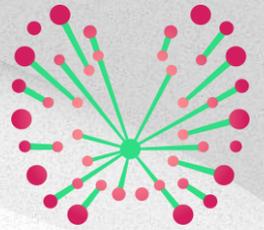




UNIVERSIDADE FEDERAL
DE SANTA CATARINA

Universidade Federal de Santa Catarina

Serviço de Endocrinologia e Metabologia



CASO CLÍNICO

Bruna da Silva Réus

R3 Endocrinologia e Metabologia HU-UFSC

Caso Clínico



Endocrinologia
e Metabologia
HU - UFSC

ID: M.Z, 30 anos, sexo feminino, gestante com 12 semanas

Encaminhada devido nódulo de tireoide visualizado em USG solicitada por médico da UBS em avaliação de rotina.

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Função tireoidiana normal

USG:

Nódulo sólido, hipoecoico, com microcalcificações, medindo cerca de 0.7 x 0.8 x 0.6cm, Chammas II.

Caso Clínico

Conduta???

Caso Clínico

PAAF:

Carcinoma papilífero. Bethesda VI.

**No momento, paciente com 22 semanas de
gestação**

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Conduta???

Caso Clínico

Anatomopatológico

-Microcarcinoma papilífero da tireoide variantes clássica e folicular, com as seguintes características:

1. Múltiplos focos tumorais disseminados por toda a glândula. Com os maiores focos: em LD, com 0.6 x 0.6 cm e em LE, com 0.3 x 0.3 cm.

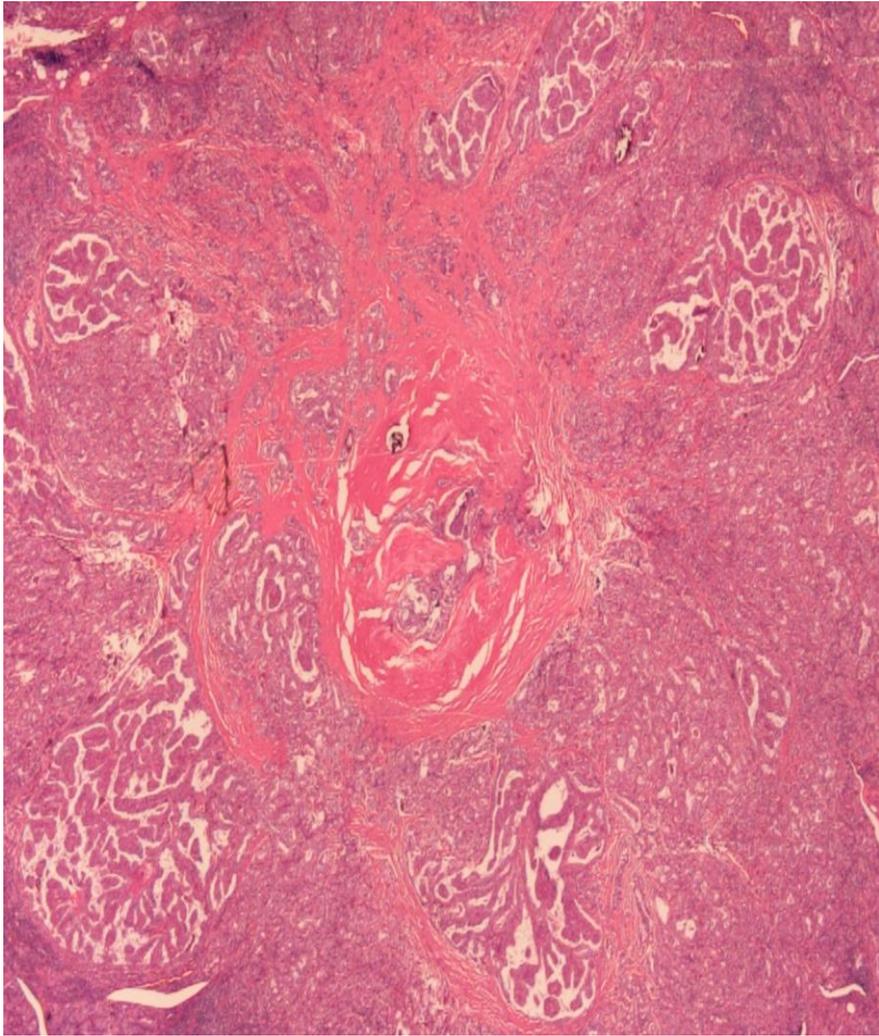
2. Margens cirúrgicas comprometidas (LD)

