The percutaneous laser thermal ablation treatment for thyroid nodules

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The percutaneous laser thermal ablation treatment is indicated for treating benign and malignant lesions of the thyroid with a micro-invasive approach. It employs laser energy to heat and destroy pathologic tissues, avoiding the surgical approach with its real discomfort and possible complications.



Depending on the tissue, anatomical location, size and nature (benign or malignant) of the thyroid nodule to be treated, the indications for this procedure include:

- For benign lesions (benign thyroid nodules): to produce a volumetric reduction of the nodule by cytoreduction (reducing the number of cells in the nodule), a process induced by laser ablation with consequent regression of the size of the nodules;
- For malignant lesions (metastatic lymph nodes of the neck and thyroid microcarcinoma): to destroy cancerous tissue masses with a sufficient safety margin.

This outpatient procedure, performed without any kind of anesthesia, consists in the insertion of one or two extremely thin optical fibers into the thyroid nodule under ultrasound guidance which will deliver laser

energy that heats the tissues to be treated until they are destroyed. The procedure entails no incisions or stitches with the entire treatment session, including preparation time, lasting for approximately 30 minutes.

Recovery times are very short and the patient can return to normal activities just a few hours after the treatment. In the months following the procedure, the patient just needs to carry out follow-up examinations to monitor the outcome produced in a single treatment session.

Advantages

- It is an outpatient procedure requiring no local nor general anesthesia
- It entails a short duration of time (about 30 minutes including preparation of the patient)
- It uses very fine, painless and minimally invasive needles causing no damage to the skin nor underlying tissues
- It does not leave any marks on the neck (no scarring) ensuring good cosmetic results
- It significantly reduces compressive symptoms in case of benign lesions
- It does not require life-long thyroid hormone replacement therapy, as is the case of surgical removal

References:

Ultrasound-Guided Laser Ablation of Incidental Papillary Thyroid Microcarcinoma: A Potential Therapeutic Approach in Patients at Surgical Risk. Papini E, Guglielmi R, Gharib H, Misischi I, Graziano F, Chianelli M, Crescenzi A, Bianchini A, Valle D, Bizzarri G. *Thyroid.* 2018.

Percutaneous laser ablation for benign and malignant thyroid diseases. Mauri G, Nicosia L, Della Vigna P, Varano GM, Maiettini D, Bonomo G, Giuliano G, Orsi F, Solbiati L, De Fiori E, Papini E, Pacella CM, Sconfienza LM *Ultrasonography. 2018 Sep 17.*

Benign thyroid nodule unresponsive to radiofrequency ablation treated with laser ablation: a case report Oddo S, Balestra M, Vera L, Giusti M. *J Med Case Rep. 2018 May 11*.

Role of ultrasound in the assessment of percutaneous laser ablation of cervical metastatic lymph nodes from thyroid carcinoma. Zhang L, Zhou W, Zhan W. Acta Radiol. 2018 Apr.

A single session of laser ablation for toxic thyroid nodules: three-year follow-up results. Gambelunghe G, Stefanetti E, Colella R, Monacelli M, Avenia N, De Feo P. *Int J Hyperthermia. 2018 Feb 22:1-5*.

Percutaneous Ethanol Injection in Combination with Laser Ablation for a 100 ml Partially Cystic Thyroid Nodule. Negro R, Greco G. *Endocrinol. Case Rep. 2018 Feb 15.*

A comparison of laser with radiofrequency ablation for the treatment of benign thyroid nodules: a propensity score matching analysis. Pacella CM et al. Int J Hyperthermia. 2017 Jun 12.

Outcomes and Risk Factors for Complications of Laser Ablation for Thyroid Nodules. A Multicenter Study on 1531 Patients.

Pacella CM, Mauri G, Achille G, Barbaro D, Bizzarri G, De Feo P, Di Stasio E, Esposito R, Gambelunghe G, Misischi I, Raggiunti B, Rago T, Patelli GL, D'este S, Vitti P, Papini E. *J Clin Endocrinol Metab. 2015 Oct.*

Long-term Efficacy of Ultrasound-Guided Laser Ablation for Benign Solid Thyroid Nodules. Results of a Three-Year Multicenter Prospective Randomized Trial. Papini E, Rago T, Gambelunghe G, Valcavi R, Bizzarri G, Vitti P, De Feo P, Riganti F, Misischi I, Di Stasio E, Pacella CM. *J Clin Endocrinol Metab. 2014 Oct.*

Percutaneous Laser Ablation of Metastatic Lymph Nodes in the Neck From Papillary Thyroid Carcinoma: Preliminary Results. Mauri G, Cova L, Tondolo T, Ierace T, Baroli A, Di Mauro E, Pacella CM, Goldberg SN, Solbiati L *J Clin Endocrinol Metab. April 24*, 2013.

About Elesta & ModìLite treatment:

Scotti Bruno is Product Marketing Engineer for Elesta. ModìLite is the EchoLaser Therapy for treating neck lesions.

The name of the treatment contains in a single word the application area (the neck, "Modi" was the nickname of Tuscan painter, Amedeo Modigliani, who portrayed female subjects with very long, slim necks) and "Lite", which on one hand refers to the lightweight and micro-invasiveness of the treatment, and on the other, the therapeutic source (Light, therefore Laser).

The name ModìLite marks the difference of the procedure performed with EchoLaser (micro-invasiveness and multi-fiber approach in a single system) from the other thermal ablation techniques.