



# Termoablazione laser dei noduli benigni

## Prof. Pierpaolo De Feo Dott. Giovanni Gambelunghe









Ai sensi dell'art. 3.3 sul conflitto di interessi, pag 17 del Regolamento Applicativo Stato-Regioni del 5/11/2009, dichiaro che negli ultimi 2 anni NON ho avuto alcun rapporto di finanziamento con nessun soggetto portatore di interessi commerciali in campo sanitario.







Numerosi sono gli studi che provano la efficacia e sicurezza della metodica ablativa laser ModìLite (Elesta, Firenze), con efficacia che, come tutte le metodiche invasive, è operatore e centro-dipendente.





#### Clinical Outcomes of Patients with Symptomatic Benign Thyroid Cold Nodules Treated with PLA

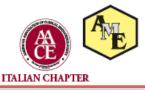


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Pts/Nodules no. RCT Mean Baseline Vol (ml) FU months Volume Reduction % (mean) Author Laser source Number of session (mean) Dossing et al (2002) 16 10.0 46 Diomed 15 plus, 810 nm 6 Spiezia et al (2003) 5 11.1 Nd:Yag smart, 1064nm 12 61 Pacella et al (2004) 8 22.7 4.1 63 Nd:Yag smart, 1064nm 6 20 2.2 Papini et al (2004) 24.1 Nd:Yag smart, 1064nm 64 6 Dossing et al (2005) 15vs15<sup>a</sup> 8.2 44(median) Diomed 15 plus, 810 nm 1 6 ves Dossing et al (2006) 15vs15<sup>b</sup> 10.1/10.8 Diomed 15 plus, 810 nm !/3 6 44/57 Amabile et al (2006) 23 15.0 12 36 Ouanta D-Plus, 980 nm 3 Gambelunghe et al (2006) 13vs13<sup>a</sup> 8.2 30 weeks 44 (median) yes Nd:Yag smart, 1064nm Cakir et al (2006) 12/1511.9 1.5 82 Diomed 15 plus, 810 nm 12 Papini et al (2007) 21vs21vs 20<sup>c</sup> 11.7 44 yes Nd:Yag smart, 1064nm 12 23.1 Valcavi et al (2010) 122d 48 Echolaser, 1064nm 36 Dossing et al (2011) 78 8.2 51 (median) yes Diomed 15 plus, 810 nm 67 Amabile et al (2011) 51e 53.5 81 Quanta D-Plus, 980 nm 3.2 cycle Gambelunghe et al (2013) 20/20f 15/14 +11/57Echolaser, 1064nm 36 Gambelunghe et al (2013) 55/56 (median) 50/50g 6 Echolaser, 1064nm 1 Papini et al (2014) 101vs99<sup>b</sup> yes 12 Echolaser, 1064nm 1 36 57 Pacella et al (2015) 72 1531/1534 27 Echolaser, 1064nm 12 Achille et al (2016) 45 12 24 Echolaser, 1064nm 84 Negro et al (2016) 56 48 15.7 Echolaser, 1064nm 56 99<sup>h</sup> Shuhua Ma et al (2016) 90/118 18 61 Echolaser, 1064nm 12 Mauri (2016) 31 20.3 Echolaser, 1064nm 70 Pacella et al (2017) 449 12 21.5 Echolaser, 1064nm 63

Pts=Patients; <sup>a</sup> laser session vs control group; <sup>b</sup> one laser session vs three laser sessions; <sup>c</sup> pts treated with laser energy vs patients treated with L-T4 or no treated; <sup>d</sup> the energy was delivered continuously while retracting the applicators in a single session; <sup>e</sup> the energy was delivered continuously while extracting the needle in multiple sessions;<sup>f</sup> retrospective comparison between a group treated with low amount of energy and one treated with a high amount of energy; <sup>g</sup> retrospective comparison between patients treated with local anesthetic and patients treated without local anesthetic; <sup>h</sup> only 48 nodules have the 18months follow-up





