Carcinoma of the thymus: modern views on diagnosis and treatment (literature review)

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ABSTRACT. Thymic carcinoma is a rare and aggressive malignant tumor that develops from the epithelial cells of the thymus gland (thymus). Unlike the more common thymoma, it grows faster and metastasizes to other organs more often. Tumor localized in the front part of the mediastinum (behind the sternum). In the early stages, complaints are often absent. As the tumor grows, the following symptoms may appear: chest pain or pressure, shortness of breath and persistent cough, hoarseness of voice or difficulty swallowing, swelling of the face and neck (superior vena cava syndrome). Computed tomography, magnetic resonance imaging, positron emission tomography – computed tomography and biopsy are used to identify the tumor and confirm the type of cells. The main method of treatment is complete removal of the tumor. Radiation therapy is used after surgery (adjuvant) to reduce the risk of recurrence, or as the main treatment for an inoperable process. Chemotherapy is prescribed to shrink the tumor before surgery or in the presence of metastases. The prognosis depends on the stage at the time of diagnosis and the possibility of complete removal of the tumor. The overall 5-year survival rate is estimated at 30-50 %. If the tumor is confined to the thymus, survival is significantly higher, while in metastases it drops to ~24-38 %. Thymic carcinoma has a high tendency to relapse, so patients need long-term follow-up.

KEY WORDS: thymus carcinoma, diagnosis, treatment, relapse, prognosis.