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A Brush-Tailed Rock Wallaby with an Anaplastic Thyroid Cancer

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Introduction

A group of cancers with very different phenotypes make up thyroid carcinoma. The underlying biology and phenotypic characteristics of various thyroid cancer subtypes are examined. We focus on genetic and epigenetic factors, characteristics of cancer stemness and tumor microenvironments in our discussion of recent findings regarding the heterogeneity of thyroid cancer and the crucial mechanisms that contribute to the heterogeneity [1,2].

Description

Based on size (microcarcinoma), several variants of papillary carcinoma have been described; nature of the encapsulated tumor boundaries; architecture (cribriform-morular, solid, micropapillary, macrofollicular and follicular); characteristics of the cell (clear cell, hobnail, tall cell, columnar cell, oncocytic cell); additional tumor components (papillary carcinoma with a focal insular component, spindle and giant cell carcinoma, squamous cell carcinoma and mucoepidermoid carcinoma), stromal characteristics (papillary carcinoma with stroma-like fasciitis); or a combination of the aforementioned features (Warthin-like diffuse sclerosing).

Through family screening, a genotype-phenotype association that indicates distinct outcomes with particular mutations has led to individualized treatment plans that frequently include preventative surgery. PTC-related circRNAs are only rarely examined in this field, which is notable. Well-defined and 1.1-0.6 cm in size was found. The mass was a solid hypoechoic nodule and had no connection to the thyroid gland. Color Doppler flow imaging revealed signs of blood flow in the vicinity. A space-occupying lesion in the anterior neck was discovered by ultrasonography. A soft tissue nodule at the left anterior edge of the thyroid cartilage and homogeneous intensity of the thyroid gland without evidence of a mass were discovered during an enhanced CT examination of the neck.

A 57-year-old woman presented with a painless mass in the anterior neck for ten days. During swallowing, the mass moved up and down and its surface was smooth. She denied experiencing neck pain while eating, had no fever and had not had any neck surgery, tuberculosis, or cancer in her past. The entire mass was found and removed. A histological examination revealed that the tumor cells invaded the fibrous stroma by forming papillary and glandular structures. The tumor cells were cubic or columnar and had crowded, overlapping nuclei that gave the appearance of ground glass. A studied 1,054 consecutive PTC patients with the intention of developing a nomogram for individualized clinical decisions and determining the clinical factors associated with CLNM. p=0.043, CLNM was found in 31.4 percent (168/535) of non-Hashimoto's thyroiditis (HT) patients and 39.2 percent (83/212) of HT patients. They came to the conclusion that classical PTC patients with characteristics such as male gender, age less than 55, tumor size greater than 1 cm and Hashimoto's thyroiditis were more likely to develop CLNM.

Understanding the genetic changes that cause cancer has greatly improved the survival rates of MEN-2 patients. Through family screening, a genotype-phenotype association that indicates distinct outcomes with particular mutations has led to individualized treatment plans that frequently include preventative surgery. Genetic causes of some types of thyroid carcinoma are most well-known. The patient was a male desexed brush-tailed rock wallaby (P. penicillata) 11 years old who was brought to the Veterinary Teaching Hospital of the University of Queensland. It was a zoo animal that was fed commercial macropod pellets, poultry pellets, lucerne hay and vegetables (sweet potato and carrot) in an outdoor enclosure with another wallaby. A 6-month history of swelling on the left side of the neck was presented to the wallaby [3-5].

Conclusion

These cancers probably existed in these people's thyroid glands for some time but never reached a clinically significant level. The question of whether all thyroid cancers should be diagnosed and treated is a contentious one given these findings.

Acknowledgement

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Conflict of Interest

There are no conflicts of interest by author.

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