

# SAFETY AND EFFICACY OF PERCUTANEOUS RADIOFREQUENCY ABLATION FOR TREATMENT OF HYPERPARATHYROIDISM

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## **Abstract body (should contain maximum 300 words)**

Purpose Surgical treatment of primary hyperparathyroidism (located single-gland adenoma) has evolved towards minimally invasive techniques. Percutaneous radiofrequency ablation (RFA) can be technically performed and may have a role as the least invasive parathyroid therapy. Method we have designed a prospective controlled trial including patients with primary hyperparathyroidism owing to a located single-gland parathyroid adenoma (cervical ultrasound concordant with parathyroid scintigraphy) treated with ultrasonographically guided RFA between March 2017 and October 2018. Results Our trial involved ten patients, three men and seven women aged between 28 and 88 years. All patients underwent ultrasonographically guided RFA of the adenoma under local anesthesia in ambulatory regime with predetermined circuit. The procedure was well tolerated and no complications were detected while in hospital observation period or during follow-up. All patients were followed according to a pre-established protocol and met criteria of cure morphological and functional with a minimum follow-up of three months, except for a patient with renal pathology in which remains elevation of parathormone with normal calcemia. Hypocalcemia or alterations of thyroid function were not detected during follow-up. Conclusions We consider that RFA is a safe and effective therapeutic alternative for the management of hyperparathyroidism owing to located single-gland parathyroid adenoma in selected patients. It allows a better management of resources in surgical waiting lists, avoiding surgical resections and general anesthesia, and allowing an earlier labour incorporation with minor sequelae and lower rate of complications.