

INTRODUCTION

KNOW ABOUT

RISK

Subclinical Hyperthyroidism

MANAGEMENT

INTRODUCTION

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graph TD; A[INTRODUCTION] --> B["1. TSH - Low<br/>2. T4 & T3 - Normal<br/>3. Asymptomatic"]; C[RISK] --> D["41% increase in relative<br/>all-cause mortality"];
```

1. **TSH** - Low
2. T4 & T3 - Normal
3. Asymptomatic

RISK

41% increase in relative
all-cause mortality

Recheck in 2–4 months - persistence of Low TSH

- Check Non-thyroidal causes:
 - Illness
 - Pregnancy
 - Pituitary/Hypothalamic insufficiency - suspect if T4 or T3 low normal
 - TSH-suppressing medications (Thyroxine, Steroids)

TREAT IF

TSH < 0.1 mu/L & any of following

- Symptoms of Hyperthyroidism
- Atrial Fibrillation
- Unexplained Weight Loss
- Osteoporosis
- Goitre

Treat with:

- Carbimazole
- Propylthiouracil
- Radio-iodine

6 monthly follow up check up if no symptoms

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