

SPONTANEOUS HAEMORRHAGE IN GOITRE CAUSING RESPIRATORY DISTRESS

Pages with reference to book, From 175 To 175

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Haemorrhage in goitre is well known complication. Rarely it can produce respiratory distress. A case which required emergency partial thyroidectomy is reported.

CASE REPORT

A 19 year old girl reported to the casualty department of our hospital, with dyspnoea and sudden increase in size of swelling in front of the neck, which was painful. She had had goitre for the last 2 years. Physical examination revealed an anxious girl sitting up in bed with obvious difficulty in breathing. Her vital signs were normal. The skin over her neck was oedematous with tense swelling on the left side. Cervical spine x-rays (Figure. 1)

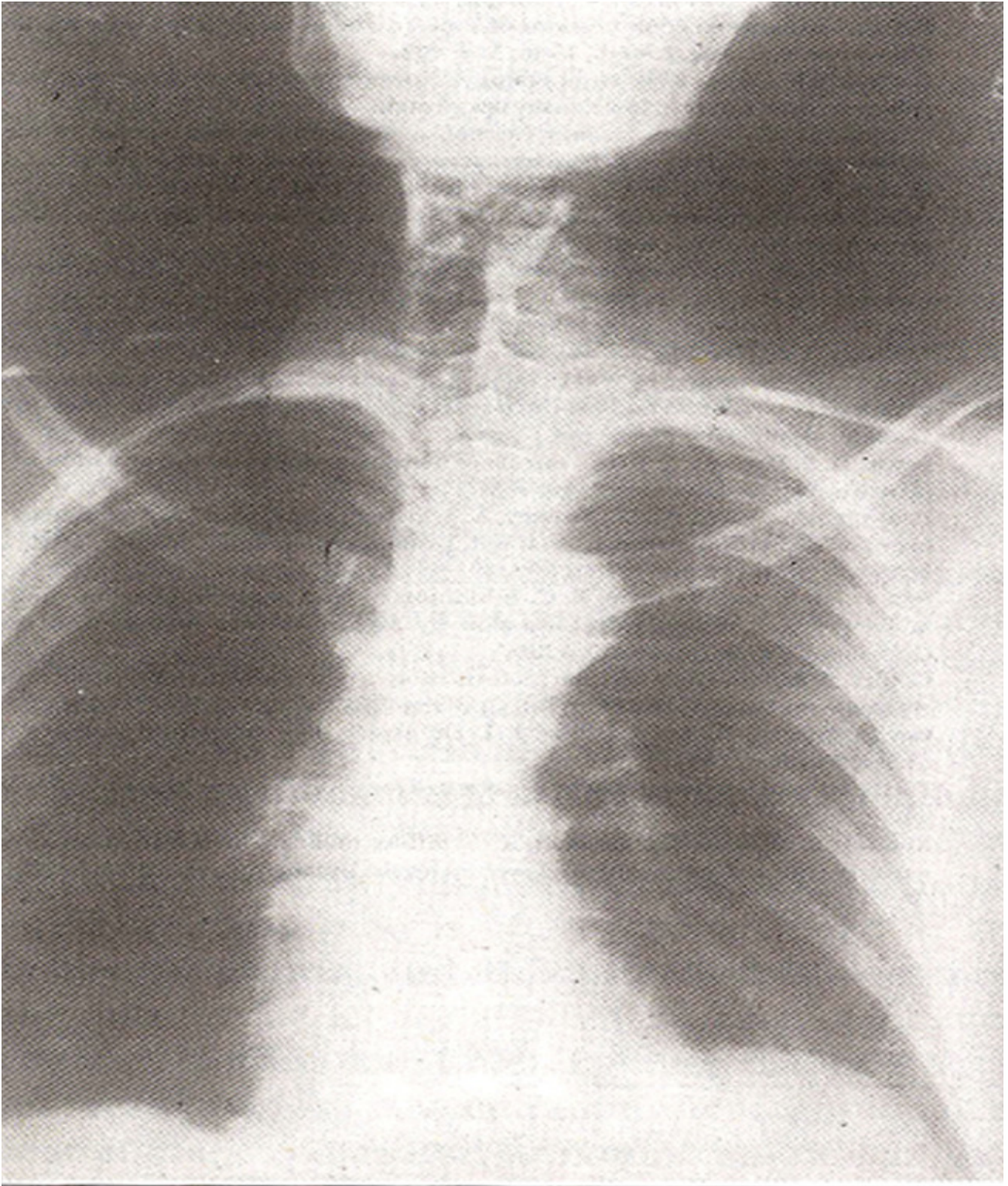


Figure 1. Radiograph of anterior cervical spine showing right trachea shift.

showed soft tissue swelling on the left side of the neck with a marked shift of trachea to the right. Thyroid function tests and scan were not available the skin and subcutaneous tissues. The left lobe and isthmus of the thyroid gland were tense and haemorrhagic (Figure 2).

