

Thyroid Problems and Having A Baby

What is the thyroid gland?

The thyroid is a butterfly shaped gland at the base of your neck. It produces two hormones, T3 and T4 and it is responsible for regulating the body's metabolism. It is regulated by a hormone called thyroid stimulating hormone (TSH). The thyroid can be underactive or overactive. Thyroid problems are relatively uncommon affecting approximately 5 in 100 people.

What is an underactive thyroid?

An underactive thyroid (hypothyroid) causes symptoms of feeling cold all the time, tiredness, lethargic, and weight gain. It is diagnosed by having a raised TSH level and low T4 and T3 levels. It is easily treated by taking a thyroxine tablet daily.

What is the effect of having an underactive thyroid on pregnancy?

It has been shown that having an untreated underactive thyroid reduces the chance of getting pregnant and increases the risk of miscarriage. Taking the correct dose of thyroid hormone brings both pregnancy rates and miscarriage rates back to normal. If you have been diagnosed with an underactive thyroid before becoming pregnant, current advice is to increase your dose of thyroxine once you have conceived. It is essential to contact your GP urgently if you fall pregnant so that they can advise you on the dose of thyroxine tablets to take during pregnancy.

What is an overactive thyroid?

An overactive thyroid is much less common and can cause symptoms of palpitations (fast heart rate), losing weight, and trembling. It is diagnosed by having a very low TSH level and a high level of T4.

What is the effect of an overactive thyroid on pregnancy?

The effect of an overactive thyroid on pregnancy isn't clear and most women will still continue to release an egg regularly so it shouldn't reduce the chance of pregnancy. It is very important to discuss your plans to get pregnant with the doctor monitoring your treatment as you may need some changes to your medication. You shouldn't try to get pregnant for 6 months after radioactive iodine treatment.

What is subclinical hypothyroidism?

Subclinical hypothyroidism does not cause symptoms and is diagnosed when the TSH is in the upper part of the normal range but the T4 levels are normal.

What is the effect of subclinical hypothyroidism on pregnancy?

There is evidence that subclinical hypothyroidism caused by the development of antibodies against your thyroid gland may reduce the chance of pregnancy and increase the risk of miscarriage because your body is less likely to be able to respond to the additional need for thyroid hormone during pregnancy. Taking a low dose of thyroxine hormone to bring TSH levels down below 2.5 brings both pregnancy and miscarriage rates back to normal. Your fertility doctor may recommend starting thyroxine treatment before starting fertility treatment if you have a positive antibody test as well as a TSH above 2.5. You would be asked to recheck your TSH level after 6-8 weeks. If you fall pregnant then you are advised to continue the thyroxine at the same dose and to get your TSH levels repeated. Your GP or Obstetrician may recommend adjusting the dose, continuing at the same dose throughout pregnancy, or stopping the treatment after 12 weeks gestation.

Are there any risks with thyroxine treatment?

Thyroxine, especially in the small doses used for subclinical hypothyroidism, is unlikely to cause side effects. The possible side effects include tremors, palpitations, anxiety, and restlessness including insomnia but these are usually signs that you are taking too high a dose

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of the medication. If you have any concerns you should contact the doctor who prescribed the thyroxine for you.

Where can I get further information?

Further information about thyroid problems and thyroxine treatment can be found on the NHS website: <https://www.nhs.uk/conditions/> or from your fertility doctor or GP.

For more answers to frequently asked questions, please visit our website
www.fertilityexeter.co.uk

Feedback

Here at Fertility Exeter, we care about getting things right for our patients. As such we would welcome any feedback that you may have, to help us continually improve the services we provide. You can do this in several ways:



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“What went well could go better if”

These are yellow cards and you will find them in our waiting area, please complete them and put them in the box provided. The box is sorted every week and suggestions are acted on accordingly.

Alternatively:

★ Complete our Patient Surveys on our website www.fertilityexeter.co.uk

★ See our Patient Survey links in our emails.

<p>You can also provide feedback about Fertility Exeter directly to the HFEA by using their online feedback tool:</p> <p>https://www.hfea.gov.uk/choose-a-clinic/rate-your-clinic/</p>	
<p>Royal Devon & Exeter Hospital (Heavitree) Gladstone Road Exeter EX1 2ED</p> <p>Tel: (01392) 40 5051 e-mail: rduh.fertilityexeter@nhs.net www.fertilityexeter.co.uk</p>	

