

## Endocrine Surgery Information Sheet

Endocrine Surgery refers to operations on one or more of the endocrine glands. These glands secrete hormones into the bloodstream and have an important influence over the functions of almost all cells in the body.

The **thyroid gland** is shield like organ located just below the larynx. It is a small gland that wraps around the trachea or windpipe. The gland converts iodine from the diet into the thyroid hormone, thyroxine. The levels of this hormone control most of your body's metabolic functions including temperature, heart rate & growth.

There are normally four **parathyroid glands** located near or attached to the back surface of the thyroid just below the larynx or Adam's apple. Each gland is no larger than a grain of rice. These glands secrete parathyroid hormone (PTH) which controls the calcium level in your body. After surgery your symptoms should improve. You should have less risk of permanent damage to your bones, kidneys or heart. Sometimes you can have medication if the calcium level is not too high or if surgery would be too dangerous because of other medical problems you may have.

The operation involves removing any enlarged glands. A normal gland that was not removed may become overactive many years later and you may need another operation.

Thyroid surgery may be required if there is a lump that could be a malignant tumour (cancer). This can be determined by a fine needle biopsy. A goitre (enlargement of the thyroid) causing difficulty swallowing, breathing or a persistent cough. Growth of your thyroid down into chest cavity or excessive activity (hyperthyroidism or thyrotoxicosis).

There are several **types of surgeries** that can be done:

**Total thyroidectomy** – the entire thyroid may be removed or just a single lobe, a portion of a lobe and the isthmus or other structures. If a total thyroidectomy is performed injury to the parathyroid glands may cause the calcium level in the blood to drop. It is treated with calcium & Vitamin D tablets and usually comes good in a few weeks

**Bilateral subtotal thyroidectomy (for thyrotoxicosis)** – the thyroid gland is a structure in your neck that produces a hormone called thyroxine, which regulates your body's metabolism. Your thyroid gland has become overactive and is producing too much thyroxine. This is called thyrotoxicosis and can lead to some distressing symptoms such as losing weight, tremors, sweatiness, being unable to cope with heat, difficulty sleeping and eye problems. After surgery the amount of thyroid hormones the gland produces should reduce to normal or low levels. You should no longer have any distressing symptoms. Alternatively, to surgery medications, such as carbimazole or propylthiouracil, can be used to control thyroid activity and are often used to begin with. However, these have side effects and for some people should not be used. Radioactive iodine can also be used for some people.

**Hemithyroidectomy** – removal of half the thyroid

**Excision of thyroid nodule** – removal of a lump from the thyroid

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### Consulting Locations:

Suite 402, John Flynn Specialist Suites \* Suite 8, Ground Floor, HQ Building, 58 Riverwalk Ave, Robina

### Operating Locations:

John Flynn Private Hospital \* Pindara Private Hospital \* Tweed Heads Public Hospital

**Thyroid surgery** is performed until a general anaesthetic. An incision is made in the front of the neck 2cm-3cm above the collarbone. The underlying muscles are divided to expose the thyroid gland which is removed in part or totally. Great care is taken not to injure the nerves which control the voice box (laryngeal nerves) and every attempt is made to preserve the parathyroid glands which control the body's calcium levels. The muscles are then put together again and the skin incision is closed with sutures that will dissolve.

Most surgery is safe however any operation has general risks including reactions to the anaesthetic, chest & wound infections, blood clots and heart & circulation problems. **Specific risks** associated with thyroid surgery include, post op bleeding with may cause swelling in the throat & difficulty breathing due to pressure on the windpipe. An injury to the laryngeal nerves may cause hoarseness of the voice, this is usually temporary but may be permanent in up to 1-2% of cases.

A keloid or overgrowth of scar tissue may form in any surgical scar, this can be treated if caught early with silicone gel or steroid injections.

You will remain in hospital for 2-3 days to ensure all of your medications are adequate and you are feeling well.

There are no restrictions to diet after surgery however you may feel soft foods for the first few days are more comfortable.

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Please feel free to contact us anytime should you have questions or concerns

**Skyl & Jayne - Practice Nurses**

**07 5598 0644**

**Monday – Thursday**

**[practicenurse@goldcoastsurgical.com](mailto:practicenurse@goldcoastsurgical.com)**

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