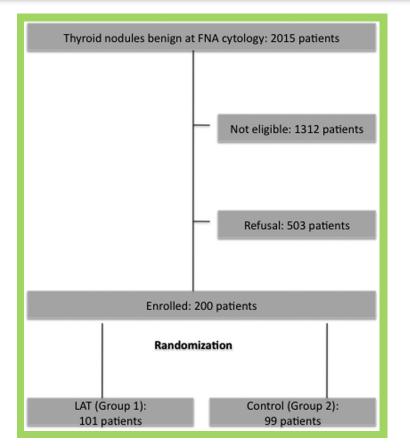
### Long-term Efficacy of Ultrasound-guided Laser Ablation for Benign Solid Thyroid Nodules. Results of a Three-year Multicenter Prospective Randomized Trial

Papini E\*, Rago T, Gambelunghe G°, Valcavi R", Bizzarri G\*\*, Vitti P, De Feo P°, F. Riganti", Misischi I\*, Di Stasio°°, and Pacella CM\*\*





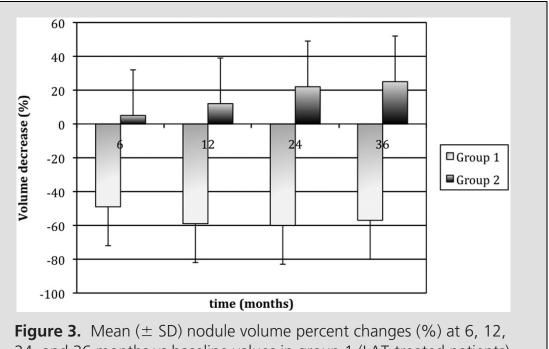










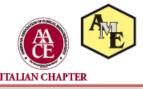




**Figure 3.** Mean  $(\pm$  SD) nodule volume percent changes (%) at 6, 12, 24, and 36 months vs baseline values in group 1 (LAT-treated patients) and group 2 (control subjects).



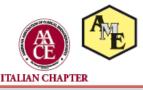




• Una singola seduta laser con due fibre induceva una significativa riduzione di volume dei noduli trattati (60%), con conseguente miglioramento dei sintomi compressivi nella maggioranza dei noduli solidi, scintigraficamente freddi, sottoposti a trattamento. I risultati venivano raggiunti progressivamente in 6-12 mesi e si mantenevano stabili nei successivi 3 anni.







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#### Outcomes and Risk Factors for Complications of Laser Ablation for Thyroid Nodules. A Multicenter Study on 1531 Patients

Pacella CM\*, Mauri G°, Achille G°°, Barbaro D°°°, Bizzarri G\*, De Feo P\*\*, Di Stasio E<sup>+</sup>, Esposito R, Gambelunghe G\*\*, Misischi I\*\*\*, Raggiunti B, Rago T, Patelli GL<sup>#</sup>, D'este S<sup>#</sup>, Vitti P, and Papini E\*\*\*

