

UNLOCKING THE COMPLEXITY: EXPLORING THE IMPACT OF INTRAOPERATIVE NEUROMONITORING AND HOSPITAL VOLUME ON VOCAL CORD PARALYSIS RATES IN FIRST-TIME THYROIDECTOMY FOR BENIGN DISEASE

Adegoke Tofunmi Francis.

College of Medicine, University of Ibadan, Nigeria.

Introduction:

Recurrent laryngeal nerve palsy (RLNP), leading to vocal cord paralysis (VCP), is a potential complication of thyroidectomy. Studies on the effectiveness of intraoperative neuromonitoring (IONM) in reducing VCP risk remain inconclusive. This large-scale multicenter study investigated the impact of IONM and other factors on VCP rates in first-time thyroidectomy for benign thyroid disease.

Materials and Methods:

Data from the EUROCRINE® registry (May 2015-January 2019) were analyzed via a secondary source. Patients undergoing first-time thyroidectomy for benign disease with postoperative laryngoscopy were included (n=4598). VCP diagnosis, IONM use, hospital volume, and other potential risk factors were evaluated.







Results:

Postoperative laryngoscopy was not routinely used for VCP assessment across centers. IONM was implemented in 91% of operations and significantly reduced VCP rates compared to non-IONM cases (0.9% vs. 3.1%, p<0.001). NONM facilitated intraoperative RLN damage detection (3.9% vs. 1.9% without IONM) and demonstrated association with both early and permanent VCP in theoretical models. However, limitations included IONM incomplete information on specific long-term VCP techniques and follow-up. Thyroiditis increased VCP risk, while higher hospital volume was associated with lower VCP rates.

Conclusion:

Despite non-uniform use of postoperative laryngoscopy, this study provides strong evidence that IONM is a common practice and significantly reduces VCP risk in first-time thyroidectomy for benign disease. Hospital volume also plays a crucial role in VCP rates. Further research is needed to explore long-term outcomes and the specific impact of different IONM techniques. RLN Damage Detection Rate (%)

Reference:

Staubitz J. I., Watzkaet F. , et al. Effect of intraoperative nerve monitoring on postoperative vocal cord palsy rates after thyroidectomy: European multicentre registry-based study. BJS Open. 2020 Oct; 4(5): 821–829.