WebLog Journal of Endocrinology and Diabetes

Letter to Editor
Published: 10 Feb, 2026

Papillary Thyroid Carcinoma Revealing Cowden Syndrome: A Clinical Observation

Gorgi K[1] and Chaouche M[2]*

[1]Department of Endocrinology, CHP of Tata University Hospital, Rabat, Morocco

[2]Department of Dermatology, Mohammed VI University Hospital, Agadir, Morocco

Abstract

Cowden syndrome is a rare genetic disorder, often linked to PTEN gene mutations, characterized by a predisposition to various cancers. We report the case of a patient presenting with papillary thyroid carcinoma revealing the syndrome, highlighting the importance of early diagnosis and multidisciplinary management.

Text

Cowden syndrome is an autosomal dominant genetic disorder associated with PTEN gene mutations in most cases. This condition manifests with characteristic cutaneous and mucosal lesions and an increased susceptibility to several cancers, particularly breast, thyroid, and endometrial cancers [1, 2].

We present the case of a 40-year-old female patient with a family history of goiter and breast cancer, diagnosed with papillary thyroid carcinoma staged PT2 NX MX, at low risk of recurrence. Clinical examination revealed gingival papillomatous lesions and acral keratosis. The patient also reported prolonged menorrhagia and the presence of a breast nodule. Pelvic ultrasound identified multiple uterine fibroids, benign on histopathological examination. Excision of the breast nodule confirmed infiltrating carcinoma.

The diagnosis of Cowden syndrome was established based on two pathognomonic criteria (papillomatous lesions and keratosis) and three major criteria (thyroid and breast carcinomas, uterine fibroids) [3]. The patient was successfully treated with radioiodine therapy following thyroidectomy and received chemotherapy for breast cancer.

This case illustrates the necessity for heightened awareness of clinical manifestations suggestive of Cowden syndrome to enable early detection of associated cancers. Management must be multidisciplinary, involving endocrinologists, oncologists, surgeons, and geneticists.

Conclusion

Papillary thyroid carcinoma can be the inaugural sign of Cowden syndrome. Prompt diagnosis allows for optimal management and prevention of complications related to associated cancers.

References

1. Ngeow J, Eng C. PTEN Hamartoma Tumor Syndrome: Clinical Risk Assessment and Management Protocols. Methods. 2015; 77-78: 11-19.
2. Tan MH, Mester JL, Ngeow J, Rybicki LA, Orloff MS, Eng C. Lifetime cancer risks in individuals with germline PTEN mutations. Clin Cancer Res. 2012; 18(2): 400-407.
3. Pilarski R, Burt R, Kohlman W, Pho L, Shannon KM, Swisher E. Cowden syndrome and PTEN hamartoma tumor syndrome: systematic review and revised diagnostic criteria. J Natl Cancer Inst. 2013; 105(21): 1607-1616.

OPEN ACCESS

Correspondence:
Dr. Gorgi Khaoula, Department of Endocrinology and Metabolic Diseases, CHP of Tata University Hospital, Rabat, Morocco; Tel: 0615591874; E-mail: khaoulagorgi@gmail.com

Received Date: *08 Jan 2026*
Accepted Date: *09 Feb 2026*
Published Date: *10 Feb 2026*

Citation:
Gorgi K, Chaouche M. Papillary Thyroid Carcinoma Revealing Cowden Syndrome: A Clinical Observation. WebLog J Endocrinol Diabetes. wjed.2026.b1004. https://doi.org/10.5281/zenodo.18794900