



CODEN [USA]: IAJPBB

ISSN : 2349-7750

**INDO AMERICAN JOURNAL OF
PHARMACEUTICAL SCIENCES**

SJIF Impact Factor: 7.187

<https://doi.org/10.5281/zenodo.8349111>Available online at: <http://www.iajps.com>

A Report

THYROID AND THYROIDECTOMY: A REPORT**Amna Akbar¹, Shahan Saleem², Sarosh Khan Jadoon^{*3}, Sabahat Tasneem⁴,
Shaheen Assad⁵**¹Medical Officer, District Headquarter Hospital, Hattian Bala, AJK, Pakistan,
amna.akbar1324@gmail.com, <https://orcid.org/0009-0009-6560-5493>²Consultant Plastic and Reconstructive Surgeon, Jinnah Hospital Lahore, Pakistan,
Dr.shahan97@gmail.com, <https://orcid.org/0009-0002-4034-3131>³Resident surgery, CMH/SKBZ, JK Muzaffarabad, Pakistan, saroshkhanjadoon@outlook.com,
<https://orcid.org/0000-0002-1728-2599>⁴Public Health (MSPH), Health Services Academy, Islamabad, Pakistan,
tasneem.saba30@gmail.com, <https://orcid.org/0009-0004-4947-8213>⁵Student (Health and Social Sciences), Bucks university United Kingdom,
Shaheenassad@gmail.com**Abstract:**

The thyroid gland is a small butterfly-shaped gland located in front of the neck. It secretes hormones called thyroid hormones that regulate almost every function of the body. Enlargement of the thyroid gland is called goiter; also called "giller" or "ghudood" by the natives. Thyroidectomy is the surgical removal of all or part of the thyroid gland. It is performed for various reasons, such as cosmetic, functional, or oncological. Thyroidectomy is a challenging surgery that poses a major burden to the healthcare system in under-developed areas like Muzaffarabad, Azad Kashmir. Funding for investigations and procedure should be made available in each healthcare setup to investigate and treat the goiter in time. Proper training of surgeons as well as staff is also required to make thyroidectomy less challenging.

Corresponding author:***Sarosh Khan Jadoon,**

Resident surgery, CMH/SKBZ,

JK Muzaffarabad, Pakistan,

saroshkhanjadoon@outlook.com,<https://orcid.org/0000-0002-1728-2599>

QR code



Please cite this article in press Sarosh Khan Jadoon et al, *Thyroid And Thyroidectomy: A Report*, Indo Am. J. P. Sci, 2023; 10 (08).

THYROID:

The thyroid gland is a small butterfly-shaped gland located in front of the neck. It secretes hormones called thyroid hormones that regulate almost every function of the body. Enlargement of the thyroid gland is called goiter, also called “giller” or “ghudood” by the natives. Thyroidectomy is the surgical removal of all or part of the thyroid gland. It is performed for various reasons, such as cosmetic, functional, or oncological. Thyroidectomy is a challenging surgery that poses a major burden to the healthcare system in under-developed areas like Muzaffarabad, Azad Kashmir.

Causes of Goiter

The most important cause of goiter is iodine deficiency. Other causes include autoimmune diseases (Grave’s disease or Hashimoto’s disease), infections, thyroid tumors (benign and malignant), and certain foods called “goitrogen-rich foods” that can interfere with thyroid hormone production (such as broccoli, cauliflower, soy products, cabbage and turnip)¹

Indications for Thyroidectomy

Thyroidectomy is performed due to many factors including:

- Cosmetic reasons
- Pressure symptoms (such as breathing or swallowing difficulties)
- Risk of malignancy
- Retrosternal extension (when the goiter grows behind the sternum)
- Lack of response to medical treatment

Types of Thyroidectomy:

Thyroidectomy can be partial or complete, depending on how much of the thyroid gland is removed. The types of thyroidectomy are²:

Type	Description
Lobectomy	Removal of one lobe of the thyroid gland
Subtotal thyroidectomy	Removal of most of the thyroid gland, leaving a small amount behind
Total thyroidectomy	Removal of the entire thyroid gland

Challenges of Thyroidectomy: Thyroidectomy is a challenging surgery irrespective of the cause leading to it. The challenges can be broadly divided into three categories: patient-related, thyroid-related, and surgeon-related.

Patient-related factors:

Patient-related factors play an important role in determining the outcome and complications of thyroidectomy. Some of these factors are:

- Late presentation to a healthcare facility leading to complications
- Lack of awareness regarding the severity and prognosis of the disease
- Urge towards spiritual and homeopathic management
- Lack of healthcare facilities in urban and rural areas
- Cost of investigations and treatment
- Age, obesity and short neck length of the patient
- Noncompliance to anti-thyroid drugs before surgery

Thyroid-related factors

Thyroid-related factors affect the technical difficulty and risk of injury during surgery. Some of these factors are:

- Vascularity of the gland
- Size and shape of the gland
- Involvement of surrounding structures (such as nerves, vessels, and muscles)
- Presence of malignancy or inflammation

Surgeon-related factors

Surgeon-related factors influence the skill and experience of performing thyroidectomy. Some of these factors are:

- Lack of proper training and specialization in endocrine surgery
- Lack of resources and equipment
- Lack of trained staff and assistants³⁻⁶

CONCLUSION:

Thyroidectomy is a common but challenging surgery that requires careful evaluation and management. All the factors discussed above need to be emphasized on individual basis. Awareness programs should be arranged to highlight the importance of thyroid and its related problems. Timely referral for further workup should be encouraged to all patients with goiter reporting to periphery health setups with any complaint. Funding for investigations and procedure should be made available in each healthcare setup to investigate and treat the goiter in time. Proper training of surgeons as well as staff is also required to make thyroidectomy less challenging.

REFERENCES:

1. Mayo Clinic. (2020). Thyroidectomy. Retrieved from <https://www.mayoclinic.org/tests-procedures/thyroidectomy/about/pac-20385195>
2. StatPearls Publishing. (2021), Thyroidectomy, Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK563279/>

3. Kowalska A., & Walczyk A. (2013). Modern surgical techniques of thyroidectomy and advances in the postoperative care: A review article. *Cancers*, 15(11), 2931–2947. <https://doi.org/10.3390/cancers15112931>
4. Vasileiou, M., Gilbert, J., Fishburn, S., Boelaert, K., & Guideline Committee (2020). Thyroid disease assessment and management: summary of NICE guidance. *BMJ (Clinical research ed.)*, 368, m41. <https://doi.org/10.1136/bmj.m41>
5. Thyroidectomy - UpToDate
6. Cleveland Clinic. (2020). Thyroidectomy. Retrieved from: <https://my.clevelandclinic.org/health/treatments/7016-thyroidectomy>