



Thyroid Cancer

The thyroid gland is located in the neck and is part of the endocrine system. Thyroid cancer is more common in women than men and most cases occur between the ages of 25-65. It most commonly presents as a nodule.

There are several types of thyroid cancer:

- Papillary
- Follicular
- Hurthle cell
- Medullary
- Anaplastic

Papillary thyroid cancer is the most common type and has the most favorable prognosis with >95% 5 year survival for Stage I (localized) disease. Follicular cancer is next in frequency and prognosis. It can metastasize (spread) via the blood stream to bone. 5 year survival in Stage I is 70-90% depending upon the presence of any vascular invasion within the tumor. Mixed papillary and follicular cancer can occur and has a prognosis in between that of pure papillary and follicular cancer. Hurthle cell cancer carries a similar prognosis to follicular cancer. Medullary thyroid cancer may be hereditary or sporadic. Hereditary forms include: MEN (multiple endocrine neoplasia) and FMTC (familial medullary thyroid cancer). Anaplastic thyroid cancer is rare but very aggressive with a median survival of several months.

Underwriting considerations for thyroid cancer assuming successfully treated with no current evidence of disease and adequate routine follow-up care:

Papillary, Follicular without vascular invasion, and Hurthle cell types only

Stage I (localized)	1st year 2nd year 3rd year Thereafter	\$5x3 \$5x2 \$5x1 Non-rated
Stage II (lymph node +)	0-2 years 3rd year 4th year 5th year 6-10 years Thereafter	PP Table B + \$10x3 Table B + \$10x2 Table B + \$10x1 Table B Non-rated
Stage III (local cervical invasion)	0-3 years 4th year 5th year 6th year 7th year 8th year Thereafter	PP Table B + \$10x5 Table B + \$10x4 Table B + \$10x3 Table B + \$10x2 Table B + \$10x1 Table B

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Your Success Matters.

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Medullary type with normal follow-up calcitonin levels

Stage I only	1st year	PP
	2nd year	\$7.50x5
	3rd year	\$7.50x4
	4th year	\$7.50x3
	5th year	\$7.50x2
	6th year	\$7.50x1
	Thereafter	Non-rated

Follicular thyroid cancer with vascular invasion, Anaplastic thyroid cancer, Medullary thyroid cancer other than Stage I or with abnormal calcitonin levels and any Stage IV (distant metastasis) thyroid cancer would be a decline.

To get an idea of how a client with Thyroid Cancer would be viewed in the underwriting process, please feel free to use the Ask "Rx" pert underwriter on the next page for an informal quote.

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Thyroid Cancer - Ask "Rx" pert underwriter (ask our experts)

Producer _____ Phone _____ Fax _____

Client _____ Age/DOB _____ Sex _____

If your client has a history of Thyroid Cancer, please answer the following:

1. Please list date of diagnosis: _____

2. Type of Thyroid Cancer?

- Papillary Hurthle cell
 Follicular without vascular invasion Medullary
 Follicular with vascular invasion Anaplastic
 Mixed Papillary and Follicular

3. If medullary thyroid cancer,

a). have follow-up calcitonin levels been normal?

- yes, please provide lab result _____
 no, please provide lab result _____

b). any other endocrine tumors or disease?

- yes, please give details _____
 no

4. What Stage was the cancer?

- Stage I (localized) Stage III (local cervical invasion)
 Stage II (lymph node positive) Stage IV (distant metastasis)

5. Is your client on any medications?

- yes, please give details _____
 no

6. Has there been any evidence of recurrence?

- yes, please give details _____
 no

7. Has your client smoked cigarettes in the last 12 months?

- yes, please give details _____
 no

8. Does your client have any other major health problems (ex: heart disease, etc.)?

- yes, please give details _____
 no

After reading the Rx for Success on Thyroid Cancer, please feel free to use this Ask "Rx" pert underwriter for an informal quote.

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