

Further information

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

We have a secure confidential answer machine available and email service for patients requiring advice from the Endocrinology Specialist Nurse.

Messages will be assessed and returned in priority order.

If your enquiry is a medical emergency please contact your own GP, NHS 111 or 999 or attend your local Accident & Emergency department.

Endocrinology Specialist Nurse:

Tel: 07881 928197

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

St Helens Hospital
Marshalls Cross Road,
St Helens, Merseyside, WA9 3DA
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Drug Treatment of an Underactive Thyroid

If you need this leaflet in a different language or accessible format please speak to a member of staff who can arrange it for you.

اگر به این بروشور به زبان دیگر یا در قالب دسترس پذیر نیاز دارید، لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formie, proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotowuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil, vă rog să discutați cu un membru al personalului să se ocupe de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式，请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أخرى، أو بتنسيق يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

Author: Endocrine Consultant
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Document Number: MWL2223
Version: 001
Review Date: 01 / 05 / 2027

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
- You will feel tired and lethargic and suffer with constipation.

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.

Please read the product insert which comes with your Levothyroxine tablets. If you are concerned about any potential interactions which Levothyroxine may have with any of the other medication you take including any over the counter preparations, please highlight this to your endocrinologist.

How much should I take?

Your doctor should have given you clear information regarding the initial dose – if you were not, 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?

You will be monitored every 12 weeks on initiation of treatment so your medication can be adjusted.

Some symptoms if your Levothyroxine dose is too high 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.

When should I take my medication?

Levothyroxine is given in tablet form and are to be taken each day. To aid in absorption you need to take your tablet in the morning, without 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 12 weeks until you are blood results show that your thyroid tests are normal and stable.

You will then require a thyroid blood test annually which will generally be arranged by your GP.