



# Six Good Reasons to get your Thyroid Checked

by Sarah Maurer

If you've been feeling tired or down in the dumps, you might assume your symptoms are a natural part of getting older. But depression and fatigue are both prominent symptoms of hypothyroidism, a common condition that affects one out of every 10 to 20 Americans.

Thyroid disease is notoriously difficult to recognize because its most common symptoms are shared by so many other conditions. In fact, it's not unusual to have a thyroid condition for months or even years without noticing any symptoms at all. Often, thyroid problems are only diagnosed by accident when you're tested for a different condition.

Left untreated, thyroid problems can take a toll on your quality of life. In rare cases, they may even become life threatening. The good news is that with proper diagnosis and treatment, most patients continue to live healthy, productive lives.

## Thyroid 101

Your thyroid is a butterfly-shaped gland that sits at the base of your throat, just below your Adam's apple. Hormones secreted by your thyroid gland regulate a number of important processes in your body, including growth and metabolism.

In about 4 to 10 percent of the population,

the thyroid produces too little thyroid hormone, resulting in a condition called hypothyroidism. The most common cause is Hashimoto's disease, an autoimmune disorder in which the immune system attacks the thyroid. Hypothyroidism can also be caused by certain kinds of radiation treatments, surgeries and medications.

While hypothyroidism occurs in children and even in infants, the risk of developing the condition increases with age. Hypothyroidism is up to eight times more common in women than in men.

Too much thyroid hormone can be even more problematic than too little. Overactive thyroid, or hyperthyroidism, is a relatively rare condition affecting less than 1 percent of Americans. Most cases are caused by the autoimmune disorder Graves' disease. Like hypothyroidism, it's often confused with other health problems. Left untreated, it can result in life-threatening complications, including heart problems.

The thyroid gland can also develop growths and nodules. These may be harmless or may cause or aggravate other thyroid conditions. A small percentage of thyroid nodules are malignant, though these cancers are often quite treatable.

## When should I see my doctor?

Hypothyroidism and hyperthyroidism tend to affect the same body systems in opposite ways. In general, you should see your primary care physician for a thyroid screening if you notice:

1. **Fatigue.** Both hypothyroidism and hyperthyroidism can cause feelings of sluggishness. If you're tired after 8 to 10 hours of sleep or need a nap to make it through the day, see your doctor as soon as possible. "Fatigue can be the number one symptom of hypothyroidism, but it can also mean a multitude of other things," says Sheila Copple, D.O., an internist



Dr. Sheila Copple, Medical Clinic at Centerra

at Colorado Health Medical Group's Medical Clinic at Centerra in Loveland. Your primary care physician can screen you for thyroid problems and help to rule out more serious conditions like coronary artery disease.

2. Moodiness. Consider getting your thyroid checked if you feel sad or irritable on most days or if you've lost interest in activities you used to enjoy. People with untreated hypothyroidism may feel down or depressed, even when they're being treated with antidepressant medication or cognitive-behavior therapy. Unusual anxiety or feelings of panic may be symptoms of hyperthyroidism.
3. Weight gain or loss. If you've tried everything to slim down only to find yourself at the same weight or heavier, the problem really might be your hormones. People with hypothyroidism tend to put on weight due to their decreased metabolism. Conversely, people with hyperthyroidism may experience abrupt weight loss, even though they feel hungrier and eat more than usual.
4. Skin and hair problems. Dry, scaly skin and a pale, puffy face are common signs of hypothyroidism. Other red flags include brittle hair

and nails and hair loss, particularly a thinning at the outer edges of the eyebrows. People with hyperthyroidism may experience redness or itching of the skin and may sweat more than usual. Hair changes, including hair loss, can also signal too much thyroid hormone.

5. Haywire cholesterol levels. Take heed if your cholesterol screening comes back significantly higher or lower than usual, especially if you haven't changed your diet or exercise regimen. High cholesterol levels that don't respond to treatment with medication or lifestyle change may be a sign of hypothyroidism, while an overactive thyroid may cause your levels to dip sharply.
6. Swelling or fullness in the neck. Thyroid nodules and hormone imbalances force your thyroid gland to work extra hard. Over time, the gland may puff up, causing a swelling known as a goiter. This usually looks like a lump or fullness at the base of your throat, just below the Adam's apple. A goiter may also cause tightness in the throat, coughing or hoarseness. In some cases, goiters can make it difficult to breathe or swallow.

Other signs of a thyroid problem include irregular menstrual periods, constipation, frequent bowel movements, bone or joint pain, intolerance to heat or cold, rapid or sluggish heartbeat, hand tremors, eye problems and difficulty getting pregnant.

Thyroid issues tend to flare up during pregnancy, so women should be especially vigilant for symptoms during this time. "Often someone who might be thought to have postpartum depression or postpartum anxiety could actually have a thyroid problem," says Barbara Widom, M.D., with Colorado Health Medical Group's Endocrinology Consultants of Northern Colorado.

### Checking up on your thyroid

No one symptom indicates a thyroid problem, and some common thyroid symptoms could also indicate a more serious condition. If you have concerns about your thyroid, always discuss them with your primary care physician.

Thyroid problems are typically diagnosed by measuring your blood level of thyroid-stimulation hormone (TSH). This simple blood test can be performed in your primary care physician's office or even at a health fair. Your doctor may also order an ultrasound of your thyroid to check for growths or nodules.

Dr. Widom cautions that ads for unnecessary thyroid tests abound on the Internet. "You can read a lot in the lay literature that says you need other tests to screen for hypothyroidism, but the TSH test is sufficient for most people," she says.

Even if you're not experiencing symptoms, talk to your doctor to find out if you should be screened regularly for thyroid problems. Some physicians, including Dr. Copple, include thyroid tests in their preventative care regimen, while others screen only at-risk patients or people who experience symptoms. Preventative screening may be especially important if you have a personal or family history of thyroid problems or autoimmune disease, a history of radiation treatments, take certain medications

or have other risk factors.

If your test results indicate hypothyroidism, your physician will prescribe synthetic thyroid hormones to raise your hormone levels. These medications can be taken by mouth, are relatively inexpensive and have almost no side effects. "Most cases are very straightforward and can be handled in the primary care setting," Dr. Copple says. Patients diagnosed with hyperthyroidism or thyroid nodules may be referred to an endocrinologist for additional tests and treatment.

During thyroid hormone replacement therapy, your doctor will repeat your blood work every few weeks. While levels can take four to six months to stabilize, Dr. Copple says most patients can expect a very normal quality of life once their doses have been regulated.

Many patients even learn to recognize when their thyroid medications need an adjustment. "They'll get to a point where they'll come in and say, 'I think you need to check my thyroid because I think it's a little low again,'" says Dr. Copple. "And a lot of times they're right. Patients know their bodies." ❖

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Dr. Barbara Widom, Endocrinology Consultants of Northern Colorado