3. Não encapsulado

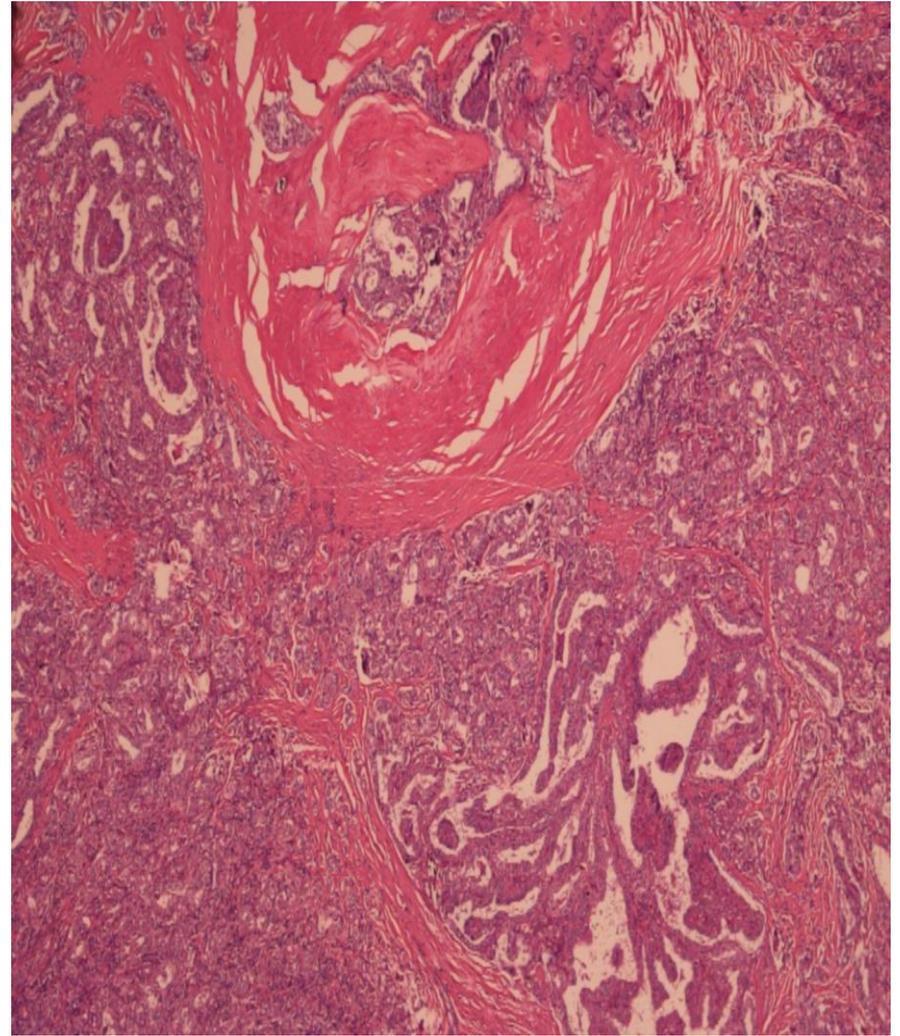
4. Invasão angiolinfática presente - 2 focos no total; sem invasão perineural

5. Extensão extratireoidiana presente mínima/microscópica no LD

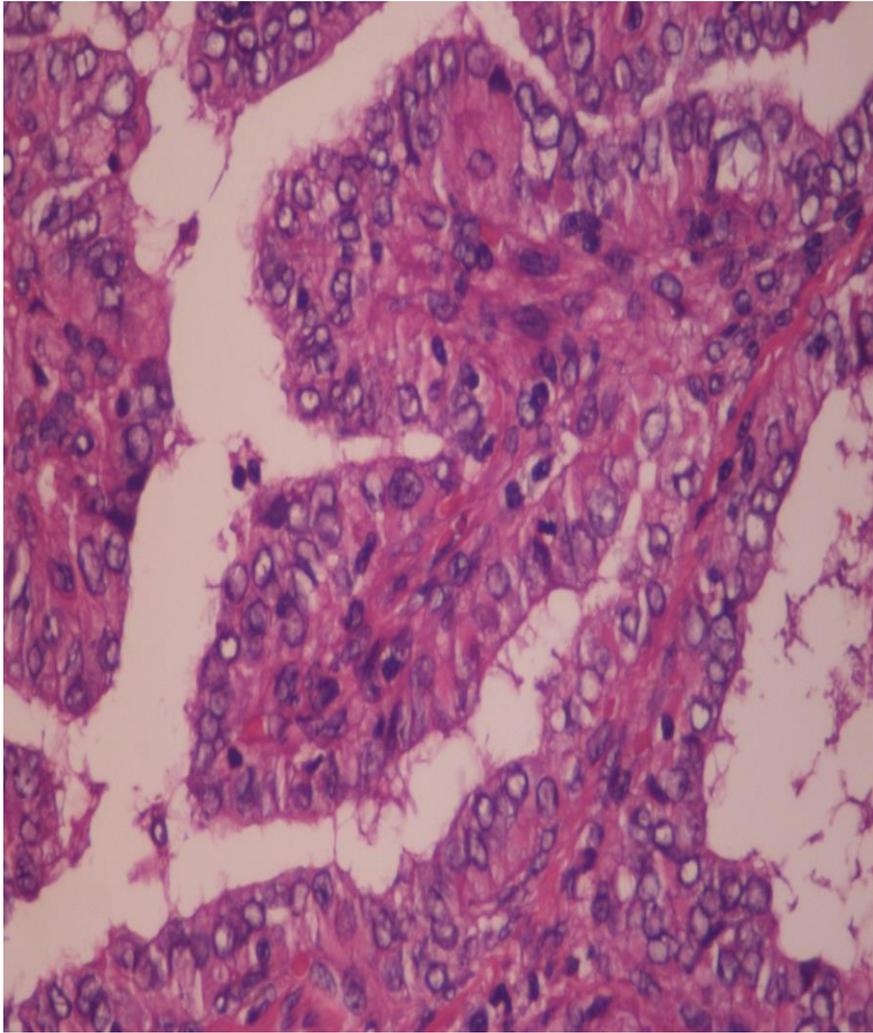
6. Presença da variante de células colunares nas variantes folicular e clássica