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Hospital	No. of Pts <sup>1</sup> M/F	Age <sup>2</sup>	No of BTNs <sup>3</sup>	Vol .of BTNs <sup>2,3</sup>	Sessions mean	VR at 12th month	No. of Pts treated with two or more BTNs	Local Anaesthesia	Sedation yes/no	Major Complications No(%) <sup>4</sup>	Minor Complications no(%) <sup>4</sup>	Side Effects No(%) <sup>5</sup>
Albano L.	341 110/231	51.5 ± 13.7	341	13 ± 12 (2-126)	1,5	6.7 ± 10		yes	no	1 (0,3)	1 (0,3)	37 (10.9)
Atri	138 22/116	52.1 ± 12.1	138	13 ± 9 (1.5–45)	1	7.6 ± 8		yes	yes	3 (2.2)	2 (1.4)	20 (14.5)
Alzano L	36 4/32	58.6 ± 15.0	36	5 ± 3 (2-21)	1	8.4 ± 5		yes	yes	0 (0.0)	0 (0.0)	1 (2.8)
Bari	45 10/35	52.0 ± 13.3	45	24 ± 19 (1.4-93)	1	9.2 ± 13		yes	yes	1 (2.2)	0 (0.0)	13 (28.9)
Cosenza	242 62/180	54.4 ± 11.8	242	19 ± 13 1.9-84)	1	7.6 ± 8		yes	no	0 (0.0)	0 (0.0)	54 (22.3)
Livorno	334 111/223	51.6 ± 31.1	337	49 ± 18 (10-78)	1.4	6.8 ± 8	3	no	no	1 (0.3)	0 (0.0)	184 (54.6)
Perugia	58 26/32	58.1 ± 8.9	58	25 ± 29 (7–215)	1.1	7.6 ± 7		yes	yes	2 (3.4)	2 (3.4)	51 (87.9)
Perugia	189 81/108	56.1 ± 9.9	189	20 ± 24 (3–216)	1.1	7.3 ± 11		no	yes	0 (0.0)	4 (2.1)	71 (37.6)
Pisa	148 18/130	52.6 ± 13.0	148	47 ± 27 (6-172)	1.1	7.2 ± 11		no	yes	0 (0.0)	0 (0.0)	32 (21.6)
Combined Hospitals	1531 444/1087	54.1 ± 14.3	1534	27 ± 24 (1.4-216)	1.2	7.2 ± 11	3			8 (0.5)	9 (0.6)	463 (30.2)

<sup>1</sup> Patients; <sup>2</sup> mean  $\pm$  sD; <sup>3</sup> BTNs = Benign Thyroid Nodules; <sup>4</sup> value calculated per LAT sessions; <sup>5</sup> the values include all side effects intra-operatively and within 24 h days after the procedure







				Complications and Side Effects no. (%) <sup>2</sup>						
Type of complications (SIR Class) <sup>1</sup>				Time of Detection						
							Time to Recovery (days)			
			Intra-operatively	Immediate post-operative (within 24 h)	Peri-procedural (within 30 days)	Delayed (after 30 days)				
Major				. ,						
-	Voice change	(C)		8 (0.5)*			2-84			
Minor										
	Hematoma	(B)		8 (0.4)			2–10			
	Skin burn	(B)		1 (0.1)			10			
Side Effects										
Pain		(A)								
	mild		194 (10.6)	61 (3.3)			1			
	moderate		30 (1.6)	34 (1.9)			1–2			
	severe			4 (0.2)			2–3			
Vasovagal		(A)	12 (0.7)							
reaction										
Cough		(A)	1 (0.1)							
Fever (37.5 C-38.5 C)		(A)		141 (7.7)			1-4			









- La riduzione di volume dei noduli era 73 ± 10%.
- Notevoli miglioramenti si avevano sia sul "Local symptoms score" che sui "cosmetic signs".







Roma, 9-12 novembre 2017

Volume (ml)	Pre-T.	3 mesi	6 mesi	1 anno	3 anni
<u>N = 633</u>					
Mediana	16	7,5 (- 53 %)	5,8 (- 64%)	5,8 (- 64%)	5,9 (- 64%)
Minimo	10	4	2,4	2,4	2,2
Massimo	289	197	114	44*	31*

\* II° trattamento



## Dati di laboratorio



	Tempo 0	1 giorno	1 anno	3 anni
TSH (uUI/ml)	1,6 ± 0.9	1,3 ± 0,8	1,5 ± 1	1,4 ± 0,9
FT4 (pg/ml)	10,1 ± 1,9	15,7 ± 4,9	10,1 ± 1,9	10,3 ± 1,2
TG (ng/ml)	$72 \pm 378$	4891 ± 9346	77 ± 327	79 ± 311







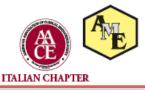




Febbricola	12%
Dolore di lieve entità	10%
Ematoma sottocutaneo	0,5 %







Lasers in Surgery and Medicine

#### Clinical Report

The Administration of Anesthetic in the Thyroid Pericapsular Region Increases the Possibility of Side Effects During Percutaneous Laser Photocoagulation of Thyroid Nodules

