Diffuse Microcalcifications of Only the Thyroid Gland Seen on Ultrasound: Clinical Implication and Diagnostic Approach

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TO THE EDITOR:

We read the article by Yoon et al.¹ in *Annals of Surgical Oncology* with great interest. We have, however, some concerns about the methods used for the evaluation of “diffuse microcalcifications only” in the ultrasound (US) examination. On the one hand, the authors defined “diffuse microcalcifications only” as localized or diffuse scattered microcalcifications without an accompanying mass in the thyroid. On the other hand, they stated that they tried to target the area with the most dense concentration of microcalcifications during the US fine-needle aspiration biopsy (FNAB).^{1,2} However, based on our experience, we think this area may be a primary focus of papillary thyroid cancer.

We have experienced similar cases of thyroid cancer that initially were considered diffuse microcalcifications-only lesions in the thyroid US. However, most of them presented as a mass in the surgical specimen. From the radiology–pathology discussions of the issues, we concluded that aggregated or clustered microcalcifications in the background of diffuse microcalcifications on US

examinations were a possible primary focus of papillary thyroid cancer. Indeed, most of the cases additionally showed focal parenchymal changes in terms of echogenicity around the aggregated or clustered microcalcifications. In this respect, it is a curiosity to us that the surgical results of the densely concentrated microcalcifications in their study were a primary focus of papillary thyroid carcinoma or simple calcifications.

In summary, the authors need to reconsider the definition of “diffuse microcalcifications only” by reevaluating the pathologic results and US findings for their patients. If the densely concentrated calcifications are a primary focus of papillary thyroid carcinoma, targeting this area may increase the performance of US-FNAB.

REFERENCES

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