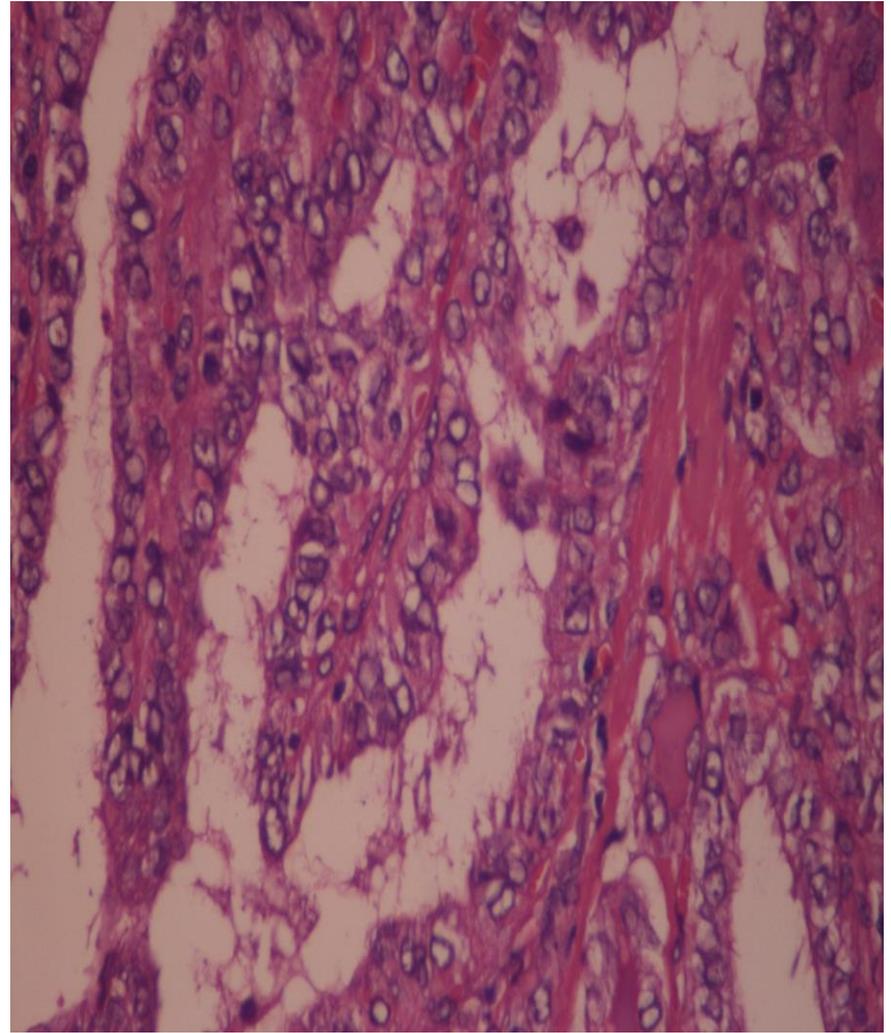
1 - Imagem do tumor maior, do LD



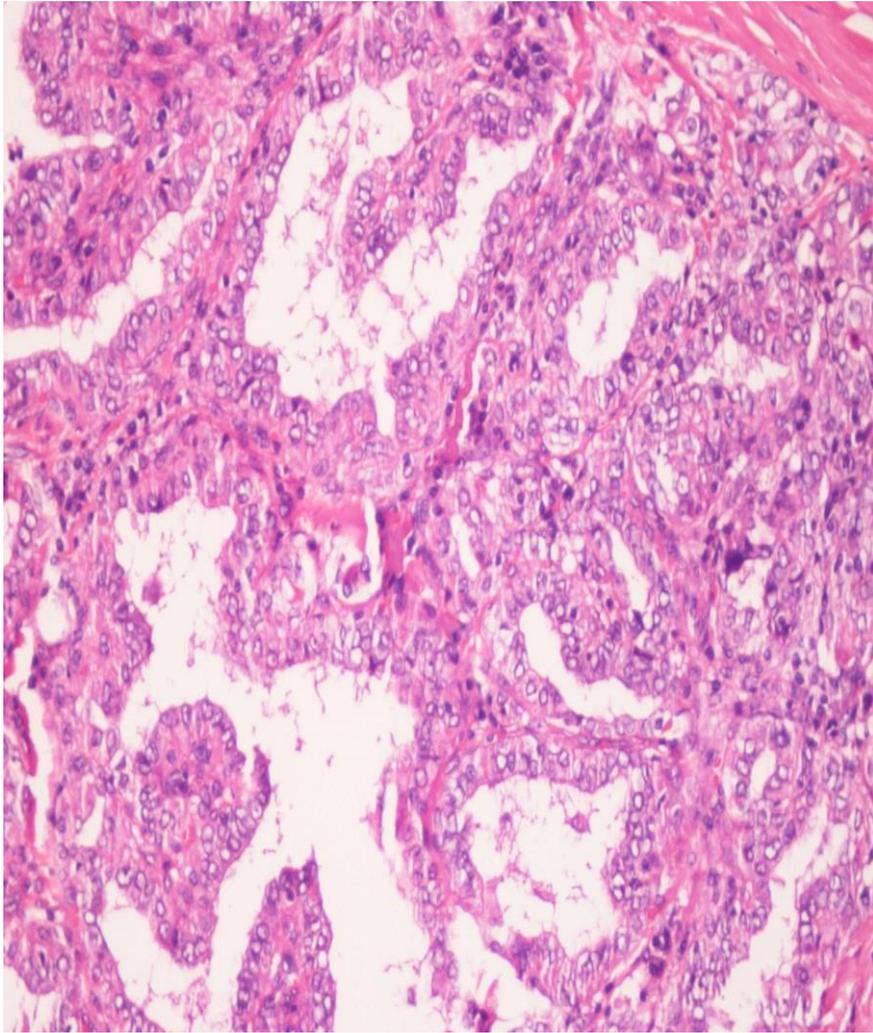
2 - Padrões folicular e papilífero clássico



