Treatment of thyroid cancer with the new oral agents

Thyroid malignancies have traditionally been under the care of endocrinologists. Thyroid cancer excellent prognosis, its unresponsiveness to conventional chemotherapy, and the specific and peculiar methods in the follow-up are some of the reasons for its particular management. Thyroid Cancer Guidelines have been published by Endocrine Societies both in the United States [1] and in Europe [2]. Furthermore, the adequate skills and knowledge related to running a good practice differ from the customary oncologic management. In fact, thyroid cancer is generally omitted from the oncology curriculum for oncologists’ residence education, whereas thyroid cancer management comprises a fundamental feature in the instruction of future endocrinologists. As a result, the oncologists’ experience and interest in the management of this particular type of cancer is generally scarce.

We have read the position statement by the Spanish Society of Medical Oncology (SEOM) on the treatment of cancer with the new oral agents [3]. We agree with the SEOM members that, for the benefit of our patients, ‘cancer treatment involves the participation of multiple medical specialties’. Our aim is to be collaborative rather than start a controversy. However, we remind that endocrinologists have led the introduction of these new oral drugs in the thyroid cancer treatment scenario [4, 5]. Clinical trials with tyrosine kinase inhibitors (TKI) for thyroid cancer patients have been at the beginning, and currently are, in the hands of endocrinologists [6]. Therefore, we understand that endocrinologists must continue coordinating thyroid cancer patients’ management. Besides that, it is well described that TKI produce a number of endocrine side-effects such as hypothyroidism, which are especially relevant in the follow-up of these patients [5].

As a parallel situation, we know that endocrinologists cannot claim for the exclusive use of any hormone-related drug. We fully understand that glucocorticoids, for instance, need to be widely used by oncologists and other specialists. Therefore, in agreement with the Spanish Society of Radiation Oncologist [7], we consider that the statement of the SEOM has gone beyond the limits of desirable good relationship among different specialists.

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