

A 77-year male presented to the Neurosurgery Outpatient Clinic with complaints and [examination findings of spinal cord compression](#) (SCC) by a mass at the 11th [thoracic vertebra](#) (T11). [Subtotal resection](#), thoracic [corpectomy](#) with [cage reconstruction](#), [laminectomy](#), and posterior [spinal stabilization](#) were performed. The patient, whose pathology result suggested follicular carcinoma metastases, underwent total thyroidectomy two months after spinal surgery. The pathology of the thyroid was compatible with FV-PTC. Even four years after the total [thyroidectomy](#), the neurological status of the patient was still stable and neither tumoral recurrence nor a new metastases was detected. In the literature, the number of cases with FV-PTC presenting with SCC due to spinal metastases is limited ¹⁾.

¹⁾

Ozger O, Kaplan N. Follicular Variant of Papillary Thyroid Carcinoma Presenting with Thoracic [Vertebral metastases](#): A Rare Phenomenon. J Coll Physicians Surg Pak. 2022 Mar;32(3):395-397. doi: 10.29271/jcpsp.2022.03.395. PMID: 35148600.

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