

Evaluation and Management of Solitary Thyroid Nodules

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Abstract

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Background: Solitary thyroid nodules are commonly found by otorhinolaryngologists in their practice. The prevalence tends to increase in the 3rd and 4th decades of life. The clinical presentations may be varied. The diagnosis and optimum management are still a matter of debate. The current study tried to evaluate and manage solitary thyroid nodules in the cases presenting to our tertiary care Hospital. **Methods:** This prospective study was done in the Department of ENT, Prathima Institute of Medical Science, Naganoor, Karimnagar. All the selected candidates underwent thorough history taking and a clinical examination was performed. Fine needle aspiration cytology (FNAC) was performed on all the cases. Biochemical investigations included thyroid profile, FBS, PPBS, serum creatinine, urea, and Liver function tests. ECG and Screening chest were done routinely in all cases. **Results:** Out of n=60 cases, n=12(20%) were males and the n=48(80%) were females. In the current study. We found benign lesions in n=48(80%) cases out of which follicular adenoma was found in n=42(70%) cases and types of follicular adenoma. Papillary adenoma in n=6(10%) cases. Malignant lesions were found in n=12(20%) cases out of which n=10(16.67%) were papillary carcinoma and medullary carcinoma was found in n=2(3.33%) cases. **Conclusion:** In this study of solitary thyroid nodules, we found benign lesions emerged as the single largest group with nodular goiter having the highest incidence of nearly 46.66%. This was followed by follicular adenomas which constituted 83.33%. Malignancy in 6.67% of cases of which papillary carcinoma was common. Total thyroidectomy was done for Ten cases, total thyroidectomy with lymph node excision for two cases, and Forty-eight hemithyroidectomies. There was no mortality in any of the cases.