## **Editorial**

## Diffuse Goiter with Diffuse Microcalcification

Aya Nozaki¹, Yuka Kurobe¹, Ai Haraguchi¹, Ichiro Horie¹, Toshiro Usa¹, Naoe Kinoshita², Takao Ando¹\* and Atsushi Kawakami¹

<sup>1</sup>Department of Endocrinology and Metabolism, Nagasaki University Graduate School of Biomedical Sciences, Japan

<sup>2</sup>Department of Pathology, Nagasaki University Graduate School of Biomedical Sciences, Japan

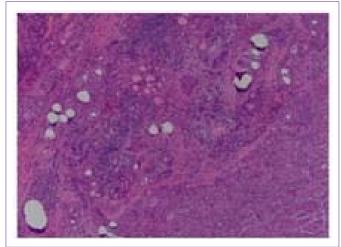
\*Corresponding author: Takao Ando, Department of Endocrinology and Metabolism, Nagasaki University Graduate School of Biomedical Sciences, 1-7-1 Sakamoto, Nagasaki, 852-8501, Japan, Tel: +81-95-819-7268; Fax: +81-95-849-7270; Email: takaoando@gmail.com

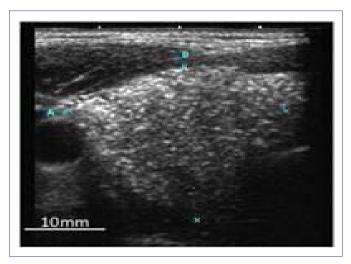
**Received:** July 04, 2014; **Accepted:** Aug 04, 2014; **Published:** Aug 06, 2014

A 23-year-old Chinese female was referred to our hospital because of a goiter. She had been diagnosed with chronic thyroiditis with anti-thyroglobulin antibodies >4000 IU/mL. Her thyroid was diffusely enlarged with numerous hyperechoic spots in ultrasound (Figure 1).

Q. What would be your next step in diagnosis?

The results of fine needle aspiration of the thyroid gland were compatible with diffuse sclerosing variant of papillary thyroid carcinoma (DSPTC). She underwent total thyroidectomy with neck lymph node dissection. Postsurgical pathological examination showed eosinophilic cell proliferation with papillary and solid growth spreading entire the right lobe of the thyroid (Figure 2) with many metastatic cervical lymph nodes.





DSPTC is a rare (<1%) and aggressive variant of thyroid papillary carcinoma [1,2]. It is known to be frequently associated with chronic thyroiditis and thus patients can be incorrectly treated as chronic thyroiditis. Diffuse microcalcification in ultrasound is one of the important clues to the diagnosis [1].

## Acknowledgement

T.A. receives research funding from Astra Zeneca and received research expenses of the post-marketing survey from Kyowa Kirin.

## References

- Regalbuto C, Malandrino P, Tumminia A, Le Moli R, Vigneri R, Pezzino V. A diffuse sclerosing variant of papillary thyroid carcinoma: clinical and pathologic features and outcomes of 34 consecutive cases. *Thyroid*. 2011; 21: 383-389.
- Fukushima M, Ito Y, Hirokawa M, Akasu H, Shimizu K, Miyauchi A. Clinicopathologic characteristics and prognosis of diffuse sclerosing variant of papillary thyroid carcinoma in Japan: an 18-year experience at a single institution. World J Surg. 2009; 33: 958-962.