

Thyroidectomy

What is a Thyroidectomy?

A thyroidectomy is a procedure in which the doctor surgically removes all or part of the thyroid gland.

When is it used?

A thyroidectomy may be performed when you have an overactive thyroid gland, thyroid nodules, or cancerous cells in your thyroid gland. If your doctor suspects cancer, a sample will probably be taken from the gland at the time of surgery & sent to the lab for analysis. If cancer is confirmed, your thyroid gland will be removed.

Alternatives to this procedure include:

- Using thyroid medication; this may eliminate the benefit of a doctor being able to make a specific diagnosis.
- Using radioactive iodine isotope to treat an overactive thyroid.
- Needle aspiration on a nodule.
- Choosing not to have treatment while recognizing the risks of your condition.

You should ask your doctor about these choices.

How do I prepare for a thyroidectomy?

Discontinue any aspirin products or anti-inflammatory medications for 10 days prior to surgery. Plan for your care and recovery after the operation. Allow for time to rest & try to find other people to help you with your day – to – day duties. You may be off work for 7 – 10 days following the procedure.

Follow instructions provided by your doctor. Eat a light meal, such as soup or salad, the night before your procedure. DO NOT eat or drink anything after midnight or the morning of the procedure. DO NOT even drink coffee, tea or water.

What happens during the procedure?

A general anesthetic will be given to relax your muscles and keep you from feeling pain.

The doctor will make a cut in your neck & expose the thyroid gland. The doctor will clamp off part of the blood supply to the thyroid gland, remove all or part of the thyroid gland, and send it to the lab for immediate analysis.

When indicated, the doctor will receive a lab report during the procedure reporting whether that part of the thyroid is cancerous. Based on the results from the lab, the doctor may end the operation or may remove another part of the thyroid gland and close the cut.

What happens after the procedure?

You may be in the hospital for 1 or 2 days if half of the thyroid is removed, or longer if a total thyroidectomy is performed. You will have a scar on the front of your neck. If the doctor removed all or a large part of the thyroid gland, you will have to take hormone medication for the rest of your life.

Ask your doctor what steps you should take and when you should come back for a check-up.

What are the benefits of this procedure?

Nodules in the thyroid can be diagnosed as benign or malignant, cancerous tissue can be removed, overactive glands can be removed.

What are the risks associated with this procedure?

- There are some risks when you have general anesthesia. Discuss these risks with your doctor.
- Wound infection can occur in less than 5% of thyroid operations.
- Bleeding complications are possible, but uncommon unless a large goiter is present.
- The nerves near the thyroid may be injured. These nerves are necessary in order to speak normally. If the nerves are damaged, the damage may be permanent, and you voice may be permanently hoarse.
- The parathyroid glands may be injured in this operation. The hormones produced by these glands control the amount of salts in the blood, such as calcium. You need to have the correct level of calcium and phosphorus in your blood to have normal nerve and muscle function. If the parathyroid glands can not function after the operation, you may need treatment with calcium pills and / or hormones.
- If there was cancer, not all the cancer may be removed and further treatment will be necessary.
- The cancer may grow back.

You should ask your doctor how these risks apply to you.

When should I call the doctor?

CALL IMMEDIATELY IF:

- You develop a fever or have redness or increasing pain in the neck wound.
- You have difficulty breathing.
- You have uncontrollable muscle cramping, tingling around the mouth, or spasms of the hands or feet.

CALL DURING OFFICE HOURS IF:

- You have questions about the procedure or its results.
- You want to make a follow up appointment. Normally between 5 to 8 days after the surgery for suture or staple removal.

Pain Medication:

Other Medications:

Community ENT & Allergy:

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