

# Tracheal resection in locally recurrent differentiated thyroid cancer; a case report.

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## Abstract

Locally recurrent papillary carcinoma of thyroid is a treatable disease. For endotracheal invasion, tracheal resection and anastomosis is a viable option in certain cases which gives significant result. Case presentation: A 46 year female patient with a history of total thyroidectomy + bilateral neck dissection for carcinoma thyroid two years back presented with recurrent thyroid mass in neck with endotracheal invasion. This was successfully treated with segmental tracheal resection with end to end anastomosis after 4 cm defect. Post – operative course was uneventful. Conclusion: Endotracheal invasion of recurrent carcinoma thyroid is not a contraindication for surgery. Full circumferential resection and end to end anastomosis is preferred to shaving trachea. It can be safely anastomosed upto 5 cm defect length. Apart from giving immediate relief of intratracheal bleeding and obstructive airways, it gives long term disease free survival.

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