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Bilateral Pheochromocytoma and Medullary Thyroid Carcinoma in a Middle-Aged Female: A Case of Multiple Endocrine Neoplasia Type 2A

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Abstract

Multiple endocrine neoplasia type 2A (MEN 2A) is a rare autosomal dominant disorder characterized by the co-existence of medullary thyroid carcinoma (MTC), pheochromocytoma and less commonly primary hyperparathyroidism. Here we present a case of a 43-year-old female who presented with recurrent hyperadrenergic spells along with sustained hypertension, bilateral loin pain and unintentional weight loss for 1 year. Physical examination revealed thyromegaly and hyperpigmented patches between interscapular region. Laboratory investigations showed elevated 24 hours urinary fractionated metanephrine, raised serum calcitonin and carcinoembryonic antigen along with normal serum calcium profile. CT scan of adrenal gland was suggestive of bilateral adrenal pheochromocytoma. Ultrasound thyroid gland demonstrated bilateral neoplastic nodules in both lobes of thyroid gland. A provisional diagnosis of MEN 2A was made. Bilateral adrenalectomy was done followed by total thyroidectomy with prophylactic central lymph node dissection. Her postoperative evolution was favourable. She is currently maintained on appropriate hormone replacement therapy. Genetic counselling was done, and family screening was advised. This case highlights the importance of early detection and timely surgical intervention in MEN 2A, which are pivotal for improving outcomes and enabling preventive family screening. *[J Assoc Clin Endocrinol Diabetol Bangladesh, 2025;4(Suppl 1): S55]*

Keywords: Pheochromocytoma, Medullary Thyroid Carcinoma, MEN 2A

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