



# Subclinical Hyperthyroidism Is Associated with Increased Coronary Heart Disease Mortality and Atrial Fibrillation

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is that the current study of over 50,000 participants had more power to show small effects than the study of 2569 subjects in the Cardiovascular Health Study (which was included in the current analysis).

The authors are careful to point out the limitations of the study. One report that was included from Germany had a 24% incidence of SHyper that was attributed to iodine supplementation introduced 4 years earlier, but the results were qualitatively similar when the German report was excluded from the analysis. Another limitation is that the subjects were predominantly white. Although subjects taking thyroid preparations were excluded, not all the studies had data on other medications, such as amiodarone, that could

alter thyroid function. Another limitation is that there were only 304 individuals in the group with TSH <0.10 mIU/L, with only 15 deaths in this group.

Although there is still a lack of a randomized controlled study of treatment of SHyper to show that mortality, CHD, and AF can be prevented or reduced, the current study is further ammunition to treat patients with SHyper, especially when the TSH is <0.10 mU/L. In an accompanying invited commentary, Ken Burman reviewed the approach to treatment of these patients (4).

— Jerome M. Hershman, MD

## References

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