

RARE BRAIN METASTASIS FROM PAPILLARY THYROID CARCINOMA AT THE CEREBELLOPOTINE ANGLE: A CASE REPORT AND REVIEW OF THE LITERATURE

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Papillary thyroid carcinoma (PTC), representing the most common type of the thyroid cancer, is usually slow-growing and runs an indolent clinical course. Metastasis to regional lymph nodes is a common finding. Patients with initial N1 stage or higher have higher local recurrence rate. The prognosis had been related to the age at initial diagnosis, tumor size, sex, extent of surgical resection, presence of extrathyroid invasion, multicentricity and presence of distant metastasis [4]. Distant metastasis is uncommon, especially intracranial metastasis that is rare with a frequency of 0.1-5% in reported series. Cerebral hemispheres are the most common site of intracranial metastasis in reported series. We report a case of papillary carcinoma of the thyroid with metastasis to a very unusual location of left cerebellopotine angle and present our experience of successful management for this case with combined modalities including surgery, post-operative adjuvant radiotherapy and radioiodine therapy. Literature reviews of this unusual clinical presentation are also discussed.

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Key words: Thyroid cancer, Papillary carcinoma, Intracranial metastasis, 3D-conformal radiotherapy

INTRODUCTION

The incidence of thyroid carcinoma in Taiwan is 1.56-6.58 in 100000 of the population with male to female ratio 1:4. The common subtypes of thyroid carcinoma are papillary carcinoma and follicular carcinoma, representing about 75% and 14% of cases, respectively. Both papillary carcinoma and follicular carcinoma are well-differentiated carcinoma. Generally, these indolent malignancies have good prognosis. Postoperative adjuvant external beam radiotherapy (EBRT) may have benefits for local-regional recurrence in the high-risk patients.

Distant metastasis is not often seen. Lung and bone are the commonest sites seen in the patients with distant metastasis. Brain metastasis is uncommon and usually found as a late sequela of distant metastasis [9]. Once brain metastasis is diagnosed, those patients often have short-term survival in spite of treatment including surgery, radioiodine therapy, chemotherapy or radiotherapy. We report a case of papillary carcinoma of the thyroid with metastasis to the left cerebellopotine angle, which was successfully treated with a combined modality approach including surgery, post-operative adjuvant radiotherapy and radioiodine therapy.

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