

Information for patients and carers

Hypothyroidism

Endocrinology



The thyroid gland is situated at the front of the neck. It makes two hormones thyroxine (T4) and triiodothyronine (T3), which are necessary for all the cells in your body to work normally.

What is primary hypothyroidism?

Primary hypothyroidism (underactive thyroid gland) occurs when there is a deficiency in the production of the hormone thyroxine from the gland.

What causes hypothyroidism?

The most common cause is damage to the thyroid gland and decreased function due to abnormal antibodies produced by the body. There may be a family history of this. Other possible causes include previous radioiodine treatment for an overactive thyroid gland. Occasionally hypothyroidism can be transient, e.g. post pregnancy or related to a viral infection.

What are the symptoms of hypothyroidism?

Common symptoms include tiredness, constipation, weight gain, dry skin, feeling cold, lack of concentration, poor memory and heavier menstruation in women.

How is hypothyroidism diagnosed?

A simple blood test measuring your thyroid hormone levels will confirm hypothyroidism. A non-invasive examination of your thyroid gland may also be carried out by your doctor.

What is the treatment for hypothyroidism?

The treatment is to take Levothyroxine (thyroxine) tablets each day. This replaces the thyroid hormone which your thyroid gland is not

making. Some foods rich in calcium or iron may interfere with the absorption of Levothyroxine from the gut. For the same reason do not take Levothyroxine tablets at the same time of the day as calcium or iron supplements. It is recommended that you take Levothyroxine at least 2 hours apart from calcium or iron supplements. Levothyroxine should be taken in a morning ideally 30 minutes before food and drink.

You will generally start on a low dose of Levothyroxine, and this will be increased over time. The dose of Levothyroxine you need to take will be determined by monitoring the level of thyroid hormone in your blood.

This is measured by having a simple blood test, which can be done at your GP practice. Often it takes a few months to achieve a stable dose of thyroxine and consequently you will notice gradual improvement in your symptoms over time.

How long will I need treatment?

The likelihood is that you will need life-long treatment with thyroxine. Once you are on a stable dose you will probably only require a blood test to check your thyroid function test every 12 months or so.

Are there any side effects of the medication?

At normal replacement doses it is very unusual to experience any side effects. As with any medication if you notice any unusual symptoms contact your doctor.

Contact details

Should you require further advice or information please contact Endocrine Specialist Nurse: **01772 523533**

Sources of further information

www.lancsteachinghospitals.nhs.uk
www.nhs.uk

www.patient.co.uk
www.accessable.co.uk
www.lancsteachinghospitals.nhs.uk/veteran-aware
www.btf-thyroid.org

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