

HOLISTIC MANAGEMENT OF HASHIMOTO'S THYROIDITIS IN MENOPAUSAL WOMEN: A COMPREHENSIVE STUDY.

H.Iqbal^{1, 2, 3}. S.Naveed^{4, 5}
Prince Abdul Mohsin General Hospital, Al Ula, Madinah
region, Saudi Arabia 1
Sir Ganga Ram Hospital, Lahore, Pakistan 2
Pulse Medical Complex, Lahore 3
Karachi University, Karachi, Pakistan 4
PNS Shifa, Karachi, Pakistan 5

OBJECTIVES:

Hashimoto’s thyroiditis is an autoimmune condition where the immune system mistakenly attacks the thyroid gland, leading to hypothyroidism—a state of underactive thyroid function.

Primary objective of research was to see the synergistic effects of supervised symptomtology and titrated dosage of thyroxine in Hashimoto's thyroiditis supplemented by dietary and lifestyle modifications as an auxilliary effect in mitigating disease severity and identifying potential interventions to guage educational needs to menopausal women. This will help clinicians and patients understand the role of suboptimal medication, stress, nutritional imbalance and lack of physical activity in the progression of adverse outcome in the targetted population. Hence, reviewing how overlapping symptoms of hypothyroidism and menopause can be evaluated and how therapeutic interventions be modified to satisfy the criteria for the holistic management of Hashimoto's thyroiditis in menopausal women. Addressing the root cause like inflammation, infection, reduced estrogen, irregular medication with the help of a dedicated team was the key to the care provided. In clinical practice, the aftermath of autoimmunity leading to the development of lichen sclerosus , diabetes mellitis, pernicious anemia and consequent anxiety disorders, depression and weight gain must not be overlooked. Incorporating hormone replacement therapy in the form of transdermal patches and local estrogen creams and lubricants markedly improved the overall health of our selected group.

DESIGN:

Interventional experimental study: Randomised controlled trial of 500 participants to evaluate the effects of timely medication, personalised dietary and lifestyle interventions and stress management on disease outcomes in one group selected for holstic management and to compare the adverse outcome of autoimmune effects on the group given medication alone.

