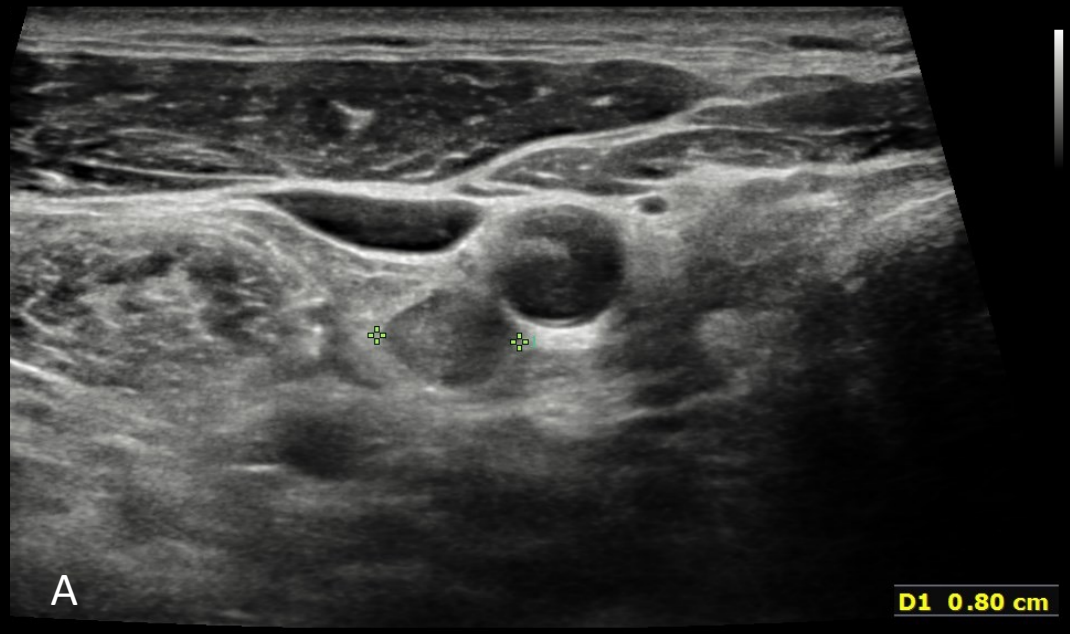


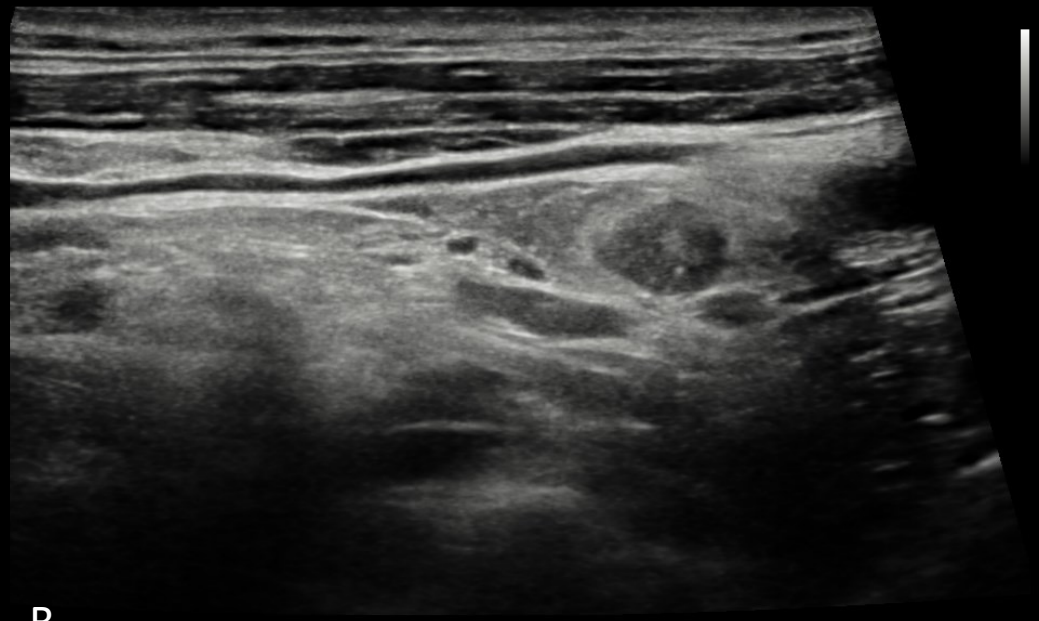




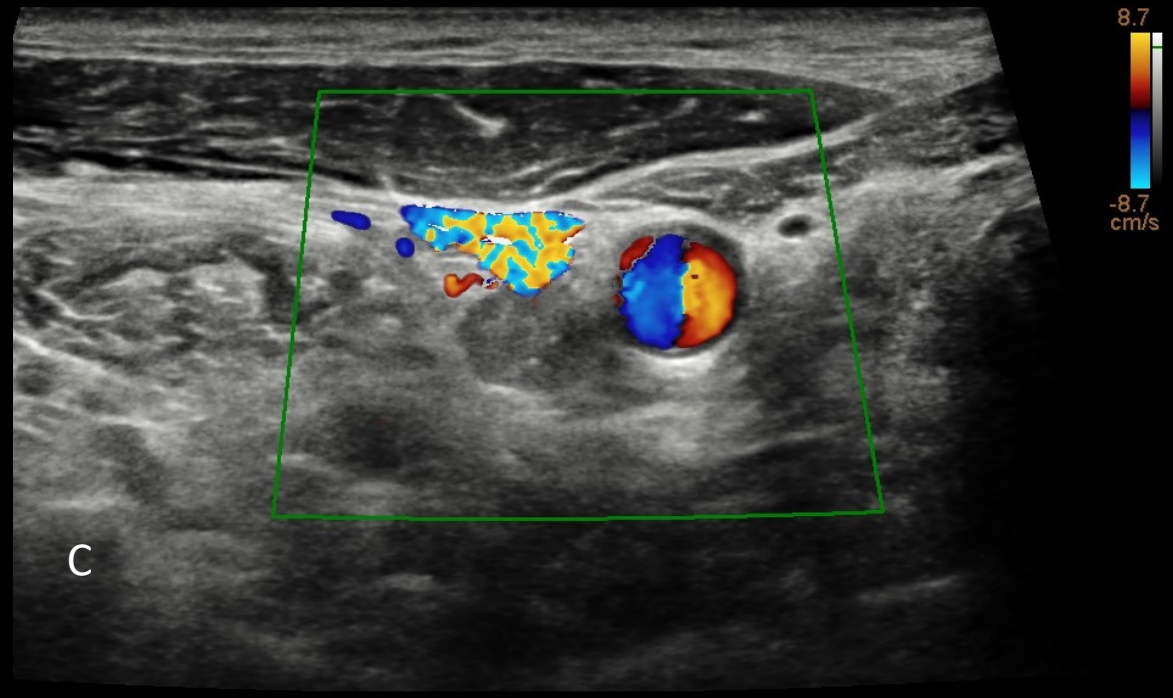
67 –year-old woman 2 years post thyroidectomy for PTC

A. Transverse and B sagital US of the left thyroidectomy bed shows a 8 mm solid nodule with punctate echogenic foci. C and D sagital US color and power Doppler Imaging showing increased internal vascularity with a penetrating vessel. The US-guided FNA yielded metastasic PTC.



