

65. THE CLINICAL AND MORPHOLOGICAL PECULIARITIES OF FOLLICULAR THYROID CARCINOMA

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Introduction. Follicular thyroid cancer is manifest as a solitary nodule, incapsulate, round shape. In section the tumors have solid structures, whitish with small area of necrosis. During 28 years was undergo for surgery about 1394 of patients: 651 of patients (46,7%) with resection thyroid gland; subtotal resection 382 (27,4%); maximal subtotal resection 251 (18%); thyroidectomy 89 (6,4%); mini invasive 21 (1,5%).

Aim of study. To determine the clinic and morphological peculiarities of follicular thyroid carcinoma.

Methods and materials. In the period of 1990-2018 in the department "Tumors of head and neck surgery" of the Oncologic Institute of Moldova was submissive for treatment 4062 of patients with diagnosis of thyroid cancer confirmed morphological. The following structures were found: 56,1% follicular carcinoma, 32,8% papillary carcinoma, 7,6% medullary carcinoma, 3,5% undifferentiated. Thus, follicular adenocarcinoma was found in 1394 of patients, 86,8 for woman and 13,2% for man.

Results. The study group consists of 1394 of patients with follicular carcinoma having variants: 1. Oncocitar carcinoma(of Hurthle cells). 2. Thyroid cancer non-invasive. 3. Follicular carcinoma with capsule spreading of thyroid gland and adjacent tissues (21,6%).

Conclusion. In the clinic of "Tumors of head and neck surgery" in period of 1990-2018 was treated 4062 of patients, 1394 with follicular carcinoma (56,1%) represented as a solitary nodule. The base of histological variants of follicular cancer was the following: oncocytic carcinoma (of Hurthle cells), non invasive, and capsula spreading of thyroid gland. Survival to 10 years 95-98%. On the basis of obtaining results of follicular carcinoma oncocytic variant, we recomanded organomaneged surgery.