Evaluation of unknown thyroid disorders in nursing home people

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OBJECTIVES

The prevalence of thyroid diseases increase with age. Mostly, they are undiagnosed. The lack of overt clinical appearance of hypohyperthyroidism in elder people increases the need for an attentive clinician to suspect and investigate for their presence. Thyroid dysfunctions, especially subclinics, are more frequently seen in older populations, have been linked to increased morbidity and mortality. Therefore, elderly people should evaluate in terms of thyroid functions.

The demographic features, thyroid functions and ultrasonographic features of the study population.			
	NP	HP	p
Age (year)	77.9±0.7	73.3±0.6	p<0.001
Male	77	45	
Female	31	38	
BMI(kg/m²)	25.7±0.4	28.4±0.4	p<0.001
Euthyroid	89.8%	83.3%	p=0.62
Subclinical hypothyroidism	3.7%	9.5%	p=0.11
Subclinical hyperthyroidism	4.6%	7.1%	p=0.46
Normal Thyroid ultrasonography	28.4%	20.5%	p=0.25
Nodular goiter	25.3%	22.9%	p=0.73
Multinodular goiter	38.9%	55.4%	p=0.08
Osteoporosis	34.7%	22.9%	p=0.12

METHODS

Hundred and ninety-two participant were enrolled in the study, 108 of them from the selected nursing home and 84 of them were living in their own home. All of the participants were evaluated in terms of thyroid functions, thyroid ultrasonography and osteoporosis.

RESULTS

The nursing home participant (NP) group had 89.8% euthyroid, 3.7% subclinical hypothyroidism, 0.9% overt hypothyroidism, 0.9% overt hyperthyroidism and 4.6% subclinical hyperthyroidism, in household participants (HP) group's rates were 83.3 %, 9.5 %, 0.0%, 0.0% and 7.1% respectively. NP group had 64.2%, HP group had 78.3% thyroid nodule. NP group's osteoporosis ratio was 34.7 %, HP group's was 22.95.

CONCLUSIONS

References

There was no statistical difference between two groups in terms of distribution of thyroid dysfunction, thyroid nodules and osteoporosis.

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