

Ultrasonography not necessary for evaluation of hypothyroidism

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(HealthDay)—Imaging studies, including thyroid ultrasonography, are

not required for the evaluation of hypothyroidism, and their risks include treatment of incidentally discovered nodules, patient and physician anxiety, and significant cost, according to a clinical review article published online Oct. 30 in *JAMA Internal Medicine*.

Arjun Gupta, M.D., from the University of Texas Southwestern Medical Center in Dallas, and colleagues examined the use of thyroid ultrasonography in the evaluation of laboratory thyroid abnormalities, highlighting the case of a patient diagnosed with primary [hypothyroidism](#).

The authors note that a thorough history, physical examination, and laboratory evidence of hypothyroidism are adequate to establish a diagnosis of hypothyroidism. Imaging studies, including ultrasonography, are not required, especially in the absence of palpable abnormalities of the [thyroid gland](#). Ultrasonography requests are often unnecessary; nodules detected during routine evaluation of hypothyroidism are unlikely to be related to the underlying thyroid hormone dysfunction and may detract from the true complaint and lead to patient anxiety. Incidental nodule discovery can lead to further testing and imaging. Recent years have seen an increase in the incidence of thyroid cancer, although the mortality rate has remained relatively stable at 0.5 per 100,000 person-years; these cancers may have remained slow-growing with no clinically significant health implications even if undiagnosed.

"In summary, the risks of unnecessary thyroid ultrasonography in the workup of hypothyroidism include the discovery, evaluation, and treatment of incidentally discovered [thyroid nodules](#); patient and clinician anxiety; and significant cost to the patient and health care systems," the authors write.

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