

Post-Operative Instructions for Thyroid Surgery

- Questions: call the office on [\(03\) 9347-8786](tel:(03)9347-8786)
- After hours emergency: A/Professor Miller's mobile - emergency only please

Below are general instructions for patients who have had thyroid or parathyroid surgery. Since individual circumstances may vary, it is important that you discuss your individual post operative care with us.

Monitoring Your Progress

You should feel improvement every day after surgery. If you have any questions regarding your progress, call my office. You should make a follow up appointment approximately 2 weeks after your surgery.

Incision

Your incision is covered with a waterproof protective dressing. You can shower and wash your hair as usual, but do not soak or scrub the dressing. After showering, pat dry. A visible dark line is expected, and will come off with the dressing.

In patients prone to keloids, I use skin glue rather than sutures. The glue eventually flakes off by itself.

Your dressing will be removed at your first postoperative visit. If you experience itching once the dressing is off, you may apply lotion to the scar. I recommend keeping Micropore tape on the scar (available at any pharmacy) for about 6 weeks. It will help the scar fade more quickly. Change it every 7-10 days. You might notice bruising around your incision or upper chest and slight swelling behind the scar when you are upright. In addition, the scar may become pink and hard, and your throat may feel tight. 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 4 months. You will also notice some numbness of the skin of your neck. This will gradually improve over time.

Pain

The main complaint following thyroid surgery is discomfort 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 few days. Nurofen and/ or Panadol is generally enough to control this pain. Some people prefer Panadeine, but in general, stronger medications are not necessary for long. 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.

Beginning five days after the operation, massage the scar for five minutes when you wake up, five minutes in the middle of the day, and another five minutes when you go to bed. There is good evidence that wound massage reduces pain and improves healing. Turn your head and roll your shoulders several times daily to avoid stiffness.

Thyroid Hormone Tablets

If your whole thyroid was removed, you will be prescribed thyroid hormone tablets following surgery. Six weeks after the operation, you will 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 stabilise within 4 to 5 months). If you had half your thyroid removed, you will need a blood test 6 weeks after surgery to see if the remaining half is working well enough. If your thyroid hormone levels are too low, you may need thyroid tablets.

Voice Changes

Your voice may go through some temporary changes with fluctuations in volume and clarity (hoarseness). Temporary changes are quite common. Generally, it will be better in the mornings and "tire" toward the end of the day. This can last for variable periods of time, and should clear in 4-6 months at most, but often sooner. There is a small (1/100) risk of permanent hoarseness. There is a higher chance your singing voice will be affected.

Hypocalcaemia after total thyroidectomy – tingling and numbness of fingers and toes

In up to 50% of patients who have a total thyroidectomy, the parathyroid glands do not function properly immediately. This is usually temporary and causes the blood calcium level to drop below normal (hypocalcaemia). Symptoms of hypocalcaemia include numbness and tingling in your hands, soles of your feet and around your lips, and can become quite unpleasant. Some patients experience a "crawling" sensation in the skin, muscle cramps or headaches. These symptoms appear between 24 and 48 hours after surgery. It is rare for them to appear after 72 hours. ***Low blood calcium does not occur if only half the thyroid is removed.***

Hypocalcaemia is treated with calcium tablets. If you are having a total thyroidectomy, I will check your parathyroid hormone (PTH) before you leave hospital. If it is low, I will send you home with calcium (big white pills) and calcitriol (little orange/red pills), which will usually be temporary. If you develop tingling in the fingertips, toes, or lips, your calcium maybe low. Take two extra caltrate tablets (there is no danger in taking it, even if you do not need it) The symptoms of tingling/numbness should improve within 30-45 minutes of taking the tablets. If the symptoms persist, you should take two more tablets and wait another 45 minutes. If they still persist after 3 extra doses, call my office in working hours, or after hours report to your nearest emergency room to have your blood calcium checked.

Please keep us informed, and keep a record of the amount required. The hypocalcaemia usually disappears over a few weeks to months. In some cases (about 2% of all total thyroid operations),

the parathyroid glands do not recover. If that happens, you will need to continue taking calcium tablets permanently, but typically not as many tablets as you needed in the first few weeks.

Bone Health

Patients who are taking thyroid hormone tablets or who have a history of parathyroid disease should consider taking Caltrate Plus twice daily to promote healthy bones. In addition, an exercise routine using weights is also recommended.

CONTACT MY OFFICE for any of the following symptoms:

- Fever >38.3 or chills
- Increasing pain or redness around incision
- Difficulty breathing
- Tingling around the lips or fingertips not relieved by extra calcium tablets
- Severe muscle cramps

AN IMPORTANT WORD ABOUT THE COSTS OF TREATMENT

Insurance rebates have not kept pace with the cost of running a medical practice. As a consequence, there will be a gap to pay for the surgical fee and for the anaesthetist. Your insurance company might also charge you an excess for a hospital admission. We will advise you about expected out-of-pocket costs not covered by insurance. If these costs represent an undue hardship for you, please discuss them with us.

ASK YOUR DOCTOR

We are here to help you. If you have any questions, please ask. It is often helpful to bring a family member with you to a consultation, or to write questions down so you won't forget them.