N. Ireland Audit of Thyroid Cancers 2001/2 and 2004/5

See full Report:  http://www.qub.ac.uk/research-centres/nicr

Dr Anna Gavin
Director, N. Ireland Cancer Registry
a.gavin@qub.ac.uk
Methods – Retrospective Note Review

- Data items etc. agreed with endocrinologists
- Cases identified by Cancer Registry
- Data from hospital records entered to electronic proforma by trained Registry staff, analysis in Registry
166 Patients – New diagnosis
74% female
Average age – 50 females
– 57 males
⅔ had goitre/neck swelling
¼ of these less than 1 month
⅓ over one year

50% from GP referral – 6% of these emergencies

36% in 2001/2 and 55% 2004/5 were seen at Regional Unit
• 77% of all patients had FNA Thyroid

• 97% 2001/2, 100% 2004/5 had histology / cytology

• 60% – Papillary, 20% follicular, 8% apaplastic, 3% medullary
STAGING  Poor – 7% in notes

• 58% 2001/2 and 78% 2004 /5

Possible by Registry staff from data in records

• 12% had metastasis, 55% of these in lung
131 ablation: 66% in 2001/2,
89% 2004/5 of patients with differentiated cancer types and size greater than 1 cm
MDTs: – no evidence of MDTs

47% referral to endocrine surgeon

15% referral to endocrinologist

50% referral to oncologists

TSH records last reviews – 85% differentiated cancers
72 Primary Procedures in 11 hospitals

- Lobectomy alone
  - 2001/2 – 35%,
  - 2004/5 – 87%

- Completion thyroidectomy
  - 2001/2 – 26%
  - 2004/5 – 87%
Communication

- 90% letters to GPs had management plan included
- 5–7% written information given to patient
- Patient discussion re prognosis and treatment 90%, 2001/2; 99%, 2004/5
- 34% discussion with families
72 Thyroid cancer operations
– 16 surgeons 2001/2

71 Thyroid cancer operations
– 14 surgeons 2004/5
Recurrence

2001/2 – 6% patients with 3.9 years

2004/5 – 4% patients within 1.7 years follow-up
Survival related to cell type
2 year observed survival
90% follicular
100% medullary
97% papillary
14% anaplastic