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Your Health: Rise in thyroid cancer may be tied to radiation

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Your Health Kim Painter

By Kim Painter, USA TODAY

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What's this?

A medical mystery: As overall cancer rates fall, why are thyroid cancer rates rising? Diagnoses of cancer in this gland in the neck are increasing about 6% a year, faster than cancers found anywhere else, according to one National Cancer Institute analysis.

Researchers know one big reason: The many medical scans Americans have, for everything from neck pain to artery plaque, are turning up thousands of tiny thyroid tumors that otherwise might go undetected and often would do no harm.

I-131: Thyroid radiation protections revised

"We call them 'incidentalomas,'" says Amy Chen, a head and neck surgeon at Emory University in Atlanta and American Cancer Society researcher.

But that's not the whole story. Two recent studies, including one co-written by Chen, show larger thyroid tumors are being found at an increasing rate, too. And those can't be explained by more aggressive diagnosis alone, researchers say.

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"There is something else going on" to contribute to the 37,000 cases of thyroid cancer expected this year, Chen says. That's up from 18,000 in 2000.

What is that "something else"? In-depth research on that is just starting, says Elaine Ron, a senior investigator at the cancer institute. The good news, she says, is that 98% of those with the most common forms of the cancer live at least five years. Overall death rates are not rising. But it's important to study the rise in cases, she says: "This is a large increase, and it's been going on for a long time. If there's a biological reason, we can try to prevent it."

Among factors researchers are considering:

- **Radiation:** Researchers know radiation exposure, especially in childhood, can increase thyroid cancer risk. They don't know whether increased radiation exposure from medical scans and other sources is contributing to the overall increase.
- **Obesity:** Some early studies suggest it might be a factor — and researchers know it's increasing.
- **Diet:** Some studies suggest diets low in fruits and vegetables or with iodine levels that are too high or too low might play roles.

Watching the research: Caroline Stetler of Washington, D.C. Stetler, 28, had thyroid cancer at 16. As a grad student at



Enlarge By Keith Simmons, USA TODAY

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American University's Investigative Reporting Workshop, she researched the cancer and was shocked by the numbers.

"When I was diagnosed, the only question the doctor asked was, 'Were you ever exposed to head or neck radiation?' And the answer to that was no," she says. If environmental or lifestyle changes are contributing to the increase in thyroid cancer cases, "we have an obligation to find out," says Stetler, who contributed to a report on the mystery (investigativereportingworkshop.org).

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Researchers also need to learn which small thyroid cancers could safely be left untreated, says Louise Davies, a researcher at the Department of Veterans Affairs Medical Center in White River Junction, Vt. She says there's no question some patients are undergoing unneeded biopsies, thyroid removal surgeries and radiation.

But which patients? Right now, doctors don't have good ways to tell. And they know even tiny tumors sometimes spread and cause serious problems, says Kenneth Burman, president of the American Thyroid Association and chief of endocrinology at Washington Hospital Center. The association says doctors may monitor some tumors less than 1 centimeter wide but should immediately treat anything bigger.

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It is well known that exposure of the thyroid gland to ionizing radiation during childhood will put an individual at risk for thyroid cancer in later life. Presently, the most significant sources of childhood exposure to radiation are from x-rays to the head, neck, and chest from medical diagnostic procedures. Thyroid doses to children from exposure to x-rays from CT scans contribute significantly to the overall population risk of thyroid cancer.

In the past, however, important sources of childhood thyroid gland exposures were from iodine-131 contamination of fresh milk. This contamination came from fallout produced during the 1950's and early 1960's. This was the period in history when testing of nuclear weapons was conducted above ground in the USA, in the Pacific, and in the former USSR. Iodine-131, once ingested, is preferentially absorbed by the thyroid gland.

The article makes no mention of radioactive fallout as an important contributing factor to the observed increase in thyroid cancer for persons exposed as children during this era of atmospheric testing of nuclear weapons. The birth cohort of potential concern would be individuals throughout the USA, now in their early-50's to mid 60's..

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In 1961, Ronald Reagan joined the American Medical Association in opposing the Democratic Party's attempt to force socialized medicine on the American people.

President Reagan's advice is just as relevant today as it was then. In part, he warned:

"One of the traditional methods of imposing statism or socialism on a people has been by way of medicine. It's very easy to disguise a medical program as a humanitarian project. . . . Now, the American people, if you put it to them about socialized medicine and gave them a chance to choose, would unhesitatingly vote against it." - Ronald Reagan

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[East TN Mom](#) (0 friends, [send message](#)) wrote: 3d 3h ago

Syrena,

You may think this is just the media's "Panic du jour" but I have thyroid disease as do both my sisters, my husband, my step-daughter, all my female cousins, both my sister-in-laws, my mother-in-law, the list goes on... People can be genetically more predisposed to thyroid disease (German, Scot-Irish, Cherokee).

Also the region people live in can be a factor. There are geographic regions were they don't get enough iodine from their water/environment. In East Tennessee there were documented radiation releases in the late 50's early 60's that increased thyroid cancer rates and no one ever talks about that. Also, you can read a book, something like, the day we bombed america--about the radioactive clouds in the west due to nuclear testing--don't know if that is causing the increase now...

No one should ever die from a slow growing cancer like thyroid cancer (my sister had it). But I know people who have died of thyroid cancer because it is not on many general practitioners (GP) radar and now, to control cost, many GPs are treating their patient's thyroid disease.

Everyone should be tested for thyroid disease--its a cheap test and if you have thyroid disease the inexpensive treatment will turn your life around--probably keep you from getting type II diabetes. Everyone should ask for a thyroid panel, especially women--one in five women have thyroid disease and half are undiagnosed, but men are more likely to get thyroid cancer.

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Medical decisions always involve weighing the risks and benefits of a procedure or medication. CT scans that will potentially provide life saving information should not be avoided for fear of an assumed small increased risk of cancer. You can visit www.xrayrisk.com to calculate individual risk based on CT scans, x-rays or procedures you have had.

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