

LYMPHOMA IN THE THYROID GLAND

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Summary: Although malignant tumours of the thyroid gland are the most frequent malignant tumours of the endocrine system, they make only about 1% of all malignant tumours. About 5% of malignant tumours of the thyroid gland are malignant lymphoma, most of them often being Non Hodgkin lymphoma which in about 30% of cases have extra nodal localisation. One of the most often localisation is the one in the thyroid gland. The malignant lymphoma appears usually at the age of after 50, more common in women, which is usually related to the frequency of chronic lymphocyte thyroiditis in female population. Clinical symptoms are goitre, enlargement of goitre in a short period of time, with compressive symptoms like dyspnea, dysphagia, dysphonia, etc. To diagnosis the disease, standard diagnostic procedures are used (US, FNA, scintigraphy, scintigraphy with ^{67}Ga), while CT and PET are used in evaluation of the disease stage.

In a large number of cases, especially in those appearing together with chronic thyroiditis, the named diagnostic procedures can be insufficient for making a diagnosis, so immunophenotypisation of the material from FNA or by biopsy is inevitably in making a diagnosis. The therapy depends on the stage of the disease so the total thyroidectomy is recommended only in the first stage, i.e. when the disease is localised only to the interior of the thyroid gland. In all other cases, polychemotherapy combined with radiotherapy is recommended, while recently monoclonic anti CD 20 anti lymphocyte antibody therapy has been applied.

Key words: lymphoma, thyroid gland.