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	Group A	Group B	OR	Р
Fever	30/50 (60%)	12/50~(24%)	4.75	0.0003
Pain	21/50~(42%)	5/50~(10%)	6.51	0.0006
Dysphonia	1/50~(2%)	0/50		NS







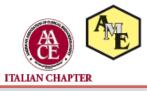
Ultrasound-Guided Interstitial Laser Ablation for Thyroid Nodules Is Effective Only at High Total Amounts of Energy: Results From a Three-Year Pilot Study Surgical Innovation XX(X) 1–6 © The Author(s) 2012 Reprints and permission: sagepub.com/journalsPermissions.nav DOI: 10.1177/1553350612459276 http://sri.sagepub.com



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Volume of Nodules (mL)	Pretreatment	After 3 Months	After 6 Months	After I Year	After 2 Years	After 3 Years	Energy (J/mL)
Total population $(N = 40)$	)						
Median	14	10	8.5	9.5	11.5	11.5	245
Minimum	7	4	3	3	3	3	16.51
Maximum	142	110	102	121	134	135	640
Group I (n = 20)							
Median	15	11	9.5	13.0	16	16.5	71.51
Minimum	8	5	5	7	8	8	16.5
Maximum	132	110	102	121	134	135	179
Group 2 (n = 20)							
Median	14	7.5	6.51	6	6	6	578.5
Minimum	7	4	3	3	3	3	311
Maximum	142	89	58	49	52	52	640

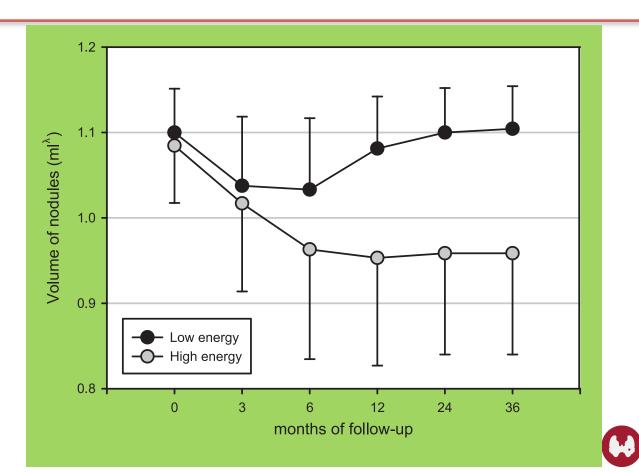
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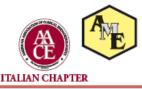




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#### **RESEARCH ARTICLE**

## Thyroid nodule morphology affects the efficacy of ultrasound-guided interstitial laser ablation: A nested case-control study

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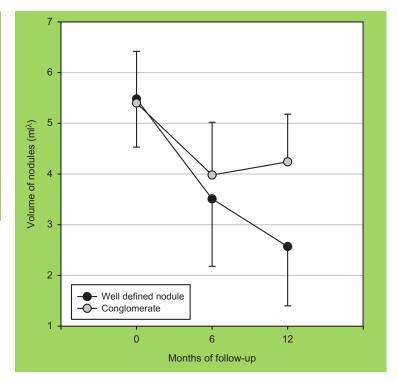






	Group 1	Group 2	p Value
n	20	20	_
Volume of nodules (mL) at baseline	17.7 (11.5–32.5)	17.6 (10.2–32)	0.779*
Volume of nodules (mL) at 6 months	8.7 (2.4–23)	10.2 (6–21)	0.220*
Volume of nodules (mL) at 1 year	5.3 (1.8–12.5)	11.4 (6.3–23)	<0.0001*

Data are expressed as median (min–max). \*Student's *t*-test.









