

## MEDICAL MONDAYS | News Notes

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**TOPIC: Thyroid Surgery**

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### Thyroid Surgery Overview

[Thyroid surgery](#) is used to treat [thyroid nodules](#), [thyroid cancer](#), and [hyperthyroidism](#). During this procedure, part or all of the [thyroid gland](#) is removed.

During surgery, an incision is made in the [skin](#). The muscle and other tissues are pulled aside to expose the [thyroid](#) gland.

### What To Expect After Surgery

Many people leave the hospital a day or two after surgery. How much time you spend in the hospital and how fast you recover depend on your age and general health, the extent of the surgery, and whether [cancer](#) is present.

### Why Surgery?

Surgery is used to treat [thyroid problems](#) if:

- [Thyroid cancer](#) is present or is suspected.
- A noncancerous (benign) nodule is large enough to cause problems with breathing or swallowing.
- A fluid-filled (cystic) nodule returns after being drained once or twice.
- [Hyperthyroidism](#) cannot be treated with medicines or radioactive iodine.

Surgery is rarely used to treat hyperthyroidism. It may be used if the [thyroid](#) gland is so big that it makes swallowing or breathing difficult or thyroid cancer has been diagnosed or is suspected. Surgery also may be done if you are [pregnant](#) or cannot tolerate antithyroid medicines.

You may have all or part of your [thyroid](#) gland removed, depending on the reason for the surgery.

- Total thyroidectomy. Your surgeon will remove the entire gland and the [lymph nodes](#) surrounding the gland. Both sections (lobes) of the thyroid gland are usually removed. If you have thyroid cancer, additional treatments with [thyroid-stimulating hormone](#) (TSH) suppression and radioactive iodine work best when as much of the thyroid is removed as possible.
- Thyroid [lobectomy](#) with or without an isthmectomy. If your [thyroid nodules](#) are located in one lobe, your surgeon will remove only that lobe (lobectomy). With an isthmectomy, the narrow band of tissue (isthmus) that connects the two lobes also is removed. After the surgery, your nodule will be examined under a microscope to see whether there are

any [cancer](#) cells. If there are [cancer](#) cells, your surgeon may perform a completion thyroidectomy.

- Subtotal (near-total) thyroidectomy. Your surgeon will remove one complete lobe, the isthmus, and part of the other lobe. This is used for hyperthyroidism caused by [Graves' disease](#).

Some surgeons are now doing endoscopic thyroidectomies using several small incisions through which a tiny camera and instruments are passed.

## How Well It Works

Success of a thyroidectomy to remove thyroid cancer depends on the [type of cancer](#) and whether it has spread (metastasized) to other parts of the body. You may need follow-up treatment to help prevent the cancer from returning or to treat cancer that has spread.

## Risks

Thyroid surgery is generally a safe surgery. But there is a risk of complications, including:

- Hoarseness and change of voice. The nerves that control your voice can be damaged during thyroid surgery. This is less common if your surgeon has a lot of experience or if you are having a lobectomy rather than a total thyroidectomy.
- [Hypoparathyroidism](#). [Hypoparathyroidism](#) can occur if the [parathyroid glands](#) are mistakenly removed or damaged during a total thyroidectomy. This is not as common if you have a lobectomy.

## Things to Consider

If you have a total thyroidectomy, you will develop [hypothyroidism](#) and need to take man-made (synthetic) thyroid hormone for the rest of your life. If you have a lobectomy or subtotal thyroidectomy, you may have [hypothyroidism](#) and you may need to take thyroid medicine for the rest of your life.

You will most likely be treated with radioactive iodine after surgery for thyroid cancer to make sure that all the thyroid tissue and cancer cells are gone.

You may have a lobectomy, with or without isthmectomy, if your doctor suspects that a nodule may be cancerous. If you do have cancer, a surgeon usually will do a completion thyroidectomy.

After surgery for hyperthyroidism, some people will have low [calcium](#) levels and may need to take [calcium supplements](#).

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