

## Thyroid removal is safe and effective for Graves' disease

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(PhysOrg.com) -- Surgical removal of the thyroid isn't usually considered as the first option in treating Graves' disease, but a new University of Wisconsin-Madison study suggests that in experienced hands maybe it should be.

Graves' disease, also called <u>hyperthyroidism</u>, occurs when the <u>thyroid</u> <u>gland</u> at the base of the neck produces excessive hormones and speeds up the metabolism.

Graves' is one of the most common <u>autoimmune diseases</u>. Women are seven times more likely to develop Graves', which affects about 13 million people in the United States.

Patients with Graves' disease can experience weight loss, bulging eyes, and increases in appetite, <u>heart rate</u>, blood pressure, trembling and perspiration. Other symptoms can include a goiter or swelling at the base of the neck.

In the United States, sufferers are most often treated with drugs or with radioactive iodine to destroy the thyroid. Surgical removal of the thyroid is generally done only after other options fail.

The study followed 58 patients who had either a total or partial thyroidectomy at University of Wisconsin Hospital and Clinics between 1994 and 2008. Most of the patients had tried medical or radioactive iodine therapy, but those approaches failed to control the disease.



The researchers found that the total thyroidectomy had a very low complication rate and completely cured the Graves' disease.

"Surgery is an under-utilized option for patients with Graves'," says Dr. Rebecca Sippel, the lead author and assistant professor of surgery at the UW School of Medicine and Public Health. "Historically, patients have not been offered the option of surgery due to concerns about complications. Our study shows that the rate of permanent complications is very low."

Sippel suggests patients be offered the three options - medications, radioactive iodine, and surgery - and be educated about their pros and cons. Patients who undergo surgery need to find an experienced surgeon and must take thyroid hormone replacement medication for the rest of their lives.

"Surgery is not right for everyone, but I think if patients are presented with all the options, many would choose surgery as a first-line option," Sippel says. "Surgery is the most rapid method for obtaining definitive control of their disease."

Sippel's co-authors were Dr. Herbert Chen, professor of <u>surgery</u>; Sarah Schaefer, nurse practitioner; and medical students Jing Liu and Anna Bargren. The study was published online in the Journal of Surgical Research.

## Provided by University of Wisconsin-Madison

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