



**LASER PHOTOCOAGULATION OF BENIGN THYROID NODULES IS NOT FIRST-LINE THERAPY IN MOST PATIENTS**

Døssing H, et. al.

**CONCLUSIONS**

Ultrasound-guided ILP results in good reduction in pressure symptoms in 84% of patients and reduction of cosmetic symptoms in 72% with a benign solitary solid, cold thyroid nodule. The median reduction in

nodule volume was 51% and was best in nodules <10 ml in size. Thyroid function remained normal, and no complications occurred as a result of the treatment other than moderate pain for up to 4 days.

**COMMENTARY ●●●●●●●●●●●●●●●●●●●●●●●●●●●●●●●●**

Ultrasound-guided ILP results in apparently good reduction in pressure symptoms and volume of benign solitary solid, cold thyroid nodules. The reduction in size was not predictable, and ultimately 36% of patients required thyroidectomy despite having undergone ILP because of an unsatisfactory response. The median reduction in nodule volume was 51%, but the median treatment time was 15 minutes and could last up to 40 minutes with local anesthesia without sedation. This is a very long time for the clinician and for the patient in a busy clinic.

This therapy seems somewhat unpredictable, as the volume reduction was not associated with the time of therapy, the joules delivered, or the size of the nodule. Finally, the therapy worked best for smaller nodules that medically are not usually necessary to remove. The specialized, expensive laser equipment, time to treat, and use of an 18-gauge needle will limit this treatment to specialized centers. It might be considered in patients who are medically unstable for surgery or who refuse surgery.

— **Stephanie L. Lee, MD, PhD**

**References**

- 1. Layfield LJ, Cibas ES, Gharib H, Mandel SJ. Thyroid aspiration cytology: current status. *CA Cancer J Clin* 2009;59:99-110.
- 2. Yassa L, Cibas ES, Benson CB, Frates MC, Doubilet PM, Gawande AA, Moore FD Jr, Kim BW, Nosé V, Marqusee E, et al. Long-term assessment of

- a multidisciplinary approach to thyroid nodule diagnostic evaluation. *Cancer* 2007;111:508-16.
- 3. Bahn RS, Castro MR. Approach to the patient with nontoxic multinodular goiter. *J Clin Endocrinol Metab* 2011;96:1202-12.