Early Case of Thyroid Carcinoma Developing in Myxedema in 1886

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Abstract

The Pathological Society of London published its Transactions from the 1846-48 period. Its second article concerned the early case of cancer to cancer metastasis. This was published in New Zealand by the present author. It is of interest, therefore, that the Transactions also contained an early case of thyroid cancer originating in myxedema in a woman. Hence, it is worth documentation of it, seeing that a recent review did not contain it. Moreover, authors still publish only relatively rare cases of it.

Keywords: Cancer; Myxedema; Female; Transactions; History

Introduction

A remarkable event in Pathology was the establishment of the Pathological Society of London in the 1846-48 era [1]. Incidentally, its second article concerned a report of pale renal carcinoma within which there was a pigmented metastasis [2]. Interestingly, its early status was published in the New Zealand Medical Journal personally [3]. Now, in this context, some other early events have also been spotted with reference to Krukenberg tumor [4], description of carcinosarcoma [5], the medico-legal dictum of Tait [6] and Forensic image of Mascagni [7]. Therefore, the present paper deals with the early report of myxedema becoming malignant it was reported in the Transactions.

Historical Text

On March 2nd, 1886, Gulliver [8] presented before the aforementioned London Society an early case, if not the first reported case, of malignancy arising in a case of myxedema in a 44-year-old woman as follows:

This preparation is one of the larynx, trachea, œsophagus, thyroid gland, and adjacent parts, taken from the body of a woman who was affected with myxœdema. The thyroid, instead of presenting the atrophied condition usually found in this disease, is larger than in the healthy state. Without producing any noticeable compression of the trachea, it is gradually creeping around it, so much so that a very well-marked constriction of the œsophagus may be noticed posteriorly. This enlargement of the usually atrophied gland is due to carcinomaous infiltration of its substance. I have placed under the microscope a section of the gland showing the ordinary appearance of cancer of this organ. On the right side the sterno-thyroid muscle is adherent to the gland and, without doubt, infected with the new growth. The glands in the neighborhood are also extensively infiltrated, especially those at the right side of the neck, and those in the vicinity of the arch of the aorta inferiorly.

Discussion

Incidentally, this was done in part by that old author who was so prescient as to affirm that "This case is interesting, and to a certain extent unique. In the first place, Dr. Hadden, who is a member of the myxedema committee, informs me that malignant disease as associated with myxedema, has hitherto not been recorded [8]."

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The recent review of Lindholm and Laurberg [9] contained 94 references but I could not perceive a statement as to an early example of this special metastatic invasion. Indeed, by 1964, Sclare and Nicol [10] published 3 case reports; they did not record any 19th century case.

This lesion continues to be of interest. Thus, in 2013, Carter, Sippel and Chen [11] account went only as far back as to 1878 when, according to them, myxedema was defined by Orr:

**Conclusion**

Now, according to Lindholm and Laurberg [19], who wrote extensively in their Review from Denmark, "The last part of the 19th century was a period of great achievement in medicine and endocrinology". Therefore, the present Mini-Review from Nigeria delved into this subject. In particular, it is shown that the paper published in *The Transactions of the Pathological Society of London* in 1886 by Gulliver [3] was a fine example appropriately entitled "Malignant disease of thyroid from a case of myxœdema". Indeed, it is believed that this communication will definitely be a great source of information to the research communication.

**Bibliography**

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