

Thyroidectomy without I-131 noninferior in low-risk thyroid cancer

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For patients with low-risk thyroid cancer undergoing thyroidectomy,

follow-up without use of radioiodine is noninferior to ablation with radioiodine, according to a study published in the March 10 issue of the *New England Journal of Medicine*.

Sophie Leboulleux, M.D., Ph.D., from the Gustave Roussy and Université Paris-Saclay in Villejuif, France, and colleagues conducted a prospective, phase 3 trial involving patients with low-risk differentiated [thyroid cancer](#) who were undergoing thyroidectomy. A total of 730 participants were randomly assigned to receive [ablation](#) with postoperative administration of radioiodine (1.1 GBq) after injections of recombinant human thyrotropin (radioiodine group) or to receive no postoperative radioiodine (no-radioiodine group); participants were evaluated three years after randomization.

The researchers found that the percentages of patients without a composite end point event (functional, structural, or biologic abnormalities) at three years were 95.6 and 95.9 percent in the no-radioiodine and radioiodine groups, respectively (difference, -0.3 percentage points), which met the noninferiority criteria. In eight patients, events consisted of structural or functional abnormalities, while 23 patients with 25 events had biologic abnormalities. Patients with a postoperative serum thyroglobulin level of more than 1 ng/mL during thyroid hormone treatment had more frequent events. Patients with or without an event had similar molecular alterations. There were no reports of treatment-related adverse events.

"Follow-up without the use of radioiodine after thyroidectomy was noninferior to the administration of 1.1 GBq of radioiodine after the administration of recombinant human thyrotropin," the authors write.

More information: Sophie Leboulleux et al, Thyroidectomy without Radioiodine in Patients with Low-Risk Thyroid Cancer, *New England Journal of Medicine* (2022). [DOI: 10.1056/NEJMoa2111953](https://doi.org/10.1056/NEJMoa2111953)

David S. Cooper, Radioiodine for Low-Risk Thyroid Cancer—the Swinging Pendulum, *New England Journal of Medicine* (2022). [DOI: 10.1056/NEJMe2200665](https://doi.org/10.1056/NEJMe2200665)

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