Department of Diabetes St Helens Hospital Marshall Cross Road St Helens WA9 3DA 01744 646200

#### **Further information?**

You can contact the Endocrinology Nurse Specialist with any questions you may have.

If your enquiry is for the endocrinology medical team please contact their secretaries through the hospital switchboard.

The Endocrinology Nurse Specialist

Tel: 07881 928 197

**Email address:** 

endocrinology.nurse@sthk.nhs.uk

Whiston Hospital Warrington Road, Prescot, Merseyside, L35 5DR Telephone: 0151 426 1600





# Drug Treatment of an Underactive Thyroid

This leaflet can be made available in alternative languages / formats on request.

如有需要,本传单可提供其他语言/版式 此單張的其他語言/格式版本可按要求提供 Na żądanie ta ulotka może zostać udostępniona w innych językach/formatach.

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### Does this leaflet relate to me?

If you have been diagnosed with a condition which means you have to take replacement thyroxine then this leaflet will provide you with information regarding your treatment.

# Why am I being offered it?

If the underactive thyroid is not treated you are:

- At an increased risk of developing heart problems
- Likely to develop shortness of breath following very little physical exercise.
- In danger of developing hearing loss

## How does the medication work?

You will have been started on a tablet for the treatment of an underactive thyroid called **Levothyroxine**. These tablets are a 'man made' synthetic replacement for the hormone thyroxine. Your body is unable to produce enough thyroxine to keep you healthy. This may be because your thyroid gland has failed to work properly or because you have had medical treatment for an overactive thyroid. If you have problems with your pituitary gland or you had a head surgery you may also need thyroxine replacement.

## How much should I take?

Your doctor should have given you clear information regarding the initial dose – if you weren't, please ask. Blood tests will be arranged to monitor thyroid activity. Your dose will be altered until your thyroid levels are normal. You will normally stay on this dose unless your thyroid activity changes or you become pregnant (see separate leaflet on Hypothyroidism in Pregnancy).

#### What if I take too much?

Too much levothyroxine medication can cause you to become hyperthyroid (over-active thyroid). You will be monitored every 8-12 weeks on initiation of treatment so your medication can be altered if you have become hyperthyroid. Some symptoms of becoming hyperthyroid are; tiredness, weight loss and loose stools. If you feel you have these symptoms, please contact the Endocrine Team who may request a blood test to check your thyroid.

#### What if I take too little?

If you take too little levothyroxine your symptoms will continue and may worsen. Eventually you will be at increased risk of heart problems, have chest pains with little physical effort and you may experience hearing loss.

# When should I take my medication?

Levothyroxine is given in tablet form and are to be taken each day as prescribed. To aid in absorption you need to take your tablet in the morning, with any other medication and at least 30 minutes before you have food.

# What happens if I miss a dose?

If you forget to take a dose of your Levothyroxine medication, take it as soon as you remember. However, do not take a double dose if your next dose is due.

# **Monitoring**

You will be monitored every 8 - 12 weeks until your blood results show that your thyroid level is normal. You will then be monitored every 3-6 months until you have been on treatment for approximately 12 months, then you will discharged back to your GP.