
Preface

Thyroid cancer is the most common endocrine neoplasm, excluding ovarian neoplasms. Despite the overall excellent outcome for patients diagnosed with this disease, death is a more common outcome than with other endocrine cancers. This text is written to help clarify the best methods for the immediate management of patients with thyroid neoplasms for all of the team members involved in the care of patients with this diagnosis. General, head and neck, and endocrine surgeons as well as surgical residents who treat patients with thyroid neoplasms are our intended audience as are thyroidologists, endocrinologists, nuclear medicine specialists, and other physicians.

This book reflects contributions from an international group of authorities. Together they provide a rationale for the various approaches to the management of thyroid nodules and thyroid cancer. Although there is general agreement regarding the evaluation of the patient with a thyroid nodule, the extent of thyroid gland resection, the need for central or lateral neck dissection, the use of postoperative radioiodine therapy, external radiation therapy, and TSH suppressive therapy remain controversial. In Japan, the emphasis is on subtotal thyroidectomy with regional node dissection without the use of post-thyroidectomy treatment with ^{131}I for patients with differentiated thyroid cancer of follicular cell origin. In the United States, the preferred treatment is total or near total thyroidectomy with postoperative radioiodine with TSH therapy. Prophylactic nodal dissection is not usually recommended for patients with papillary thyroid cancer in the United States.

Our text provides the data to document why various diagnostic and therapeutic methods are used. Chapters regarding cytologic and histologic evaluation, application and value of imaging studies, recent advances in the diagnosis and treatment of medullary thyroid cancer, angiogenesis, TSH suppression therapy, and thyroid oncogenes are included. Our goal is to present our readers with an international perspective on the current management of patients with thyroid neoplasms.

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