

Thyroid

Care of thyroid disease, including surgical removal of the thyroid is one of the major areas of Ear Nose and Throat training. The thyroid regulates the body's metabolism. It is kind of like setting the idle rate on your car. Thyroid nodules are very common, especially in women; and, most of the time, are of no consequence. However, these nodules can grow large enough that they compress the food pipe and airway and make it difficult to eat, drink, or even breath. This enlargement of the thyroid is called a goiter. There is also a chance these nodules could be one of four types of thyroid cancer. Any of these problems can lead to removal of half or all of the thyroid gland. Luckily the hormone the thyroid produces is one of the easiest to replace in the body. One pill a day should be able to get most people right back to normal hormone levels.

What is the thyroid needed for: The thyroid produces a hormone which is responsible for regulating the body's metabolism. It is kind of like setting the idle rate on your car.

Why do you remove the thyroid: It can be for enlargement or cancer. Cancer of the thyroid is fairly common, but does not always need to be removed as it is a slow growing cancer when it is small (but it usually is removed, for peace of mind). An enlarged thyroid is called a goiter. If this goiter enlarges enough it can cause compression of the food pipe, airway, or just look unsightly.

How do you remove the thyroid: A 3-4 inch incision is made in your neck. The incision is made in a natural skin crease so as to hide it better. A drain is usually brought out lower on the chest, but this is not always needed. You usually go home the next day.

What are the risks of thyroid surgery: The biggest risk is to a nerve called the recurrent laryngeal nerve. This nerve controls your vocal cords. If this nerve is cut you will have problems with your voice the rest of your life. I use a nerve integrity monitoring system to monitor your recurrent laryngeal nerve the entire case.

Important post-op instructions: You will likely spend a night in the hospital with a drain in place. This is usually removed the day after surgery. The most important thing to look for is any swelling at or just above the incision. Some swelling is normal, but if it gets too bad it can block off the airway. There is usually a single long suture that is removed a week after surgery.

Long term ramifications: The hormone that is produced by the thyroid is one of the easiest to replace. It usually takes a few months to identify the exact right dose, but once you do one pill a day will replace it.

How long does surgery last: The surgery usually will be about 1 ½ hours, but could easily be twice that long or more if there are problems.