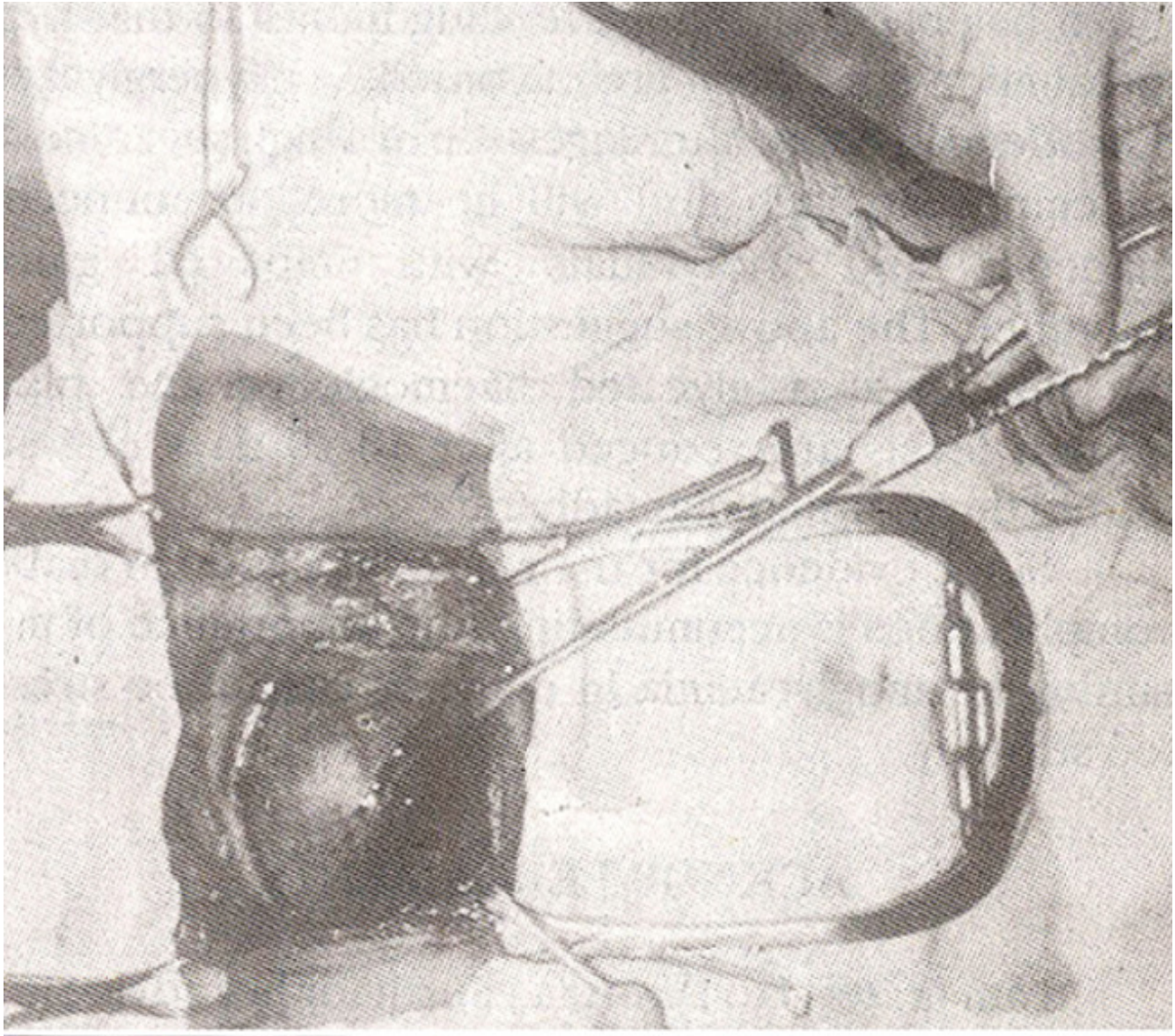


Figure 2. Haemorrhage visible in left lobe of thyroid.

The degenerated thyroid tissue present mainly in the left lobe was excised. The right lobe was normal. Her post-operative course was uneventful except for minor wound sepsis. The histology was reported as adenomatous colloid goitre with multiple areas of haemorrhage and necrosis.

DISCUSSION

Haemorrhage in the thyroid gland usually occurs in pre-existing abnormalities. This has followed trauma,^{1,2} lifting heavy weight,³ straining⁴ and even during household work,⁵ as indeed in our case. This case illustrates the potential dangers of haemorrhage in goitre, and the need for urgent surgical intervention to prevent fatal extrinsic compression of the airway.

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