

15 Metastatic follicular carcinoma of thyroid**Micro**

- These are fibro-collagenous fragments extensively infiltrated by malignant neoplasm.
- The cells are arranged in follicular pattern with colloid secretion.
- Nuclear (grooving and Orphan Annie clearing) features of papillary thyroid carcinoma are not seen.
- The background stroma shows marked haemorrhage and hemosiderin.
- No covering epidermis seen.
- The features are those of metastatic carcinoma and consistent with follicular carcinoma of thyroid.

Diagnosis

- Metastatic follicular carcinoma of thyroid

Further work/comment

- Confirmatory immuno- stains include TTF1 and thyroglobulin.
- The points that would be discussed in the head and neck/ endocrine MDT:
 - Histological or radiological evidence of previous or current thyroid lesion, which is typically solitary, cold nodule.
 - Type of the primary: Extensive angio-invasive and widely invasive follicular carcinomas have higher risk for metastasis.
 - Extension metastasis and staging of the disease.
 - Iodine isotope scan can determine location(s) of metastatic disease/foci