GRAVES' IN PREGNANCY



Raymon H. Grogan Endorama 2/23/2012



MEDICAL HISTORY

- 30 y.o. female
- PMH: Cholelithiasis
- PSH: Appendectomy
- SH:
 - Tobacco 1ppw, quit in October when she became pregnant
- FH:
 - Mother Graves', Aunt takes synthroid



HPI

- Pregnant in October 2011
 - Threatened abortion with bleeding
- Labs
 - T4: 14.4, T3: 282, TSH: <0.03, TPO Ab: 85, Anti Tg Ab: <20</p>
- US
 - Diffusely enlarged thyroid 5.5 cm both sides
 - 1.1 cm nodule in LL pole



HPI

- Started PTU at 8 weeks gestastion
- Developed whole body rash, quarter size spots
- Continued taking the PTU for 4 weeks without telling her physician
- Stopped PTU, then tried to restart it, but rash quickly returned
- Was started on Lugol's then sent for surgical consult

HOSPITAL COURSE

- Scheduled for total/subtotal TTX at 19 weeks
- Two parathyroid seen, otherwise routine parathyroidectomy
- Post-op significant pain
 - Discharged POD 3
- Transient hypocalcemia
 - Post op PTH 14, Calcium 7.4



PATHOLOGY

- 7 mm focus of PTC
- pT1a, N0, Mx

CHICAGO MEDICINE



QUESTIONS

- How to prepare pregnant pt. for OR for Graves'
 - PTU, Methimazole?, SSKI
 - Beta blockers relative contraindication
- How to distinguish Graves' from toxic nodule during pregnancy?
- How to manage thyroid hormone replacement post-op?



QUESTIONS

- Left lower thyroid nodule not seen in final path specimen
 - Right PTC 7 mm in size
- RAI?

MEDICINE