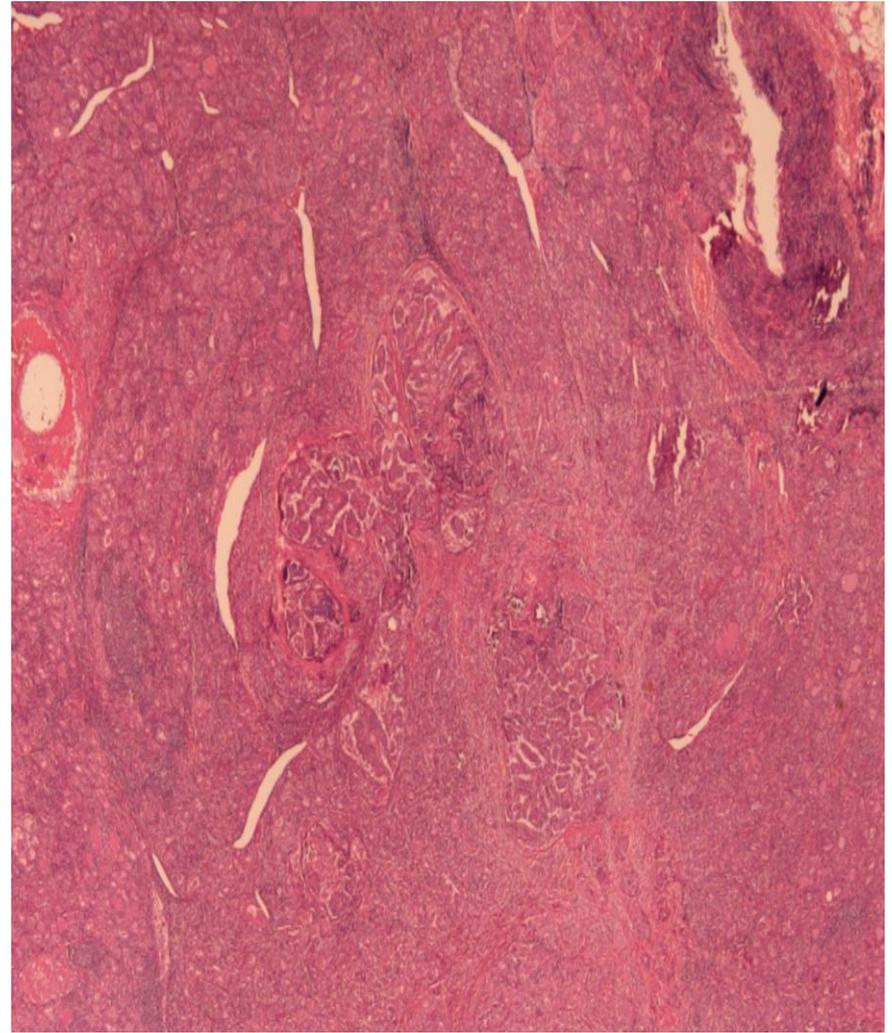
3 - Células colunares e detalhe dos núcleos clássicos do papilífero, núcleo aumentado



