A very rare case, Coexistence of invasive thyroid papillary carcinoma and parathyroid carcinoma in hypercalcemic 29 years old woman teated for urolithiasis

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Abstract

Introduction and purpose

Primer hyperparathyroidism is the most common cause of hypercalcemia in patients referred to policlinics. In Primer hyperparathyroidism, parathyroid hormone (PTH) is excessively secreted. The most common causes are adenomas, hyperplasia while carcinomas is the rare cause of primer hyperparathyroidism. Although thyroid cancer is the most common endocrin malignancy, coexistence of parathyroid carcinoma and thyroid carcinoma is very rare. Thyroid Cancer (CA) was observed approximately by 1% in all cancers. It has been increasing most common type and consisting about 80% of the thyroid cancers. Coexistence of nonmeduller thyroid CA and primer hyperparathyroidism is very rare situation.

Case report

A 29 year old woman, has been treating for urolithiazis for four years. She had 2 months history of appetite and weight loss, fatigue, easily tiring that affected her daily performance, based on 5 days history of nausea and vomiting records. Her Ca content was measured as 14.50 mg/dl. Parathyroid Hormone (PTH) level was found as 851.5 pg/ml (11,1-79,5 pg/ml). Thyroid usg and Tc-99m MIBI parathyroid scintigraphia was performed. In right lobe anterior segment 16x10mm, properly limited, including internal punctuate calcifications, hypo echoic and hyper vascular nodule was observed. Also there exists a 21x28 mm lobulated, containing internal echogenic septation solid nodules starting from central part of the right lobe ongoing up to posterior. In both lobes colloidal cystic nodules were observed in mill metric scale. She was referred to a tertiary center for the operation. Pathology results were reported as papillary thyroid Carcinoma (ca) and parathyroid carcinoma. Tumor was infiltrated to surrounding muscles tissue and to the front wall of esophagus.

Conclusion

In this article, coexistence of thyroid papillary CA and parathyroid carcinoma in hypercalcemic 29 year old woman treated for urolithiasis is presented. In patients who admitted to policlinics without a specific complaints, weakness, fatigue, nausea analysing serum electrolytes has vital importance in early diagnosis. Ca must be added to these parameters. In such patients Coexistence of parathyroid carcinoma and thyroid malignancies should be kept in mind.

Keywords: Hypercalcemia; Parathyroid carcinoma; Thyroid papillary carcinoma

Recent Publications

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Photograph



Biography

Dr Dilara Demir has big experience in internal medicine, since 2003 improving the health care in eastern Anatolia. She has been in dense effort by research and teaching, both in Hospital and Universities. Ten years in Erzurum Univ. Eastern Anatolia and eight years in Amasya University, Central North Anatolia. She well kown as altruist doctor med, and has been actively working in Health- Environment- Food-natural resources platform in the Region of northern East and central North Turkey.

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Notes/Comments: