



ENT



Retrosternal Goitre - A Case Study

Introduction:

Retrosternal goitre is defined as a thyroid gland with more than 50 percent of its mass below the thoracic inlet. (1) This is a condition accounting for 5-20% of thyroidectomy patients. It is associated with slow progression and a longer course of illness. The majority of retrosternal goitres arise from the caudal extension of cervical goitres, attributed to multiple factors such as negative pressure repetitive deglutition, the effect of gravity, and a large goitre protruding into the mediastinum. In this study of a 51-year-old female, a retrosternal goitre was incidentally found to contain multinodular goitre with large nodules. The mass was removed surgically with a combined cervicotomy approach.



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A 51-year-old female came to the otolaryngology outpatient department for evaluation of difficulty in breathing on exertion. On evaluation, the ear, nose, and throat examination were normal with no obvious neck swelling. Indirect laryngoscopy was normal. On auscultation, there were reduced breath sounds on the left lung. She was an elderly female with a short, broad neck with no obvious swelling in the neck.