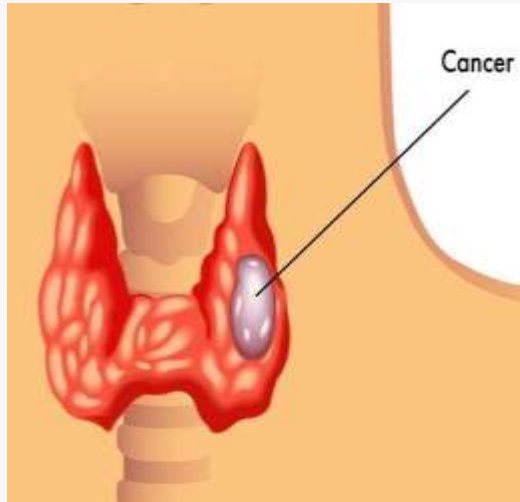


# THYROID CANCER



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## Introduction

- **Thyroid cancer is a common type of cancer. It accounts for 1 to 5% of all cancers cases worldwide.**
- **As medical technology advances, more cases of thyroid cancer are being diagnosed early.**
- **The earlier treatment begins, the better the chances of a cure. Most cases of thyroid cancer are curable with treatment.**
- **The thyroid gland also produces calcitonin.**
- **This helps control the amounts of calcium and phosphate salts in the body.**
- **The level of calcitonin is raised when medullary thyroid cancer is present.**

## DEFINITION

- It is a abnormal proliferation of cells of thyroid gland.

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## Etiology

- Iodine: Iodine-deficient diets may lead to increase the TSH level and considered goitrogenic
- Thyroiditis: (Hashimoto's Disease) may develop into a form of cancer called lymphoma.
- External Radiation
- Increased Age
- Nuclear power plant accident
- Food source contaminated with radioactivity
- Radioactive iodine concentrated in the thyroid gland.

## CLINICAL FINDINGS

- A lump in the neck, sometimes growing quickly
- Swelling in the neck
- Pain in the front of the neck, sometimes going up to the ears
- Hoarseness or other voice changes that do not go away
- Trouble swallowing
- Trouble breathing
- A constant cough that is not due to a cold

## Diagnostic Findings

- History Collection
- Physical Examination
- Thyroid scan
- Thyroid function test
- Biopsy with fine needle and large bore needle
- Ultra sound
- MRI and CT scan
- Radio active iodine uptake studies
- Thyroid suppression test.

## TREATMENT

- Thyroid replacement therapy
- Chemotherapy
- Radiation therapy
- Radioactive iodine therapy
- Drug - Thyroxine therapy

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## RADIOIODINE THERAPY:

### o The Indications:

1. After Surgery to destroy any residual thyroid cancer cells or residual normal thyroid tissue.
2. To treat thyroid cancer that has spread to the lymph nodes, lungs or bones.
3. To treat thyroid cancer recurrence after initial treatment by surgery or previous radioactive iodine or both.



## THYROXIN THERAPY :

- Recent meta-analysis supported the efficacy of TSH suppression in preventing adverse clinical effect
- High risk pt. are maintained at TSH level below 0.1 mu/ L
- Low risk pt. TSH level at or below the normal range (0.1- 0.5 mu/ L)

## Surgical Mgt:

- Thyroidectomy
- More extensive radical neck dissection.

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## Complication:

- When carcinoma is untreated, it becomes fatal.
- Death
- Hemorrhage
- Hematoma formation

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## Nursing Diagnosis

- Acute Pain related to pressure / swelling of the tumor nodule.
- Ineffective airway clearance related to Tracheal obstruction due to tumor mass pressure/Laryngeal spasm/Accumulation of secretions.
- Impaired Verbal Communication related to Injury to vocal cords Laryngeal nerve damage Tissue edema.
- Anxiety r/t concern about cancer, upcoming surgery.
- Knowledge deficit r/t cancer and its treatment.

## REFERENCES

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