ABSTRACT POSTER

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TIPOLOGIA: POSTER

ARGOMENTO: Caso clinico

TITOLO: Sclerosing mucoepidermoid carcinoma with eosinophilia of the thyroid: a case report and review of the literature.

INTRODUZIONE: Sclerosing mucoepidermoid carcinoma with eosinophilia of the thyroid (SMECE) was first described as a low-grade carcinoma, generally occurring in a background of Hashimoto's thyroiditis. So far, less than 30 cases have been described in literature. Most cases manifested an indolent clinical course despite contiguous adenopathy and soft-tissue extension; metastasis has been described as an unusual manifestation. However some patients give a history of recent rapid enlargement and, rarely, may present with symptoms resulting from extrathyroidal extention.We report a case of SMECE in a woman with Hashimoto's thyroiditis and a thyroid node known for over 10 years.

METODI: Clinical and biochemical data of the patient are presented and the pertinent literature is reviewed.

RISULTATI: A 70years old woman comes to our center for evaluation of severe osteoporosis in DMT1 with microangiopathy and Hashimoto's thyroiditis. She had hypothyroidism and a thyroid nodule known at least since 2000,reported of stable size at US follow-up. She had not history of neck irradiation and her family did not indicated history of thyroid cancer. In 2012, at US evaluation, the left lobar node appeared hypoechoic, heterogeneous, non-vascularised, with irregular margins,37mm in diameter, stable compared to previous evaluations. Plasmatic calcitonin was normal. A fine-needle aspiration on this node resulted Thy3. She underwent left thyroidectomy with a histological diagnosis of SMECE. The proliferation showed foci of perithyroidal extension reaching the margins of surgical excision. A subsequent right lobectomy and recurrent lymphonode dissection was performed. TNM: pT3N0. One month after surgery the total body CT-PET showed a tracer accumulation (14mm, suv/max 3.3) in the neck, confirmed on MRI. The patient was addressed to nuclear medicine, where ablative radio metabolic therapy with I131 has been programmed.

CONCLUSIONI: SMECE is a rare malignant neoplasm that often develops in the context of an autoimmune thyroiditis. The differential diagnosis with undifferentiated or squamous carcinoma, mucoepidermoid carcinoma and nodular tumor-like squamous metaplasia could be difficult. It's an aggressive cancer that can have indolent clinical course. Optimal treatment and follow-up are yet to be determined.