

Papillary Thyroid Carcinoma presenting as Cystic Nodule: A Case Report

Dr Darwin Totesora¹, Dr. Ma. Theresa Chua-Agcaoili²

¹The Medical City, Pasig City, Philippines, ²The Medical City, Pasig City, Philippines

Objectives

Cystic nodule is a rare presentation of Papillary Thyroid Carcinoma and is seen in less than 10% of papillary thyroid carcinoma. We present an unusual case of a 45 year old male, with no predisposing factor, who presented with a large right colloid goiter that was later on confirmed by immunohistochemical staining to be papillary thyroid carcinoma.

Materials and Methods

The patient initially consulted for an incidental finding of a right thyroid nodule on palpitation. Work up was done which revealed normal baseline thyroid function tests and an ultrasonographic finding of ~3cm right ovoid thyroid cystic mass with multiple small nodules but no suspicious findings suggestive of malignancy. Fine needle aspiration biopsy was done revealing blood and colloid (Bethesda Category I). Right thyroidectomy was performed and eventually completion thyroidectomy.

Results

Histopathology revealed the right thyroid had a 0.3cm micro-papillary thyroid carcinoma and an adenomatous goiter with cystic degenerations and hyperplastic features which were suggestive of an underlying malignancy. HBME-1 stain which is a stain used for papillary thyroid carcinoma was positive.

Conclusion

The chance of malignancy of cystic nodule is minimal with an estimated 5-10%, yet its malignant potential should not be overlooked because papillary thyroid cancers may have cystic variants. Immunohistochemical stains such as HBME-1 are useful tests to help differentiate benign from malignant lesions particularly those with equivocal histology and should be considered in cases of large cystic nodules to rule out thyroid carcinoma.