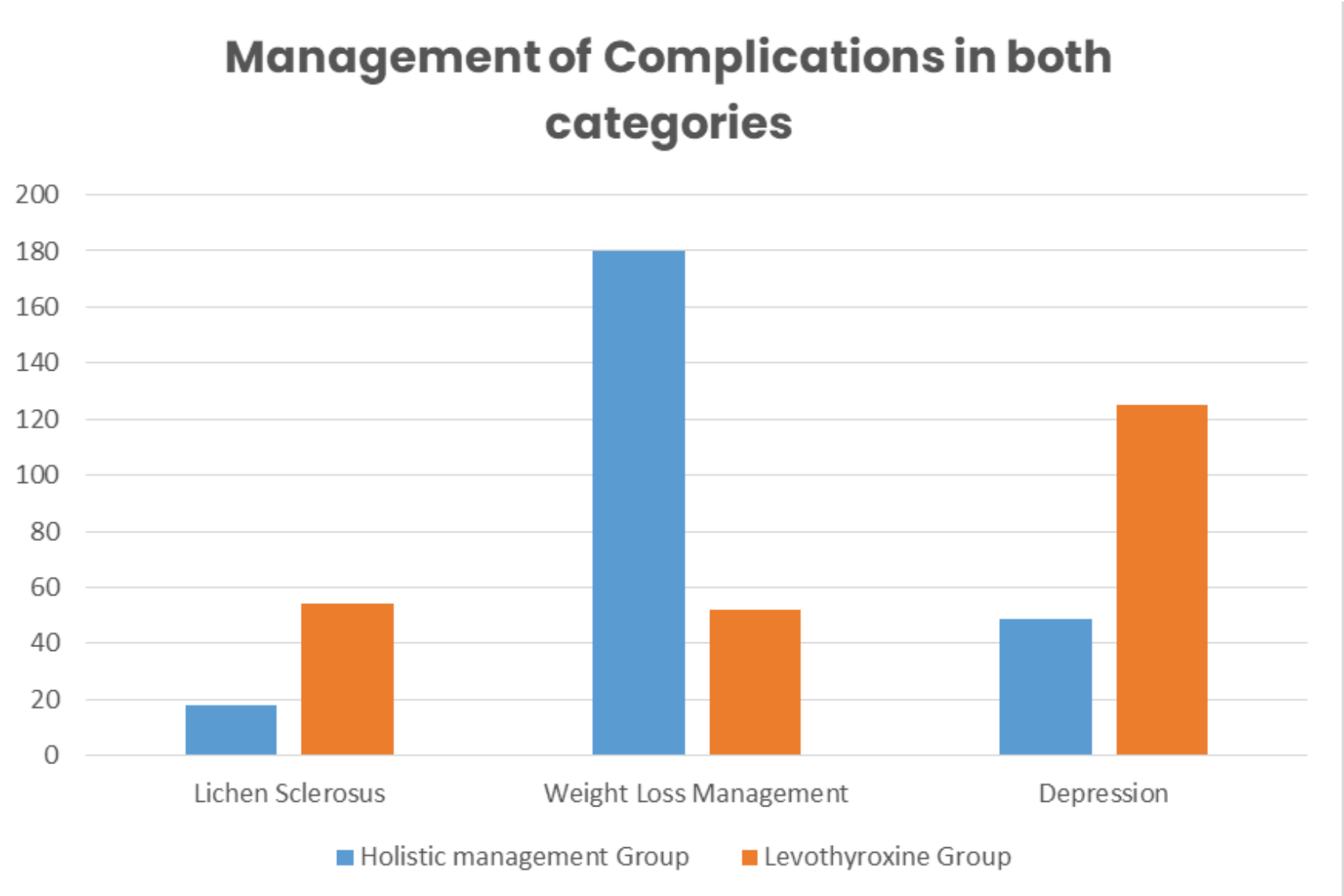
METHOD:

Study was done in ten years in multi hospital settings locally and internationally from May 2012 to June 2022. Patients were divided into two equal groups of 250 each. One group was continued on levothyroxine medication alone and other group reviewed for the holistic management. Survey questionairres were plotted on the excel sheets to see the results in both groups

RESULTS:

The study highlighted the significance of monitoring metabolic changes resulting from the progressive autoimmune process of Hashimoto's thyroiditis leading to irreversible effects that could be prevented by smart, logical and timely interventions in the group reserved for the holistic management.
Refer to the results infrographics as shown as per in Figure 1

Figure 1



CONCLUSIONS:

Managing Hashimoto’s thyroiditis in menopausal women holistically involves addressing the root causes, supporting thyroid function through dedicated clinics, nutrition, lifestyle changes, and stress management. It drastically improves quality of life in the menopausal women.

REFERENCES:

1. Stress management in women with Hashimoto's thyroiditis : A Randomised Controlled Trial.
Zoe S Markomanolaki, Xanthi Tigani, Thomas Siamatras et al. J Mol Biochem, 2019;8(1):3-12

2. Thyroid disorders associated with Lichen sclerosus : A case- control study in the All of Us research program.
Ryan Fan, Audrey C. Leasure, Fahrisa I. Maisha, Jeffrey M. Cohen, Alicia J. Little.
Br J Dermatol, 2022 Nov ;187(5):797-799.

3. The thyroid gland in post menopausal women: Physiology and diseases.
Review paper by Malgorzata Gietka-C Zernel. Menopause Rev 2017; 16(2):33-37.

4. Metabolic characteristics of Hashimoto's thyroiditis patients and the role of microelements and diet in the disease management- An overview.
Aniceta A Mikulska, Marta Karazniewicz- Lada, Dorota Filipowicz, Marek Rachala, Franciszek K. Glowka.
J Mol Sci.2022 June 13; 23(12):6580.

ACKNOWLEDGEMENT:

All patients confidentiality maintained.

CONTACT DETAILS:

dr humeiraiqbal@gmail.com
mobile no.
• +923066755669