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PROTOCOL FOR TREATMENT AND FOLLOW-UP OF PATIENTS WITH
DIFFERENTIATED THYROID CARCINOMA (DTC)

Abstract: The Protocol for the treatment and follow-up of DTC patients is presented in this paper. The Protocol includes: thyroid nodule diagnostics, importance of the initial surgical treatment, pTNM staging as a prognostic factor, 131-I therapy (characteristics of radioactive iodine, principle of 131-I activity, indications for the therapy, importance of the diagnostic whole body scan (DrWBS), thyroglobulin (Tg), TSH, anti-Tg –ab, KKS, estimation of therapeutical dose of 131-I, types of therapy, adverse effects of the therapy, contraindications of the therapy, patient preparation for the therapy and importance of post-therapeutic whole body scan), L-Thyroxine therapy, follow-up of patients and their 20-year disease-specific survival. **Conclusion:** Total or near-total thyroidectomy is followed by 131-I radioiodine therapy in DTC patients. Analyzing the outcome of the disease, in most cases complete remission (CR) is achieved. In patients with local and/or distant metastases iodine-avid metastases are cured partially or completely. The Protocol for the follow-up of patients evaluates outcome of disease such as: CR, partial remission (PR) and progressive disease (PD).

Key words: Differentiated thyroid carcinoma (DTC), 131-I, treatment, follow-up.

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