

MANAGING YOUR THYROIDITIS

What Is Thyroiditis?

The thyroid is a small gland in the middle of the neck and is important for controlling metabolism. Thyroiditis is inflammation (irritation, swelling) of this gland. Inflammation may result in an overactive gland (called hyperthyroidism) or underactive gland (called hypothyroidism).

The most common type of thyroiditis is Hashimoto thyroiditis. About 10 times more women than men get it, up to 2% of women in the United States. Other types called subacute and silent thyroiditis can also result in an overactive thyroid. Postpartum thyroiditis occurs in women who were recently pregnant. Thyroiditis can lead to both overactive and under-active thyroid symptoms depending on its stage.

What Causes Thyroiditis?

Many things can cause thyroiditis. In the most common type, the body's own immune system attacks thyroid cells. The result may be high hormone levels (hyperthyroidism) followed by low hormone levels (hypothyroidism).

What Are the Symptoms of Thyroiditis?

Symptoms depend on the type of thyroiditis and how severe it is. The most common symptoms of acute disease in early stages are enlarged thyroid, sometimes pain and tenderness in the thyroid, and sometimes dry eyes and dry mouth. One type, painless thyroiditis, causes no pain. Symptoms of hyperthyroidism occur in silent, subacute, or early postpartum thyroiditis. They include weight loss, greater appetite, diarrhea, irregular periods, racing heartbeat, anxiety, heat sensitivity, and shaking. Hypothyroidism may cause weight gain, less appetite, constipation,

tiredness, depression, cold sensitivity, and weakness. In subacute thyroiditis, which occurs after a viral infection, an enlarged thyroid may cause neck pain and swelling. Postpartum thyroiditis may cause anxiety (hyperthyroid) and depression and fatigue (hypothyroid).

How Is Thyroiditis Diagnosed?

The health care provider takes a medical history, does a physical examination, and orders blood tests. These tests measure thyroid-stimulating hormone (TSH) and antithyroid antibodies. A special x-ray called radioactive iodine uptake (RAIU) may also be done.

How Is Thyroiditis Treated?

People treated with thyroid hormone will likely need lifelong therapy. People with Hashimoto disease take levothyroxine (thyroid hormone) to replace missing hormone.

Silent and subacute thyroiditis may go away without treatment or may need antiinflammatory medicines. These drugs include a nonsteroidal antiinflammatory drug (NSAID) or prednisone for pain. A beta-blocker such as propranolol or atenolol may be given for rapid heartbeats.

DOs and DON'Ts in Managing Thyroiditis

- ✓ **DO** follow-up with your health care provider. Thyroiditis changes over time and you usually change from being hyperthyroid to hypothyroid.
- ✓ **DO** learn about your type of thyroiditis. Find out whether you have an overactive or underactive gland.
- ✓ **DO** take your medicine as prescribed.
- ✓ **DO** tell your health care provider if you're pregnant or breastfeeding or want to become pregnant.

- ✓ **DO** call your health care provider if you have chest pain, chest pressure, or palpitations after starting thyroid hormone therapy.
- ✓ **DO** call your health care provider if you have a high fever or severe illness.
- ✓ **DO** call your health care provider if you have a reaction to medicine.
- ✓ **DO** call your health care provider if you feel sick even with treatment for several weeks.
- ⊗ **DON'T** expect an overnight response to treatment. You'll need 4 to 6 weeks before you begin to feel better.
- ⊗ **DON'T** exercise too hard if you have symptoms.

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FOR MORE INFORMATION

Contact the following sources:

- American Association of Clinical Endocrinologists: Tel: (904) 353-7878; Website:
<http://www.aace.com>

- American Thyroid Association: Tel: (718) 882-6047; Website:
<http://www.thyroid.org/patients/patients.html>

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