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## LETTER TO THE EDITOR

## Concerns of low-risk thyroid cancer survivors

To the Editor,

The survivorship concerns of individuals diagnosed with thyroid cancer have gained increasing attention in the medical literature [1–4]. In the journal *Acta Oncologica*, Hedman et al. recently reported a high prevalence rate (48%) of fear of recurrence among Swedish thyroid cancer survivors 14–17 years after diagnosis; yet the actual rate of recurrence was only 7% (19/279) [1]. In another registry-based survey study, van de Wal et al. reported that fear of recurrence among thyroid cancer survivors did not significantly differ from that of other oncology populations [3]. Our objective was to explore the concerns of low-risk papillary thyroid cancer survivors (including fear of recurrence).

### Material and methods

This secondary follow-up study was a telephone survey [5,6] of low-risk thyroid cancer survivors who had a total thyroidectomy (with or without radioactive iodine remnant ablation) [5,6]. The study population had previously participated in a radioactive iodine treatment decision aid trial at our institution [7]. More details on the methods are reported elsewhere [5,6]. We utilized the patient

concerns section of the Adolescent and Young Adult Health Outcomes and Patient Experience (AYA HOPE) study follow-up questionnaire [8]. The possible responses for level of concern were: not at all, a little, somewhat, or very concerned. We grouped the responses for not at all or a little concerned together, and the responses for somewhat or very concerned together (the latter category representing the prevalence of various concerns). Informed consent for participation in the study was received from all participants and the study was approved by the University Health Network Research Ethics Board.

### Results

Our survey response rate was 77% (57/74) and mean duration of time since the initial surgical treatment was 35 months (range 29–45 months) [5,6]. Only two individuals in our study (3%) had neck re-operations for suspected disease recurrence; moreover one individual (2%) had proven recurrence in a neck lymph node [4,5]. The detailed characteristics of our study population have been previously reported and were fairly typical of low-risk thyroid cancer, including a predominance of females and a mean age of 46 years at the time of diagnosis [4,5].

As shown in Table 1, more than a third of respondents reported being somewhat or very concerned about possible long-term side effects of cancer treatment, disease recurrence, and having financial support for medical care. However, about half of respondents indicated that they were somewhat or very concerned about nutrition, the possibility of developing

**Table 1.** General concerns of thyroid cancer survivors.

Question: How concerned are you about each of the following?	Percentage of participants not at all or a little concerned (Number, N = 57)	Percentage of participants somewhat or very concerned (Number, N = 57)
'Possible long-term side effects of cancer treatment'	63% (36)	37% (21)
'The possibility of the same type of cancer returning'	65% (37)	35% (20)
'How to check signs that cancer has returned'	79% (45)	21% (12)
'The possibility of getting another type of cancer'	49% (28)	51% (29)
'Having financial support for medical care'	61% (35)	39% (22)
'Physical fitness or getting exercise'	54% (31)	46% (26)
'Nutrition or having a healthy diet'	42% (24)	58% (33)
'A family member's risk of getting cancer'	54% (31)	46% (26)
'Having your own children in the future'	93% (53)	7% (4)
'Having enough information about your treatment'	74% (42)	26% (15)
'The potential long-term effects of cancer on your health'	51% (29)	49% (28)
'How to talk about your cancer experience with family and friends'	88% (50)	12% (7)
'Meeting other adolescents or young adult cancer patients/survivors'	97% (55)	4% (2)

a second primary malignancy, potential long-term effects of thyroid cancer, and physical fitness (exercise). Additional concerns reported less frequently, are shown in [Table 1](#).

## Discussion

Our estimated prevalence of fear of recurrence (35%) in a low-risk differentiated thyroid cancer population is slightly lower than the estimate of 48% reported by Hedman et al. [2]. However, this may be in part, due to differences in our study population as we only recruited individuals with low-risk papillary thyroid cancer. We also utilized a different questionnaire than Hedman et al. [1]. Yet, our study findings suggest that concerns of low-risk thyroid cancer survivors are not restricted to disease recurrence, at least in the initial post-treatment years. Limitations of our study include a small sample size, limited duration of disease follow-up, and the exploratory nature of a secondary follow-up study.

A potential contributing factor relating to persistent cancer-related worry in thyroid cancer survivors may be insufficient psychosocial support. For example, Morley et al. reported that only 9.2% of thyroid cancer survivors recalled receiving information and support about 'dealing with fear of recurrence' [4]. Furthermore, Achebrook-Kilfoy et al. reported that 33.8% of thyroid cancer survivors perceived a lack of support from their physicians [9].

In conclusion, there is emerging evidence that among thyroid cancer survivors, including those with relatively low-risk disease, concerns about recurrence and other health issues, are highly prevalent. More research is needed on cancer-related worry in thyroid cancer survivors and related health implications. Furthermore, the psychosocial supportive care needs of this population need to be addressed.

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