

A Large Loculated Thyroid Mass

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Clinical Image

A 29-year-old, otherwise healthy female presented with a new and rapidly expanding left anterior neck mass over a month, accompanied with hoarseness of voice but without dysphagia or dyspnea. Physical examination found that the left thyroid was grossly enlarged (6cm in largest dimension) with normal overlying skin and without palpable lymph nodes in the neck. Thyroid function was normal. Thyroid ultrasound (Figure 1A) and neck CT with intravenous contrast demonstrated a large mixed cystic and solid left thyroid mass (Figure 1B-1D) pushing the esophagus and pharynx to the right side without airway narrowing. What is the diagnosis?

Answer: spontaneous hemorrhage of papillary thyroid cancer. Left hemithyroidectomy showed papillary thyroid cancer with hemorrhage. Although rapidly enlarging thyroid mass is usually caused by thyroiditis and malignancies [1], it can be caused by hemorrhage of benign thyroid nodule or thyroid cancer [2-5], which should be considered in the differential diagnosis.



Figure 1: Ultrasound of the left thyroid, longitudinal view (A), and neck CT with intravenous contrast, coronal view (B), sagittal view (C), and axial view (D). See text for detail.

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References

- Leidig-Bruckner G, Frank-Raue K, Lorenz A, Musholt TJ, Schad A, Raue F. Diagnostic Challenge of Rapid Enlargement of the Thyroid: Autoimmune Thyroiditis - Thyroid Lymphoma - Malignant Thyroid Disease. *Thyroid Disorders Ther.* 2013; 2: 128.
- Marković M, Paunović I, Dragaš M, Božić V, Ilić N, Končar I, et al. Giant Posttraumatic Cervical Hematoma: Acute Presentation of Papillary Thyroid Carcinoma in an Adolescent. *Med Princ Pract.* 2016; 25: 385-387.
- Amadei EM, Benedettini L, Piccin O. Two cases of cervical hemorrhage with upper airway obstruction: a life-threatening condition. *Case Rep Med.* 2014; 2014: 674176.
- Giotakis EI, Hildenbrand T, Dodenhöft J. Sudden massive neck swelling due to hemorrhage of a thyroid adenoma: a case report. *J Med Case Rep.* 2011; 5: 391.
- Clement RG, Cozens N, Sharp J, Minhas H. Acute 'pathological haematoma' without significant antecedent trauma as an unusual presentation of undiagnosed malignancy. *BMJ Case Rep.* 2012; 2012: bcr1020115058.