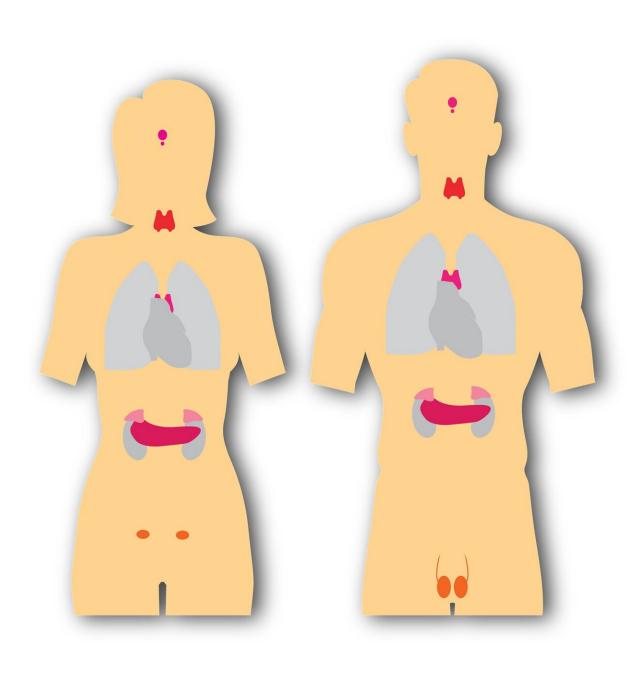


## Subclinical hypothyroidism in early pregnancy linked to higher risk of overt hypothyroidism

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A new study has shown that subclinical hypothyroidism diagnosed before 21 weeks of pregnancy is associated with more than fourfold higher rates of overt hypothyroidism or thyroid replacement therapy within 5 years of delivery. The study is published in the peer-reviewed journal *Thyroid*, the official journal of the American Thyroid Association.

Subclinical <u>hypothyroidism</u>, or a change in the levels of thyroid-stimulating hormone (TSH) that isn't severe enough to cause symptoms, is especially common during <u>pregnancy</u>, affecting as many as 1 in 4 pregnant people. While subclinical hypothyroidism isn't inherently dangerous, overt hypothyroidism comes with serious symptoms including fatigue, depression, and <u>heart problems</u>.

Michael Varner, MD, professor of obstetrics and gynecology in the Spencer Fox Eccles School of Medicine at University of Utah Health, and his co-authors reported that progression to overt hypothyroidism was more common in individuals with thyroid-stimulating hormone levels that were more than twice the normal level.

People with higher levels of antibodies against a thyroid enzyme, which can indicate that the body is mounting an autoimmune response against the thyroid, were also at higher risk of hypothyroidism within 5 years after delivery compared to those with lower levels of the antibody.

The investigators found that diagnosis of hypothyroxinemia, a deficiency in the thyroid hormone thyroxine, before 21 weeks of pregnancy was not



associated with the development of overt hypothyroidism after delivery.

"Studying the long-term associations of test results, as well as the impacts of our interventions, during pregnancy on the health and wellbeing of mothers and children is a particularly important aspect of clinical research in perinatal medicine," Varner says. "While the parent NICHD Maternal-Fetal Medicine Units Network trials from which our data are derived showed no difference in 5-year neurodevelopmental outcomes in children from prenatal treatment of either subclinical hypothyroidism or hypothyroxinemia, our data lend further evidence to the postpartum time period as a time when <u>autoimmune diseases</u>, in this case, hypothyroidism, are more likely to be present."

**More information:** Michael W. Varner et al, Progression of Gestational Subclinical Hypothyroidism and Hypothyroxinemia to Overt Hypothyroidism After Pregnancy: Pooled Analysis of Data from Two Randomized Controlled Trials, *Thyroid* (2024). DOI: 10.1089/thy.2023.0616

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