자유연제 3-4

갑상설관낭종 및 누공의 임상적 고찰

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Purpose: Anomalies in thyroglossal duct were reported as the most common midline or paramedian cervival lesions of congenital origin. Presented as thyroglossal duct cyst (TGDC) or thyroglossal duct fistula (TGDF), they are found in all age group. This clinical study was intended to elucidate the clinical characteristics and the outcomes of surgical treatment of these anomalies.

Methods: 91 patients underwent surgery for TGDC or TGDF at 4 affiliated hospitals of Hallym University from January 1992 to May 2002. The demographics of patients, the clinical characteristics of lesions, and the outcomes of treatments were evaluated retrospectively. And the authors evaluated these characteristics according to the age groups, which were younger than 20(42 patients) and older than 20(49 patients)

Results: The male to female ratio was 1.67: 1 and the first decade showed the highest incidence in age distribution of the occurrence (32.9%). Painless mass (83.6%) was the most common presenting symptom and most of the symptom

oms had manifested less than 1 year (67%). TGDCs were 90% and TGDFs were 10%. 72 cases were infrahyoid lesions and 19 cases were suprahyoid lesions. 80 cases were on the midline and 11 cases were on the paramedian, which were within 2 cm from the midline. Of the paramedian lesions, 2 cases were in yonger group and 9 cases were in older group. This tendency of laterality in location by age groups did not show statistical significance (p=0.096). All patients underwent Sistrunk operation and one patient experienced recurrence.

Conclusions: This study justified the Sistrunk operation as the choice of treatment for the anomalies of thyroglossal duct. Old age groups had the lateral lesions more frequently. Careful approach needed for the paramedian cervial lesions of adult to avoid the loss of proper treatment for the possible hidden congenital lesions.

KEY WORDS: Thyroglossal duct cyst · Thyroglossal duct fistula · Sistrunk operation.