PATIENT EDUCATION

Thyroid cancer & radiation therapy

A plain-language guide for patients and families. Bring this to your visit. It does not replace advice from your clinician.

What is this cancer?

Most thyroid cancers are differentiated (papillary or follicular) and are treated with surgery, TSH suppression, and sometimes radioactive iodine (I-131) — a swallowed isotope, not a machine beam. External-beam radiation is reserved for selected invasive, unresectable, or metastatic situations, and for some anaplastic or medullary cases after specialist review. The word “radiation” can mean two different treatments — ask us which one we mean.

What you may notice

- A neck lump, hoarseness, or a nodule on ultrasound
- Many nodules are benign — cancer is a pathology diagnosis
- Swallow or voice change if a tumor is invasive
- Family syndromes for some medullary cancers

Usual care — the big picture

Endocrine surgery and endocrinology lead most differentiated-cancer care. I-131 is given in a nuclear-medicine pathway with home precautions. External beam is a separate decision.

Where CureRays may fit. CureRays delivers external image-guided radiation to the neck or metastases when that is the agreed plan (for example, an invasive remnant or a painful bone). We do not replace I-131 with a machine because it is “more convenient.” Confirm which modality you are being offered.

What radiation treatment usually involves

- Review of surgery, iodine uptake, and pathology subtype
- Neck simulation with a mask if the neck is the target
- Dental and swallow check before a high neck field
- Skin and swallow supports during the course

Immobilization — why it matters

A thermoplastic mask keeps the neck still. Practice if you are claustrophobic. You go home radioactive only after I-131 — not after a typical external-beam visit.

Side effects you should know about

Effects depend on the area treated, the dose, and other therapies. This list is typical, not a promise and not complete. Confirm your personal list with your clinician.

- **Skin and swallow** for neck external beam.
- **Fatigue.**
- **Voice.** Temporary hoarseness can occur; report breathing trouble.
- **Rare / serious.** Stridor (noisy breathing), fever, or wound problems after recent surgery.

What this means for you at CureRays

Leave the visit knowing whether you are discussing iodine, external beam, both, or neither. Those paths have different home rules.

Questions to ask

- Which type of thyroid cancer do I have in one word?
- Do I need radioactive iodine, external beam, or only hormone pills?
- What precautions do I take around family after iodine (if used)?
- How will TSH and thyroglobulin be followed?

How to schedule or learn more

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