Hashimoto’s Thyroiditis
(Chronic Lymphocytic Thyroiditis or Autoimmune Thyroiditis)

WHAT IS THE THYROID GLAND?
The thyroid gland is a butterfly-shaped gland located in
the lower front of the neck. The job of the thyroid gland is
to make thyroid hormones. Thyroid hormones are released
into the blood and carried to every tissue in the body.
Thyroid hormones help the body use energy, stay warm and
keep the brain, heart, muscles, and other organs working. In
children, thyroid hormone is necessary for normal growth.

WHAT IS HASHIMOTO’S THYROIDITIS?
Hashimoto’s thyroiditis is also known as chronic
lymphocytic thyroiditis or autoimmune thyroiditis. It
is an autoimmune disorder. This means you develop
antibodies [thyroid peroxidase (TPO) and/or thyroglobulin
(Tg) antibodies] that damage your thyroid gland. These
antibodies cause inflammation in your thyroid gland. Over
time, the inflammation can cause your thyroid gland to
• get bigger (goiter).
• have trouble making enough thyroid hormone
  (hypothyroidism).
In the United States, Hashimoto’s thyroiditis is the most
common cause of hypothyroidism.
• Hashimoto’s thyroiditis often runs in families.
• It occurs most commonly in women, but it can also
  affect men.
• It is more common as you get older but can occur at
  any age, including in children.

WHAT ARE THE SYMPTOMS OF HASHIMOTO’S
THYROIDITIS?
• Hashimoto’s thyroiditis often progresses very slowly
  over many years. You may not have any symptoms early
  on, even if thyroid antibodies are detected in your blood
  tests.
• In some cases, the inflammation can cause your thyroid
gland to become bigger than normal (goiter), which
  may cause neck discomfort, pressure or difficulty
  swallowing.
• Your thyroid gland may become underactive
  causing your thyroid hormone levels to be low (see
  Hypothyroidism brochure).
Hypothyroidism can cause symptoms such as:
• feeling tired
• abnormal weight gain
• constipation
• increased sensitivity to cold
• dry skin
• depression
• muscle aches
• difficulty exercising
• irregular or heavy menstrual periods
• Slower increase in height in children

正常的甲状腺

Hashimoto’s Thyroiditis

正常甲状腺

Hashimoto的疾病

Enlarged and Inflamed Underactive Thyroid (Goiter)
HASHIMOTO’S THYROIDITIS  
(Chronic Lymphocytic Thyroiditis or Autoimmune Thyroiditis)

HOW IS THE DIAGNOSIS OF HASHIMOTO’S THYROIDITIS MADE?

The diagnosis of Hashimoto’s thyroiditis may be made when

- you have symptoms of hypothyroidism, and a blood test shows an underactive thyroid gland [an elevated Thyroid Stimulating Hormone (TSH) level with or without a low thyroid hormone (free T4 or total T4) level].

- you have enlargement of your thyroid gland (goiter).

- you have elevated thyroid antibody levels, if measured.

An ultrasound/sonogram may or may not be needed. However, if done, it can show signs of inflammation, even in early stages when thyroid hormone levels are still normal.

Hashimoto’s thyroiditis can be diagnosed even though you have no symptoms. Your thyroid antibody levels are high, but your thyroid hormone levels are normal. Repeating and monitoring your thyroid antibody levels is not needed. However, you do need to monitor your TSH blood level. Over time, you may develop low thyroid hormone levels.

HOW IS HASHIMOTO THYROIDITIS TREATED?

- If you have high thyroid antibody levels but normal thyroid function tests (TSH and Free T4), you do not require treatment with thyroid hormone.

- If you have only a slightly elevated TSH (mild or subclinical hypothyroidism), you may or may not require medication right away.

- You may have your TSH level checked once or twice per year to see if you are developing clinical hypothyroidism.

- If you have clinical hypothyroidism (elevated TSH and low thyroid hormone levels), treatment is thyroid hormone replacement with levothyroxine (see Thyroid Hormone Treatment brochure).

- Levothyroxine is taken by mouth. The dose will be adjusted to the correct level for you based on your TSH level.

- When levothyroxine is taken in the correct dose, it has no side effects.

- However, if your dose is too low or you frequently miss doses, you may continue to have symptoms of hypothyroidism and your blood level of TSH will remain elevated. (see Hypothyroidism brochure).

- If the dose is too high, you may develop symptoms of hyperthyroidism and your TSH blood level will be below normal. (see Hyperthyroidism brochure).

- Most people with hypothyroidism due to Hashimoto’s thyroiditis will need lifelong treatment with thyroid hormone replacement (levothyroxine).