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The incidence of thyroid cancer seems to be on the rise in India. This may be explained in two ways – either it is an apparent increase that reflects the increased detection of cases due to availability of diagnostic tools like ultrasonography and US guided FNAC and/or true increase of thyroid carcinoma itself. Although USG and US guided FNAC has improved diagnosis of thyroid carcinoma, it cannot be the only reason for the perceived increase in the incidence of thyroid carcinoma. These modern diagnostic tools are not available everywhere. Many a times, the diagnosis becomes apparent only when the histopathology report becomes available after hemithyroidectomy, necessitating completion thyroidectomy. So, apart from improved detection rate, other factors must also be playing their roles in the increased incidence of thyroid carcinoma. Among potential carcinogens, increased exposure to medical radiations is the most likely risk factor. A simple approach for prevention of thyroid carcinoma is to refer the patient for a radiological examination of head and neck region only if the indication is justified according to the International Committee for Radiological Protection following the principle “Choosing Wisely” of the American College of Radiologists or other expert committees. The radiologist should apply low dose CT protocols and image reconstruction procedures as well as thyroid shielding for dental radiography and head and neck CT. Other factors specific for the thyroid carcinoma like diet, life-style change, environmental pollutants, increased iodine intake and increased prevalence of chronic autoimmune thyroiditis cannot be excluded, while other factors like the increasing prevalence of obesity are not specific for the thyroid carcinoma. Exposure to some chemicals during intrauterine life and early childhood, with possible epigenetic changes, might affect thyroid cell mutation. Further studies are needed to investigate the potential carcinogens and their mechanism of action in order to introduce preventive measures and control the continuous increase of thyroid carcinoma.

Dr Chiranjib Das
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