



Newest Surgery Available for Thyroid Disorders and Cancers Provides More Options for Patients

*—Thyroid Cancer Three Times More Prevalent Among Women—
—September Is Thyroid Cancer Awareness Month—*

MORRISTOWN, N.J. (September 12, 2008) – The American Cancer Society estimates that 37,340 new cases of thyroid cancer will be diagnosed in the United States this year.¹ Although it is currently one of the least common cancers, thyroid cancer is one of the fastest growing cancers in America, increasing in incidence each year. Fortunately for those diagnosed, it is also one of the most curable forms of cancer when detected early, says Dr. Michael Most, a head and neck surgeon with Allied Surgical Group in Morristown.

Dr. Most is among the first in the area to be trained in endoscopic thyroid surgery, a minimally invasive procedure that was developed to reduce the pain and the neck scarring that can be associated with conventional surgery. Allied Surgical Group in Morristown offers both endoscopic thyroid surgery and conventional thyroid surgery for those requiring treatment for cancer or other thyroid conditions.

About the Thyroid

The thyroid is a butterfly-shaped gland in the neck that produces hormones that regulate heart rate, blood pressure, body temperature and metabolism. A properly functioning thyroid is essential to overall good health. Conditions impacting the gland include hypothyroidism, which is a lack of thyroid hormones, and hyperthyroidism or Graves' disease, which is an overproduction of thyroid hormones.

Symptoms of hypothyroidism can include fatigue, exhaustion, depression, difficulty concentrating, weight gain, feeling cold (especially in the extremities), constipation, muscle cramps, joint pain, increased menstrual flow and more frequent periods. Symptoms of hyperthyroidism can appear gradually and may not be noticeable at first. People with hyperthyroidism can feel hot when others do not, lose or gain weight, experience trembling hands or an irregular heartbeat, and may have trouble sleeping even though they are fatigued.

Thyroid Cancer Signs and Symptoms

“Thyroid cancer often starts without symptoms, but once a thyroid tumor grows there may be warning signs,” says Dr. William Diehl, a head and neck surgeon with Allied Surgical Group and a past president of the American Cancer Society’s Morris County unit.

Symptoms of thyroid cancer can include a combination of fatigue, trouble swallowing or breathing, a lump or swollen lymph nodes in the neck, hoarseness, and recurring neck or throat pain. A simple at-home self-check of the neck can be the first step in identifying a growth or tumor. Look in the mirror at your neck below the Adam's apple and above the collarbone. Tip your head back and swallow a drink of water a few times. Look for any bulges or anything that looks unusual in this area.

If you suspect a problem, see your doctor immediately. Many physicians and dentists examine patients' necks during routine exams. If yours don't, it is something that you should request.

Risk Factors and Diagnosis

Women are three times more likely than men to develop thyroid cancer. According to the American Cancer Society, that translates to roughly 28,410 new cases that will be found in women this year as opposed to 8,930 new cases identified in men.²

The National Cancer Institute cites risk factors for thyroid cancer including gender (more common in women), age (typically between 20 and 60), a personal or family history of goiters (swollen thyroid), a family history of thyroid cancer, repeated exposure to X-rays or neck radiation treatments in childhood, or exposure to radioactive fallout from nuclear accidents or atomic weapons testing.³

A biopsy is the only definitive way to diagnose thyroid cancer. In fine needle aspiration – the most common biopsy method – a physician removes a tissue sample from a thyroid nodule with a thin needle. The alternative is surgical removal of the entire nodule. Additional diagnostic tools include blood tests, ultrasound and thyroid scans using radioactive dye.

“The survival rate of well-differentiated thyroid cancers, which comprise the majority of thyroid cancers, is approximately 97 percent after five years,” says Dr. Diehl. “The chance of full recovery is especially good when the disease is detected early,” he adds.

Your doctor will likely recommend one or more treatment options for thyroid cancer based on the stage of the cancer and your general health. Options include surgery, radioactive iodine treatment, thyroid hormone therapy, external beam radiation therapy and chemotherapy.

Types of Surgery Used to Treat Thyroid Cancer

Surgery is used to treat thyroid cancer, hyperthyroidism and thyroid nodules (growths) by removing all or part of the thyroid. There are two types of surgery currently available:

- Conventional thyroid surgery is typically recommended when the patient has a large thyroid nodule or proven malignancy. The surgery involves a neck incision of 2 to 4 inches and recovery time is generally several weeks.

- Endoscopic thyroid surgery is a new, minimally invasive procedure available to patients with small thyroid nodules. The surgery minimizes pain and shortens recovery time, while also reducing the size of neck scars; an endoscopic scar may be 1.5 to 2 centimeters compared to a conventional surgical scar of 4 to 5 centimeters. Surgeons access the thyroid directly through a small incision in the neck, and use laparoscopic equipment (a tube with a camera-like device) for imaging and thyroid removal.

Early detection is the first line of defense for thyroid treatment, and patients should ask for a neck check at each annual exam. Treatment and lifelong monitoring by a physician are the keys to thyroid cancer success rates.

About the Doctors

Dr. William L. Diehl, M.D., F.A.C.S.

Dr. Diehl is a board-certified cancer specialist and general surgeon specializing in head, neck and breast surgery with Allied Surgical Group in Morristown, N.J. He is also an attending surgeon at Morristown Memorial Hospital, where he is head of the Multidisciplinary Breast Cancer Panel. Dr. Diehl is actively involved in surgical research and teaching. He is a past president of the Morris County Medical Society and of the Morris Unit of the American Cancer Society. New Jersey Monthly magazine named Dr. Diehl one of the top doctors in the state in its annual survey of physicians.

Michael David Most, M.D.

Dr. Most is a board-certified general surgeon specializing in surgery of the head and neck at Allied Surgical Group in Morristown, N.J. He is an attending surgeon at Morristown Memorial Hospital and also holds privileges at Maimonides Medical Center in Brooklyn. He is fully qualified in advanced surgical techniques, including noninvasive laparoscopic and sentinel-node cancer treatment. Dr. Most has completed special training in head and neck surgical oncology; benign head and neck disease; salivary, thyroid and parathyroid disease; and microvascular reconstruction.

About Allied Surgical Group

Allied Surgical Group is made up of eight board-certified surgeons, experienced in a wide range of surgical procedures. Areas of expertise include oncology; vascular, advanced laparoscopic and obesity surgery; and minimally invasive surgery. Together the doctors care for patients throughout the tri-state region with compassion and integrity. Allied Surgical is located at 261 James Street, Suite 2G, Morristown, N.J. For more information, call (973) 267-6400 or visit www.alliedsurgical.org.

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¹www.cancer.org/docroot/CRI/content/CRI_2_4_1X_What_are_the_key_statistics_for_thyroid_cancer_43.asp?sitearea=

²www.cancer.org/docroot/CRI/content/CRI_2_4_1X_What_are_the_key_statistics_for_thyroid_cancer_43.asp?sitearea=

³<http://www.cancer.gov/cancertopics/wyntk/thyroid>

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