ABOUT THE NEW YORK THYROID CENTER

The New York Thyroid Center is dedicated to providing superior medical care and education for patients with thyroid disease. Our members research causes and treatments, as well as develop prevention programs for thyroid diseases. Founded by the esteemed pioneer in thyroid and parathyroid surgery, Dr. Paul LoGerfo, the Center evolved from a long-standing thyroid clinic, which was established at Columbia Presbyterian Medical Center more than 60 years ago. Members of this clinic and subsequently the Center include endocrinologists, surgeons, radiologists, pathologists, and ophthalmologists who are leaders in the classification, treatment and identification of thyroid and parathyroid disorders. Their efforts also extend to the medical community so that the standard of care for all thyroid patients may be improved worldwide. Although our Center is based in New York, we provide a referral service to specialists across the United States. Please see our website for more information on our center, as well as extensive information on thyroid disease and thyroid surgery.

www.cumc.columbia.edu/dept/thyroid

THE NEW YORK THYROID CENTER
Columbia University College of Physicians & Surgeons New York Presbyterian Hospital

Center for Research, Education and Treatment of Thyroid Disorders

Post-Operative Instructions for THYROID AND PARATHYROID SURGERY

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Monitoring Your Progress
You should feel improvement every day after surgery. If you have any questions regarding your progress, call your surgeon. Be sure to make an appointment to see your surgeon 3 weeks after your surgery.

Incision
Your incision is covered with a protective strip of clear glue called collodion. You can shower and wash your hair as usual, but do not soak or scrub the incision. After showering, use a cool hair dryer to dry the incision. The collodion will turn white and start curling up at the edges in about 5 to 7 days. When this happens, you can pull it off or wait until it falls off on its own. If you experience itching once the collodion is off, you may apply lotion to the scar. You might notice bruising around your incision or upper chest and slight swelling above the scar when you are upright. In addition, the scar may become pink and hard. This hardening will peak at about 3 weeks and may result in some tightness or difficulty swallowing, which will disappear over the next 3 to 6 months.

Thyroid Hormone Tablets
If you were taking thyroid hormone tablets before your operation, continue with the same dose, unless your surgeon changes your dose. If you were not taking thyroid hormone prior to your operation, your surgeon may prescribe these tablets following thyroid surgery and you may need to take them on a permanent basis. During your postoperative visit, you may have a blood test to measure your levels of thyroid hormone and your dose of medication may be adjusted accordingly. Your thyroid hormone levels will then be measured about every 2 months until your hormone levels are stable (levels generally stabilize in 4 to 5 months).

Pain
The main complaint following surgery is pain with swallowing. Some people experience a dull ache, while others feel a sharp pain. This should not keep you from eating anything you want, but the pain can be annoying for a day or two. Motrin or Tylenol can generally control this pain, unless your doctor asks you not to or if you have a pre-existing medical condition (such as ulcers or liver disease). Taking Motrin or Tylenol every 6-8 hours (as the ‘bottle directs’) for the first few days after the operation should control most of the pain. In addition, you will be given a prescription for a mild painkiller such as Tylenol with codeine.

Voice
The vast majority of people will notice no change in their voice. However, your voice may go through some temporary changes with fluctuations in volume and clarity (hoarseness). Generally, it will be better in the mornings and “tire” toward the end of the day. This can last for variable periods of time, but should clear in 8-10 weeks. If you are hoarse, speak to your surgeon about what you can expect. Rarely, your voice will be permanently affected.

Cough
If your operation was done under general anesthesia, you may feel like you have phlegm in your throat. This is usually because there was a tube in your windpipe while you were asleep that caused irritation that you perceive as phlegm. You will notice that if you cough, very little phlegm will come up. This should clear up in 4 to 5 days.

Movement
It is a normal reaction to tighten your shoulder muscles when you have pain in your neck but it is important to keep these muscles relaxed. To do this, move your head as normally as you can and relax your shoulders. Most other types of routine exercise can be started 7 days after surgery. Ask your physician if you have questions regarding a specific exercise.

Hypocalcaemia
In about 8% of patients who have their total thyroid removed, the parathyroid glands do not function properly immediately after thyroid surgery. This can also happen after parathyroid surgery and is usually temporary and is the result of the blood calcium level dropping below normal (hypocalcaemia). Symptoms of hypocalcaemia include numbness and tingling in your hands, soles of your feet and around your lips. Some patients experience a “crawling” sensation in the skin, muscle cramps or severe headaches. These symptoms appear between 24 and 48 hours after surgery. It is rare for them to appear after 72 hours.

Symptoms can generally be prevented by taking 1000 mg of calcium 4 times daily for 7 days after surgery (Tums, Caltrate or Cascal with Vitamin D). After the seventh day, reduce calcium to 1000-1200 mg daily. If symptoms develop, you should take extra calcium and call your doctor as soon as possible. We also recommend a multivitamin such as Centrum for premenopausal women andCentrum Silver for all other patients.

Bleeding
It is common to have some bruising around the incision area. A lot of swelling and/or drainage should be reported. This is extremely rare but if it does occur, go to the emergency room near you as soon as possible and have your physician paged.

Bone Health
Patients who are taking thyroid hormone tablets or who have a history of parathyroid disease should take 1000-1200 mg of calcium daily and 400 to 600 IU of vitamin D daily to promote healthy bones. In addition to these supplements, an exercise routine using weights is also recommended.