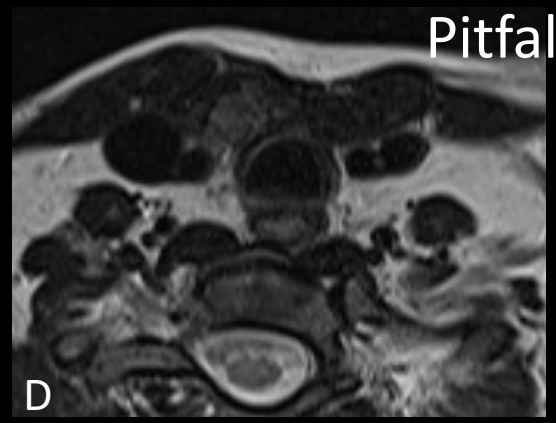


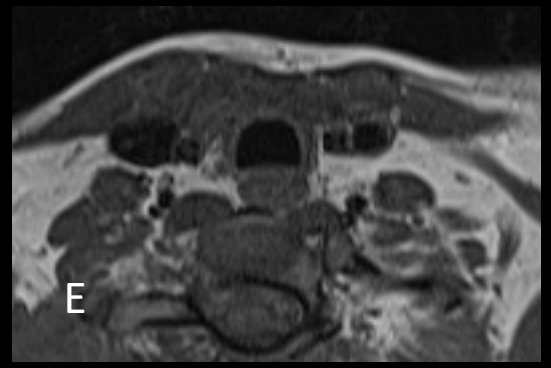
REG. CERVICAL DER GRUPO IV

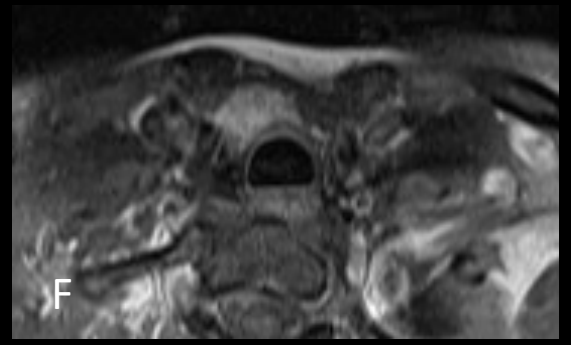


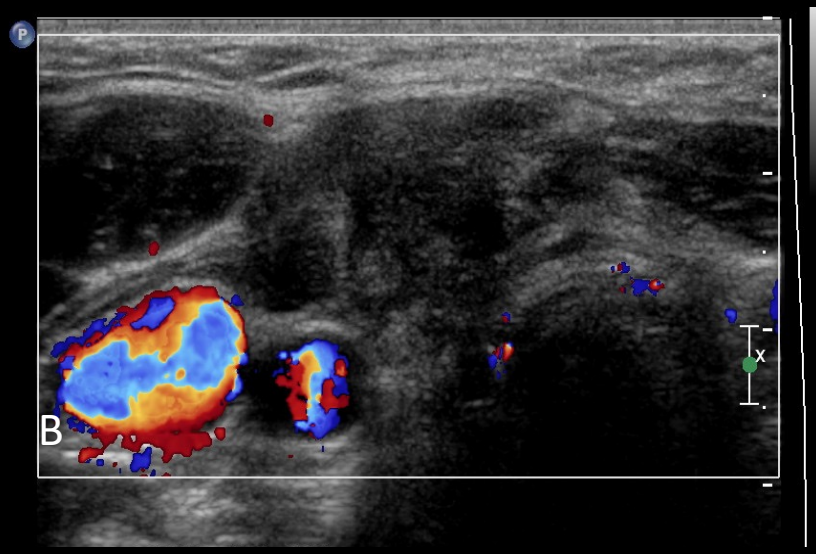
REG. CERVICAL DER GRUPO IV

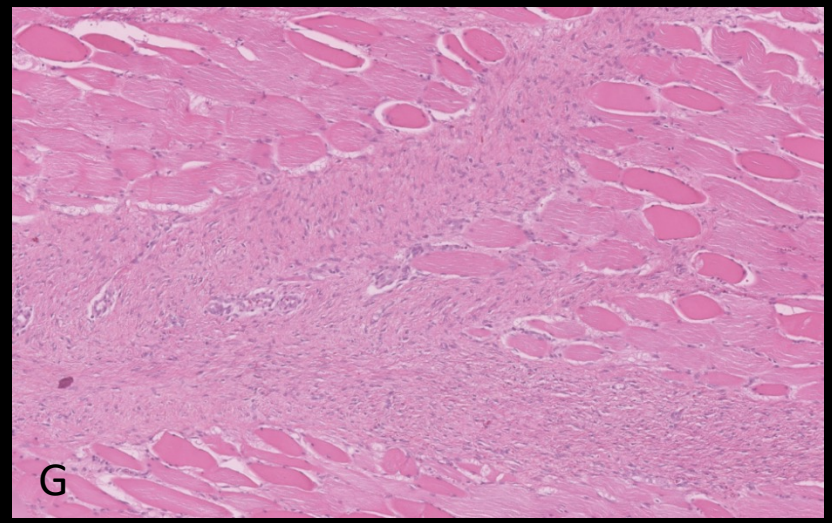
50 –year-old man 3 years post thyroidectomy for PTC
A Transverse US, B sagital US, C Transverse color Doppler ultrasound of the neck shows a 9 mm solid group IV adenopathy with punctate echogenic foci highly suspicios of recurrent disease, with no internal vascularity. The US-guided FNA yielded metastasic PTC.











A 37-year-old woman with a history of thyroidectomy for PTC two years ago followed by I-131 ablation.
A, Transverse US and B color Doppler corresponding image and C sagital US of right side of the neck shows a 17 x 12 x 11 mm hipoechoic heterogeneous hypovascular mass infiltrating the adjacent prethyroid muscles, with no micro or macrocalcifications. D, E and F transverse T2 W ,T1 gradient eco pre-gadolinium and T1 contrast-enhanced gadolinium confirms a solid enhancing mass suspicious of locoregional disease. The patient went straight to surgery. G. Medium-power examination reveals infiltration of skeletal muscle. The fascicles of fibromatosis are long and sweeping, composed by bland fibroblasts and myofibroblasts without cytological atypia.