

# Study: Parathyroidectomy shows no effect on kidney function in older adults with hyperparathyroidism

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An emulated randomized trial performed using observational data from more than 43,000 adults with primary hyperparathyroidism found that

parathyroidectomy had no estimated effect on long-term kidney function in older adults when compared to observation. However, early parathyroidectomy may preserve kidney function in patients younger than 60 years of age with primary hyperparathyroidism. The study is published in *Annals of Internal Medicine*.

Primary hyperparathyroidism is a common endocrine disorder associated with an increased risk for [chronic kidney disease](#) (CKD). The only treatment is [surgical removal](#) of one or more abnormal parathyroid glands (parathyroidectomy). Current guidelines recommend parathyroidectomy in patients with primary hyperparathyroidism and CKD, in part to mitigate the risk for and effects of CKD progression. However, there are limited data documenting the association of parathyroidectomy with long-term kidney function to support this recommendation.

Researchers from the Stanford University School of Medicine studied 43,697 adults diagnosed with primary hyperthyroidism to compare the incidence of a sustained decline in estimated [glomerular filtration rate](#) (eGFR) of at least 50 percent for those treated with parathyroidectomy versus nonoperative management.

The researchers found that the weighted cumulative incidence of a sustained eGFR decline of at least 50 percent was 5.1 percent at 5 years, regardless of how primary hyperparathyroidism was managed. In the overall cohort, there was no difference in the adjusted rate of a sustained decline in eGFR among patients treated with parathyroidectomy versus nonoperative management. However, subgroup analyses indicated that patients younger than 60 years treated with early parathyroidectomy were more likely to preserve long-term kidney function.

According to the authors, these findings suggest that preservation of [kidney function](#) should not be a primary consideration when making

treatment decisions about parathyroidectomy in older adults with primary hyperparathyroidism and that focus on fracture risk and quality of life is more important in this group. However, clinicians should discuss the potential benefit of early parathyroidectomy to reduce the risk for CKD and associated complications in patients younger than 60 years who are diagnosed with primary hyperparathyroidism.

**More information:** Estimated Effect of Parathyroidectomy on Long-Term Kidney Function in Adults With Primary Hyperparathyroidism, *Annals of Internal Medicine* (2023). [DOI: 10.7326/M22-2222](https://doi.org/10.7326/M22-2222)

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