

# Anaplastic Thyroid Carcinoma: Spot Diagnosis

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## ABSTRACT

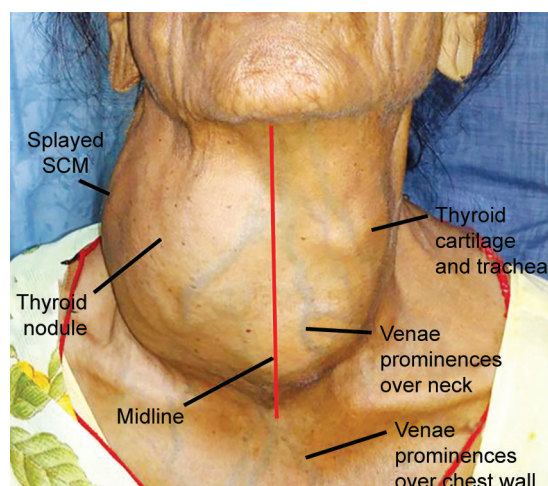
Though anaplastic thyroid carcinoma is a rare entity, it is very lethal. It is a surgical semi-emergency because it is rapidly progressive and once it breaches the thyroid capsule, it becomes inoperable. Therefore, every clinician should have a very low index of suspicion.

**Keywords:** Anaplastic thyroid carcinoma, Endocrine cancer, Thyroid cancer.

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Anaplastic thyroid carcinoma (ATC) is a rare disease with very high mortality in contrast to the differentiated thyroid carcinomas that are more common and least aggressive among all thyroid cancers.<sup>1,2</sup> Timely diagnosis and treatment is the key to save these patients but unfortunately till the diagnosis is made most of them are inoperable.<sup>2-4</sup>

We are presenting a clinical photograph (Fig. 1) of a 65-year-old lady who presented to us with history of slowly growing anterior neck swelling for past 20 years with rapid increase in size for 30 days along with difficulty in swallowing and breathing, loss of weight and appetite. On examination, we found that she was cachexic, having difficulty in breathing with hoarse voice. There was a hard-fixed, nontender, bosselated thyroid mass originating from right lobe, pushing the larynx and trachea to the left. There were dilated veins over mass and chest wall as well. The right sternocleidomastoid was splayed over mass. The over-lying skin was free with normal and pushed left lobe. The lower extent of the mass was going inside the thoracic inlet. We made a clinical diagnosis of undifferentiated or poorly differentiated thyroid carcinoma and advised a prompt fine needle aspiration cytology (FNAC) and contrast enhanced CT scan of neck and upper mediastinum. Unfortunately, she did not turn up for CT scan after



**Fig. 1:** Labeled clinical photograph of an elderly cachexic lady with rapidly growing, hard and fixed thyroid mass

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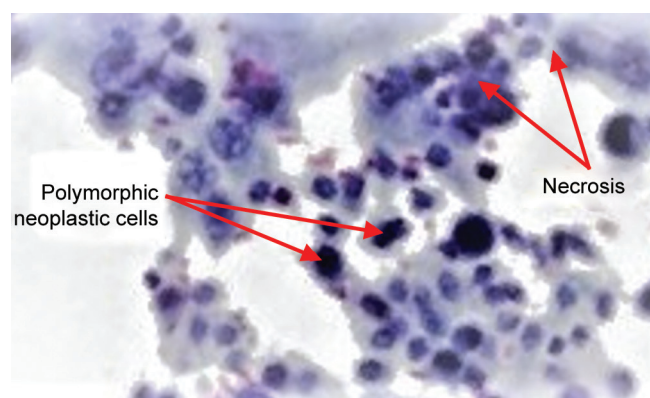
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**Fig. 2:** FNAC smears showing polymorphic neoplastic cells with a necrotic background (Papanicolaou stain)

undergoing cytology on the next day. The FNAC was suggestive of anaplastic thyroid carcinoma (Fig. 2).

The causes of death in cases of ATC are usually respiratory failure (massive pulmonary metastasis), airway obstruction, bleeding, and circulatory failure.<sup>5</sup>

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