

Airway Obstruction as the First Manifestation of an Anaplastic Thyroid

Carcinoma

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Case Description

Anaplastic Thyroid Carcinoma (ACT) is a rare malignancy, accounting for 1-2% of all thyroid cancers. Although rare, ATC accounts for most of deaths from thyroid carcinoma.

A 64-years-old woman present in the emergency department due to solid dysphagia, “throat tightness”, hoarseness and hemoptoic sputum with one week. A mass was identified at the base of the neck (Figure 1), adherent to the planes and painless. Thyroid ultrasound revealed large solid hypoechoic lesion in the right lobe extending to the isthmus, with irregular contours, classified as EU-TIRADS 5 (European Thyroid Association Guidelines for Ultrasound Malignancy Risk Stratification of Thyroid Nodules in Adults). Chest CT scan was suggestive of bilateral metastases (Figure 2). Rigid bronchoscopy was performed to removal intratracheal mass with immediate symptomatic relief (Figure 3). Pathological anatomy revealed anaplastic thyroid carcinoma.

Anaplastic carcinoma is fast-growing, and early diagnosis is essential to improve its reserved prognosis.

Keywords: Anaplastic thyroid carcinoma; Upper airway obstruction



Figure 1: Mass at the base of the neck.

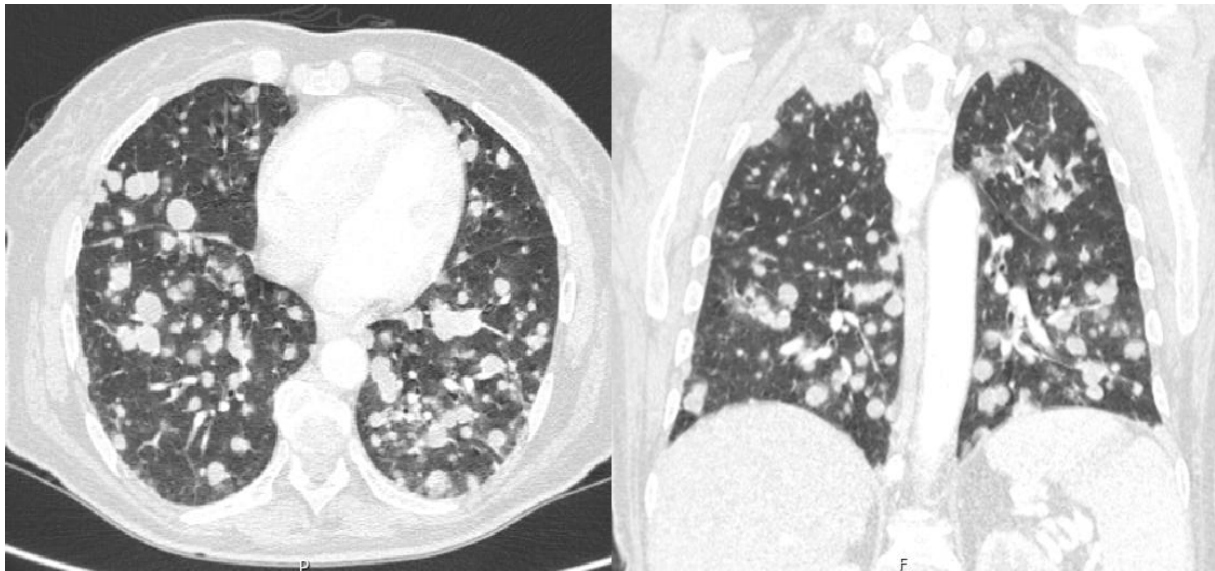


Figure 2: Chest CT scan with bilateral metastases.

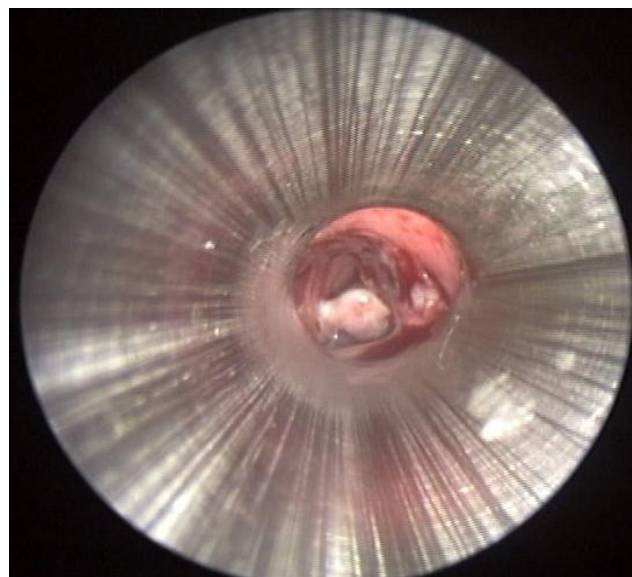


Figure 3: Rigid bronchoscopy show a intratracheal mass, 1.5cm below vocal cords.

Patient's consent

Written informed consent was obtained for the publication in this case report and accompanying images.

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Declaration of Competing Interest

None of the authors have any conflicts of interest to disclose.

Authors Contribution

Fábia Cruz: Acquisition of data, drafting the article and literature revision

Rita Branquinho Pinheiro: Acquisition of data

Rita Macedo: Literature revision

João Dias Cardoso: Critical revision

Francisco Freitas: Critical revision

Paula Monteiro: Guarantor

Paula Pinto: Guarantor

Cristina Bárbara: Guarantor

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