

Secondary thyroid cancer more deadly than primary malignancy in young individuals

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A new analysis has found that adolescents and young adults who develop thyroid cancer as a secondary cancer have a significantly greater risk of dying than those with primary thyroid cancer. Published early online in *Cancer*, a peer-reviewed journal of the American Cancer Society, the findings stress the importance of screening young cancer survivors to detect early signs of a potentially life-threatening thyroid malignancy.

Thyroid cancer is one of the five most common malignancies in adolescent and young adult patients (ages 15 to 39 years). It can develop as an initial cancer or rarely after treatment for a previous cancer. Melanie Goldfarb, MD, and David Freyer, DO, of the Keck School of Medicine of the University of Southern California and Children's Hospital Los Angeles, designed a study to compare the tumor characteristics, treatment, and survival of such primary versus secondary thyroid cancers in adolescent and young adult patients.

Their analysis included all adolescent and young adult thyroid cancer cases documented in the 1998-2010 American College of Surgeons National Cancer Database. Of 41,062 cases, 1,349 (3.3 percent) had experienced a prior malignancy. Compared with cases of primary thyroid cancer, cases of secondary thyroid cancer were more likely to be small but to occur in more than one location. Also, patients with secondary thyroid cancer were more than 6.6-times as likely to die than patients with primary cancer, though survival with treatment is excellent for both at greater than 95%. This study suggests that there may be differences between thyroid cancers seen with or without a prior

malignancy.

"This study will hopefully spur future research that will investigate if there are any causes—biologic, environmental, prior treatment-related, or access to care disparities—to account for the survival differences in these secondary cancers," said Dr. Goldfarb.

The authors consider whether the current screening guidelines for survivors of childhood cancer would detect these smaller cancers. Dr. Freyer noted that the results may have implications for [thyroid cancer](#) screening in young [cancer survivors](#).

Provided by Wiley

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