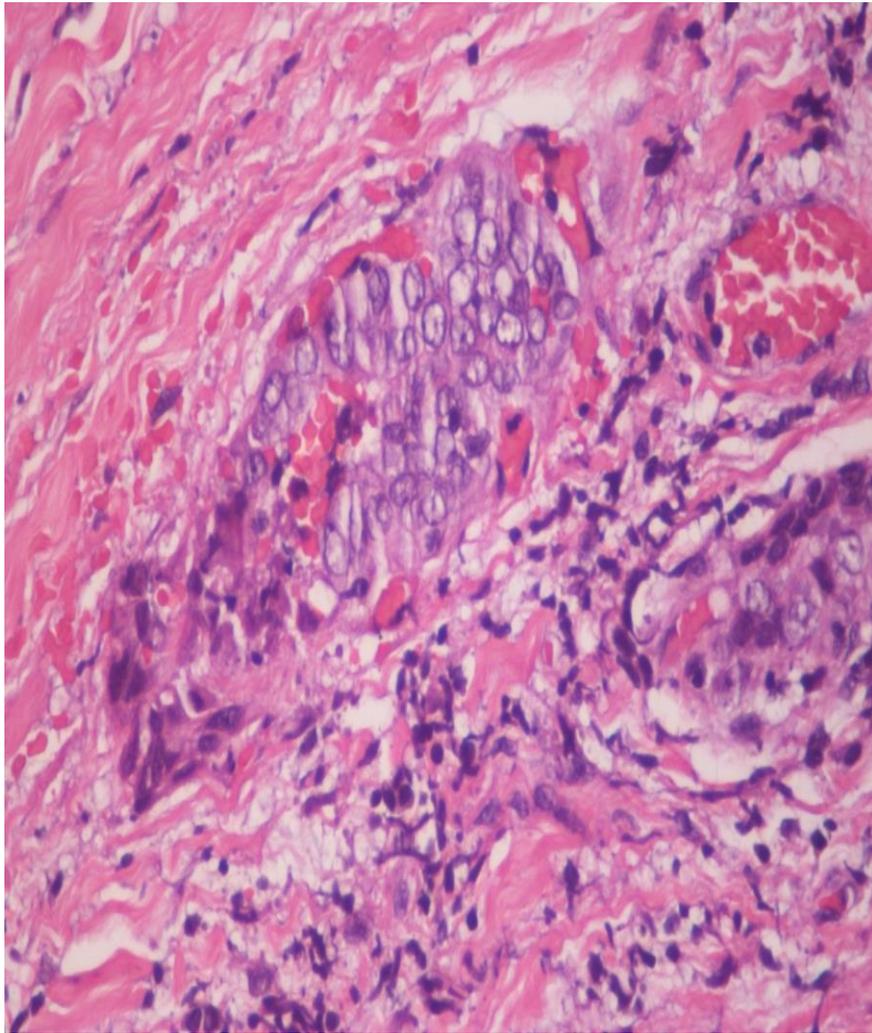
4. Arranjo papilífero típico



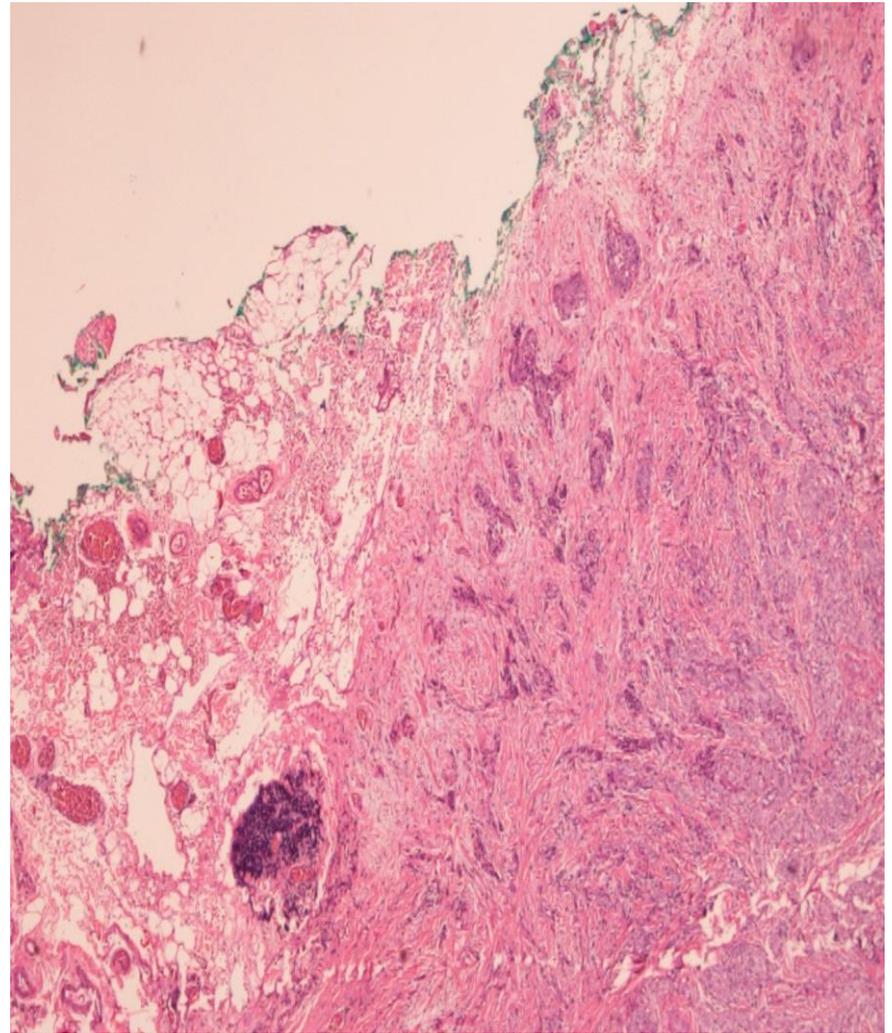