Anche sul trattamento dei noduli tossici vi è una casistica abbastanza ampia, che dimostra come la metodica ablativa laser ModìLite (Elesta, Firenze) sia efficace e sicura





#### Clinical Outcomes of Patients with Symptomatic Benign Thyroid Hot Nodules Treated with PLA



Author	Pts/Nodules no.	RCT	US pattern. <sup>a</sup>	Mean Baseline Vol (ml)	Laser source	Number of session (mean)	FU months	Volume Reduction % (mean)
Dossing et al (2003)	1		solid	8.2	Diomed 15 plus, 810 nm	1	9	40
Spiezia et al (2003)	7		solid	3.2	Nd:Yag smart , 1064nm	2.2	12	74
Pacella et al (2004)	16			7.9	Nd:Yag smart , 1064nm	2.7	6	61
Barbaro et al (2007)	18			21.1	Nd:Yag smart , 1064nm	3 (median)	12	59
Dossing et al (2007)	14			26.2	Diomed 15 plus, 810 nm	1	6	44
Valcavi et al (2008)	1			2.5	Nd:Yag smart , 1064nm	1	_	95
Rotondi et al (2009)	1		solid	55.0	diode laser operating at 980 nm	4.0	10	91
Amabile et al (2011)	26			55.3	Quanta D-Plus, 980 nm	3		82
Chianelli et al ( 2014) laser + I131	15		solid	27.7	Echolaser, 1064nm	1.5	24	71

Pts=Patients; a uniformly solid or predominantly solid with not more than 20% fluid component



## Esperienza nel centro di Perugia

Roma, 9-12 novembre 2017

Volume Pre-T. 6 mesi 3 anni 3 mesi 1 anno (**ml**) *N* = 92 7,5 5,1 5,1 Mediana 12 5 (- 58%) (-38%) (- 58%) (- 59%) Minimo 5 1,2 1,1 1,2 1,2 42\* 30\* Massimo 278 191 107

\* II° trattamento



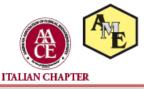


- La nostra esperienza suggerisce che i noduli tossici o pre-tossici, forse per la maggiore vascolarizzazione e quindi tendenza alla dispersione dell'energia termica somministrata, necessitano di energie maggiori per raggiungere la stessa efficacia, in termini di riduzione volumetrica, rispetto ai noduli non funzionanti.
- Il pre-trattamento con metimazolo, sia nei noduli tossici che in quelli pre-tossici, riduce la vascolarizzazione ed aumenta la possibilità di somministrare una dose adeguata di energia.
- Il 90% dei pazienti con noduli di volume inferiore a 15 ml sospendevano la terapia tireostatica, mantenendo un quadro di eutiroidismo









- *Efficace:* riduzione di volume superiore al 65% in una singola seduta
- Sicuro
- *Micro-invasivo:* procedura ambulatoriale della durata di pochi minuti









# Sono del tutto sovrapponibili a quelle della chirurgia tradizionale



	Thyroid: LA vs Surgery	Laser Ablation	Surgery		
Roma, 9-12 novembre 2	Endpoint	Remove or relief from compressive symptoms and or aesthetic damage	Remove compressive symptoms and or aesthetic damage	ITALIAN CHAPTER	
	How	Thermal destruction "in situ" with shrinkage of the nodule	Surgical removal of the mass (lobe or whole gland)		
	Advantage	Preservation of the healthy tissue and organ functionality	Definitive		
	Way to operate	Mini-invasive approach (inserting fine needles)	Incision of skin (3 cm or more) and excision of the gland		
	Anesthesia	No general anesthesia, no local anesthesia required	General anesthesia		
	Time duration	Shorter duration (30-45 minutes including patient's preparation)	Surgical procedure requires 2 hours		
	Recovery time	Fast recovery time (one hour)	One week		
	Signs Immediately After	Absence of signs	Surgical wound with sutures and drainage		
	Signs Long-time after	Absence of signs	Scar with risk of keloid formation; risk of discomfort in the neck		
	Hormone substituting therapy	Not required	Required for life		
	Pain	Absence or reduced postoperative pain	Mild to severe postoperative pain		
	Complications	Rare complications without affecting quality of life	Risk of severe complications affecting quality of life		
	Hospitalization	Day Hospital/ Outpatient	Hospitalization		
	Repeatibility	Can be easily repeated	Compromised repeatability in case of relapse	MODÌLite™	
	Further therapeutic action	Non compromising	Not applicable		







