

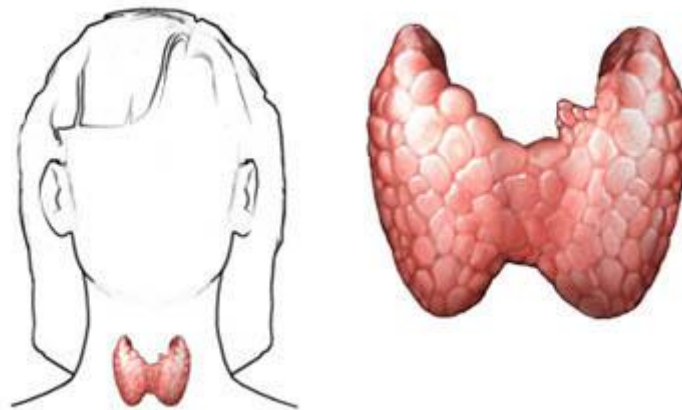
# THYROIDECTOMY

## Definition:

Surgical removal of all or part of the thyroid gland, which is the gland in the neck that produces hormones that regulate metabolism and calcium regulation. Removal of only one lobe of the thyroid is called thyroid lobectomy or partial thyroidectomy.

## Parts of the Body Involved:

Front of the neck and the thyroid gland:



All or part of the thyroid gland may be surgically removed for any of the following reasons:

- Mass or growth in the thyroid;
- Thyroid cancer.

### Rarely:

- Very large or toxic goiter (enlarged thyroid) due to hyperthyroidism;
- Overactive thyroid;
- Underactive thyroid (hypothyroid) with thyroid enlargement (goiter).

### Prior to Procedure

- Physical exam;
- Laboratory test e.g. thyroid function test and/or imaging test e.g. thyroid- ultrasound and scintigram;

- Thyroid medication (to suppress thyroid activity in patients with hyperthyroidism);
- Fine needle aspiration biopsy to determine if a tumor or nodule is cancerous (in some cases).

## **During Procedure**

- Anaesthesia;
- Breathing tube (intubation);
- Horizontal incision in the front of your neck;
- Anaesthesia – general.

## **DESCRIPTION OF PROCEDURE:**

A horizontal incision is made in the front of the neck. The skin is pulled away from the incision and held back with retractors. Bleeding vessels are clamped and tied off. The surgeon separates muscles, blood vessels, and nerves in the neck to access the thyroid gland. All or part of the thyroid gland is cut away from its attachment to other tissues in the neck and removed. Bleeding is controlled with instruments that compress, constrict, and cauterize the ends of blood vessels. The incision is closed and the edges of skin are stitched together.

When this gland is removed to treat thyroid cancer, lymph nodes in the area may also be removed in case the cancer has metastasized.

- **How Long Will It Take?**  
About one hour.
- **Will It Hurt?**  
Anaesthesia prevents pain during the procedure, but pain after the procedure is common.

## **After Procedure:**

- Dissolvable stitches are used. A dressing is placed over the wound;
- A small drain(plastic tubing) emerges from the skin to drain fluid and blood that collects;
- Discomfort in your neck for several days;

- Hoarse voice for a few days (in some cases)
- Thyroid medication (in many cases, including all cases of total thyroidectomy) to compensate for loss of thyroid function
- Radioactive iodine treatments (in some cases of thyroid cancer)

### **Possible Complications:**

- Infection;
- Bleeding ;
- Scarring ;
- Voice changes due to damage to nerves leading to the voice box (rare);
- Damage to the parathyroid gland, which controls calcium metabolism;
- Average Hospital Stay 2-3 days.

### **Postoperative Care:**

- Keep the incision clean and dry;
- The dressing can be kept on for 5 to 7 days. Only remove dressing if soiled or wet;
- Do not get the incision wet for 14 days, if it does get wet, dry it immediately;
- Do not apply make-up, lotion, or cream to the incision area;
- Take all medications as prescribed by your doctor.

### **OUTCOME**

The outcomes after surgery depend on the reason for thyroidectomy. If the thyroid was removed to treat a thyroid tumor, nodule, or excessive goiter, the outcomes include:

- Removal of cancerous tissue from the body;
- Improvement in swallowing or airflow that may have been compromised by an oversized thyroid gland.

## **CALL YOU'RE DOCTOR IF ANY OF THE FOLLOWING OCCURS**

- Numbness or tingling around the lips or extremities;
- Twitching or spasms;
- Excessive and progressive fatigue;
- Signs of infection, including fever and chills;
- Redness, swelling, increasing pain, excessive bleeding, or discharge from the incision site;
- Cough, shortness of breath, chest pain;
- Severe nausea or vomiting.



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