5 - Áreas papilíferas e foliculares



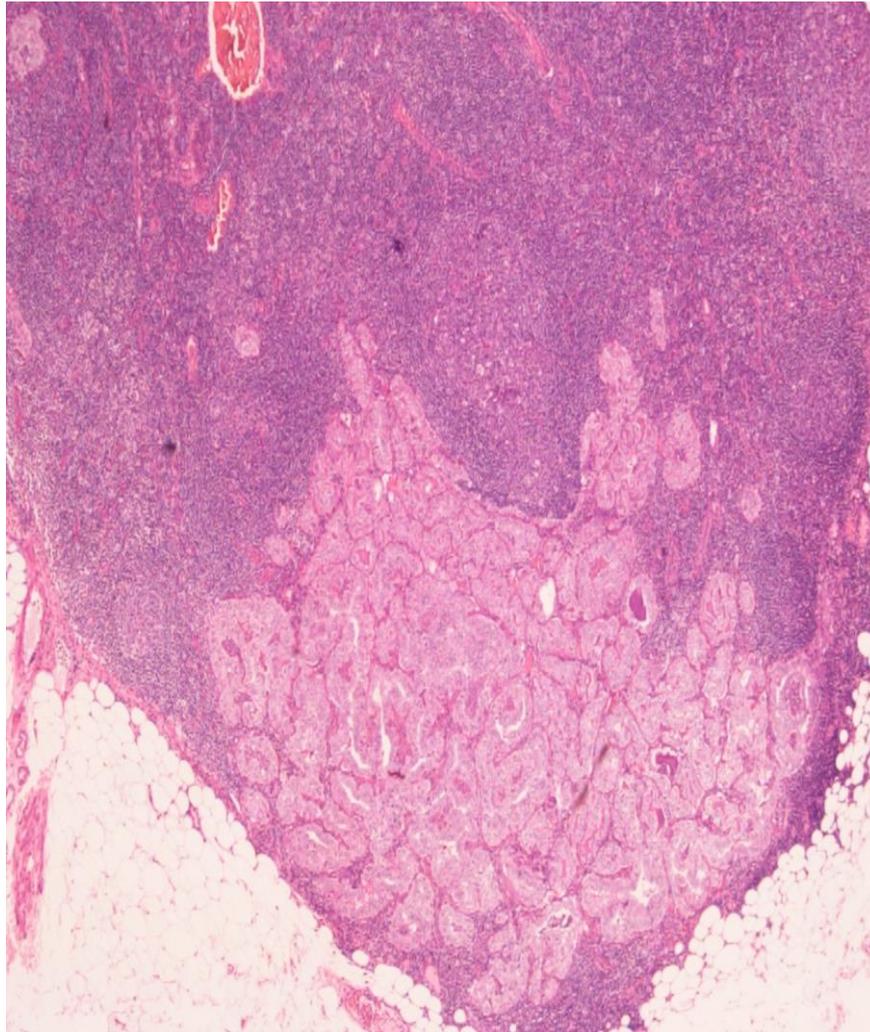
6 - Focos de microcarcinoma papilífero no parênquima circunjacente



