A Clinical Study of Etiology and Management of Multinodular Goiter

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Abstract

The study was done to evaluate the clinical presentation, surgical management and its outcomes on the patients with multinodular goiter. Methods: This prospective study was conducted in the Department of General Surgery Prathima Institute of medical sciences, Karimnagar. A total of n=100 patients were studied during the study period out of which n=86 were females and n=14 were males. All patients who were clinically diagnosed as MNG were selected. A detailed investigation including CBP, urine analysis, FBS, liver functions serum cholesterol, an x-ray of the neck-AP and lateral views and chest X-ray and ENT examination. All patients were investigated for Thyroid profile and some patients for Thyroid Isotope scan before surgery and submitted for FNAC of the thyroid swelling. All patients underwent standard surgical procedures and all the excised thyroid specimen were sent for Histopathological examination. Results: Age group most commonly affected: 21 – 40 years, 60 cases (60 %) Next Age group affected: 41 – 50 years, 22 cases (22%) Total Male patients 14 (14 %) Total Female patients: 86 (86 %) Ratio of female to Male patients: 6:1. Colloidal goiter was diagnosed in 78% of the patients and Hashimoto's thyroiditis, follicular adenoma was in 6% respectively. Papillary carcinoma was in 6% and medullary carcinoma along with papillary carcinoma was in 4% of the patients. Conclusions: Multinodular goiter is common in females and the main indications of surgery in MNG are a cosmetic problem, pressure effect symptoms, secondary thyrotoxicosis and suspicion of malignancy. Subtotal thyroidectomy is the surgery of choice for MNG.