

SELECTIVE UNILATERAL PARATHYROID EXPLORATION: AN EFFECTIVE TREATMENT OF PRIMARY HYPERPARATHYROIDISM

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Background: Unilateral neck exploration (UNE) is a well recognized approach in the treatment of primary hyperparathyroidism (PHP). The purpose of this study was to review the success of UNE guided by preoperative sestamibi scanning (SM).

Methods: A retrospective chart review was performed to identify patients undergoing surgery for the treatment of primary hyperparathyroidism. Patients treated over a 3 year period (January 2001 – December 2003) were included in the study.

Results: Seventy-seven patients met eligibility criteria for the study. Of these patients, 50(65%) had SM scans consistent with a solitary adenoma. Forty-six patients (60%) underwent a UNE. The mean follow-up was 18.4 months (range, 1-41). Seventy-four of 77(96.1%) patients were normocalcemic after initial neck exploration. Of the 3 failures, 2 had persistent, and 1 had recurrent disease. All failures occurred in patients in whom a preoperative SM scan suggested a solitary adenoma. UNE was successful in 47 of these 50 patients (94%), while standard bilateral neck exploration cured the remaining 27 patients (100%).

Conclusion: Selective unilateral neck exploration guided by preoperative SM scanning is an effective approach in the treatment of primary hyperparathyroidism.