7 - Extensão extratireoideana microscópica



8 - Embolo vascular sanguíneo/
invasão vascular



9 - Linfonodo com metástase de carcinoma papilífero

Tabela 5. Estratificação de risco de recorrência

Dados anatomopatológicos e informações pós-operatórias						
Risco	Tamanho do tumor e invasão extratireoidiana	Metástases linfonodais	Metástases distantes	Histologia	Ressecção tumoral ^b	Captação na PCI
Alto (qualquer um dos achados)	Invasão extratireoidiana extensa (pT4)	> 10 LN acometidos ou > 3 LN com EEC ou algum LN metastático > 3 cm	M1 ^a		Incompleta	A distância (M1)
Intermediário (qualquer um dos achados)	> 4 cm	4-10 LN acometidos ou 1-3 LN com EEC		Subtipo agressivo ou invasão vascular		Cervical ectópica (LN)
Intermediário (ambos achados)	≤ 4 cm com invasão extratireoidiana mínima (pT3)	1-3 LN sem EEC				
	2-4 cm sem invasão extratireoidiana (pT2)	1-3 LN sem EEC				
	2-4 cm com invasão extratireoidiana mínima (pT3)	cN0 ^c				
Baixo (todos achados)	≤ 4 cm sem invasão extratireoidiana	cN0 ^c				
	≤ 2 cm sem invasão extratireoidiana (pT1)	1-3 LN sem EEC	M0 ^a	Clássica, sem invasão vascular	Completa	Leito tireoidiano ^d
Muito baixo (todos achados)	≤ 2 cm com invasão extratireoidiana mínima (pT3)	cN0 ^c				
	≤ 1 cm sem invasão extratireoidiana (pT1a)					
	1-2 cm sem invasão extratireoidiana (pT1b), único	cN0 ^c	M0 ^a	Clássica, sem invasão vascular	Completa	

LN: linfonodos; EEC: extensão do tumor além da cápsula do LN; PCI: pesquisa de corpo inteiro.

^a Detectadas clínica ou radiologicamente ou na PCI.

^b Baseado na descrição do cirurgião e avaliação pós-operatória.

^c cN0: sem metástases na US pré- e avaliação peroperatória, com (pN0) ou sem (pNx) dissecação eletiva.

^d Somente se a ablação com ¹³¹I for indicada.

TABLE 11. ATA 2009 RISK STRATIFICATION SYSTEM WITH PROPOSED MODIFICATIONS

ATA low risk	<p>Papillary thyroid cancer (with all of the following):</p> <ul style="list-style-type: none"> • No local or distant metastases; • All macroscopic tumor has been resected • No tumor invasion of loco-regional tissues or structures • The tumor does not have aggressive histology (e.g., tall cell, hobnail variant, columnar cell carcinoma) • If ¹³¹I is given, there are no RAI-avid metastatic foci outside the thyroid bed on the first posttreatment whole-body RAI scan • No vascular invasion • Clinical N0 or ≤5 pathologic N1 micrometastases (<0.2 cm in largest dimension)^a <p>Intrathyroidal, encapsulated follicular variant of papillary thyroid cancer^a</p> <p>Intrathyroidal, well differentiated follicular thyroid cancer with capsular invasion and no or minimal (<4 foci) vascular invasion^a</p> <p>Intrathyroidal, papillary microcarcinoma, unifocal or multifocal, including <i>BRAF</i>^{V600E} mutated (if known)^a</p>
ATA intermediate risk	<p>Microscopic invasion of tumor into the perithyroidal soft tissues</p> <p>RAI-avid metastatic foci in the neck on the first posttreatment whole-body RAI scan</p> <p>Aggressive histology (e.g., tall cell, hobnail variant, columnar cell carcinoma)</p> <p>Papillary thyroid cancer with vascular invasion</p> <p>Clinical N1 or >5 pathologic N1 with all involved lymph nodes <3 cm in largest dimension^a</p> <p>Multifocal papillary microcarcinoma with ETE and <i>BRAF</i>^{V600E} mutated (if known)^a</p>
ATA high risk	<p>Macroscopic invasion of tumor into the perithyroidal soft tissues (gross ETE)</p> <p>Incomplete tumor resection</p> <p>Distant metastases</p> <p>Postoperative serum thyroglobulin suggestive of distant metastases</p> <p>Pathologic N1 with any metastatic lymph node ≥3 cm in largest dimension^a</p> <p>Follicular thyroid cancer with extensive vascular invasion (> 4 foci of vascular invasion)^a</p>

^aProposed modifications, not present in the original 2009 initial risk stratification system. See sections [B19]–[B23] and Recommendation 48B.

