

Thyroid Surgery

Information Brochure

Please keep this as a reference for after surgery

About the Thyroid:

The body contains several endocrine glands (thyroid, pancreas, pituitary, adrenal and parathyroid glands) which produce and release hormones into the bloodstream for various purposes. The thyroid gland produces a hormone that controls metabolism and other bodily functions. It consists of two lobes and is located in the lower portion of the neck, in front of the trachea (windpipe).

Indications:

Common disorders of the thyroid gland include overactive or underactive thyroid glands, nodules, and goiters.

- **Hyperthyroidism:** an overactive thyroid gland produces too much thyroid hormone in the body cause of hyperthyroidism include Graves' disease, nodules, goiters, thyroiditis
- **Hypothyroidism:** an underactive thyroid gland does not produce enough thyroid hormone to maintain normal body function, cause of hypothyroidism includes Hashimoto disease, thyroidectomy, thyroiditis, medications, too much/too little iodine, etc.
- **Thyroid nodules:** an abnormal growth of thyroid cells (cancerous or benign) within the thyroid
- **Goiter:** an enlarged thyroid which may result in a visible neck lump

Evaluation Prior to Surgery:

Thyroid problems can be evaluated or diagnosed through medical history, physical exam, blood tests, ultrasound, radioactive iodine uptake test, thyroid scan, and/or fine needle aspiration (biopsy).

Once the decision has made for surgery, a date will be arranged for the procedure. In some cases, the surgery can be performed on an outpatient basis with discharge from the surgery facility on the same day. Other cases may require a 23-hour observation stay in the surgical facility.

Prior to Surgery:

For at least ten days before any surgery, the patient should refrain from taking aspirin or medications that contain aspirin. Tylenol can be taken if necessary. In addition, if the patient is taking any other medications the doctor should be advised.

Risks and Complications:

Although rare, additional risks and complications can occur with thyroid surgery. These include bleeding, swelling, infection, difficulty breathing or swallowing, vocal cord weakness, and hypocalcemia.

The nerve that controls the vocal cords (recurrent laryngeal nerve) runs close to the thyroid gland and can be injured during or after surgery from swelling or stretching of the nerve. This can result in temporary vocal cord paralysis, causing hoarseness. Permanent vocal cord paralysis is rare and could require surgical treatment.

The parathyroid glands are very small glands that sit behind the thyroid and produce a hormone which controls the calcium levels in the bloodstream. If the parathyroid glands do not function

adequately after surgery, hypocalcemia, or low calcium levels in the blood can occur. This is typically temporary and can be treated with calcium and vitamin D supplements. Permanent hypocalcemia is rare and would require lifetime treatment with calcium and vitamin D supplements. Contact the office if the following symptoms of hypocalcemia occur: muscle cramps, numbness or tingling in the fingers, or twitching of the face.

During the week after surgery, if you experience any bleeding, fever, increased pain, swelling or drainage at incision site, or difficulty breathing or swallowing, contact the office.

After Surgery:

After thyroid surgery, Dermabond glue will cover the incision. Please wait approximately 48 hours before washing the incision site. When washing the incision site, do not use excessive pressure (from rubbing or water) on the site.

Due to a risk for hypocalcemia immediately after surgery, it is recommended that a calcium supplement (such as Tums) be taken for 10-14 days.

A thyroid replacement hormone will be prescribed by our office, your referring physician or endocrinologist. Additional blood tests may be necessary to monitor thyroid hormone levels.

A post-operative appointment to evaluate incision site and thyroid hormone levels (if applicable) will be scheduled at the office 10 days to two weeks after surgery.

If you have any questions or problems, call the office at (806) 791-0188.