

Thyroid Malignancy and Grave's Disease

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Indian Journal of Endocrine Surgery and Research (2024): 10.5005/jp-journals-10088-11234

Dear Editor,

We read with interest the article "Association of thyroid malignancy and Grave's disease: A South India Tertiary Care Center perspective" by Sahithi Priya, et al.¹ We congratulate the authors on addressing this issue of malignancy in Grave's disease and for their successful surgical management. The definitive management of Grave's disease includes radio-active iodine ablation or surgical management and in this robotic era, the surgical management may be open total thyroidectomy, endoscopic total thyroidectomy, and robotic total thyroidectomy with the knife happy surgeon preserving the parathyroid and Recurrent Laryngeal Nerves. We agree with the authors regarding their observation of ultrasonography not picking up sub-Cen trimetric foci of malignancy in Grave's disease before surgery and also increased incidence of malignancy in Grave's disease.²

We have a few queries which may interest future readers. Did the authors subject these patients to contrast-enhanced computed tomography? Did the authors routinely do thyroid scintigraphy (Tc99-m)? Did they use Lugol's iodine for preoperative preparation?³ Did they find Central compartment nodes in the malignancy group and did they do CCLND? What was the rate of hypocalcemia in both groups?

Thank you for your comments on these issues.

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How to cite this article: Sah RK, Mayilvaganan S. Thyroid Malignancy and Grave's Disease. *Indian J Endoc Surg Res* 2024;19(1):1.

Source of support: Nil

Conflict of interest: None

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