Avaliação da mortalidade: TNM 8ª edição

<i>T Category</i>	<i>T Criteria</i>
TX	Primary tumor cannot be assessed
T0	No evidence of primary tumor
T1	Tumor ≤ 2 cm in greatest dimension limited to the thyroid
T1a	Tumor ≤ 1 cm in greatest dimension limited to the thyroid
T1b	Tumor > 1 cm but ≤ 2 cm in greatest dimension, limited to the thyroid
T2	Tumor > 2 cm but ≤ 4 cm in greatest dimension limited to the thyroid
T3*	Tumor > 4 cm limited to the thyroid, or gross extrathyroidal extension invading only strap muscles
T3a*	Tumor > 4 cm limited to the thyroid
T3b*	Gross extrathyroidal extension invading only strap muscles (sternohyoid, sternothyroid, thyrohyoid, or omohyoid muscles) from a tumor of any size
T4	Includes gross extrathyroidal extension into major neck structures
T4a	Gross extrathyroidal extension invading subcutaneous soft tissues, larynx, trachea, esophagus, or recurrent laryngeal nerve from a tumor of any size
T4b	Gross extrathyroidal extension invading prevertebral fascia or encasing carotid artery or mediastinal vessels from a tumor of any size
<p><i>Note:</i> All categories may be subdivided: (s) solitary tumor and (m) multifocal tumor (the largest tumor determines the classification).</p>	

Definition of Regional Lymph Node (N)

<i>N Category</i>	<i>N Criteria</i>
NX	Regional lymph nodes cannot be assessed
N0	No evidence of regional lymph nodes metastasis
N0a*	One or more cytological or histologically confirmed benign lymph node
N0b*	No radiologic or clinical evidence of locoregional lymph node metastasis
N1*	Metastasis to regional nodes
N1a*	Metastasis to level VI or VII (pretracheal, paratracheal, or prelaryngeal/Delphian or upper mediastinal) lymph nodes. This can be unilateral or bilateral disease.
N1b*	Metastasis to unilateral, bilateral, or contralateral lateral neck lymph nodes (Levels I, II, III, IV, or V) or retropharyngeal lymph nodes

Definition of Distant Metastasis (M)

<i>M Category</i>	<i>M Criteria</i>
M0	No distant metastasis
M1	Distant metastasis

Differentiated thyroid cancer

<i>When age at diagnosis is...</i>	<i>And T is...</i>	<i>And N is...</i>	<i>And M is...</i>	<i>Then the stage group is...</i>
< 55 yrs	Any T	Any N	M0	I
	Any T	Any N	M1	II
≥ 55 yrs	T1	N0/NX	M0	I
	T1	N1	M0	II
	T2	N0/NX	M0	I
	T2	N1	M0	II
	T3a/T3b	Any N	M0	II
	T4a	Any N	M0	III
	T4b	Any N	M0	IVA
	Any T	Any N	M1	IVB

Differentiated thyroid cancer

<i>When age at diagnosis is...</i>	<i>And T is...</i>	<i>And N is...</i>	<i>And M is...</i>	<i>Then the stage group is...</i>
< 55 yrs	Any T	Any N	M0	I
	Any T	Any N	M1	II
≥ 55 yrs	T1	N0/NX	M0	I
	T1	N1	M0	II
	T2	N0/NX	M0	I
	T2	N1	M0	II
	T3a/T3b	Any N	M0	II
	T4a	Any N	M0	III
	T4b	Any N	M0	IVA
	Any T	Any N	M1	IVB

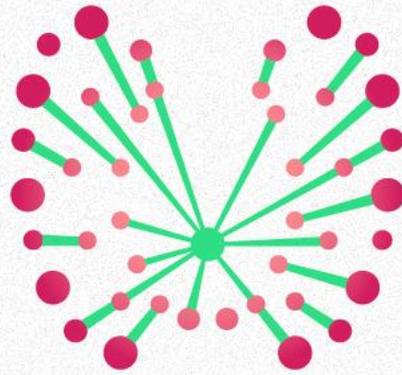
TNM: estágio 1

Caso Clínico

Conduta???



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