HYPOTHYROIDISM AND THE HAEMODIALYSIS PATIENTS. IT IS A MATTER FOR DISCUSSION.

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Figure 3 shows the mean differences of PCV by TSH levels. There was significant difference between PCV means for low, normal and high TSH.

F = 24.039, p < 0.001**

Figure 3: Mean

Figure 4 shows the mean differences of serum Ca and PO4 by T3 levels. There were no significant differences between serum Ca and PO4 means for low and high T3.

F = 3.451, p < 0.055

Figure 4: Mean Differences of serum Ca and PO4 by T3 levels

RESULTS

The overall mean age of patients without for haemodialysis data was 64.53 ± 11.58 years. There were no significant differences between the mean age for male (64.44 ± 12.18 years) and female (64.67 ± 12.04 years). The mean serum Ca level in patients with hypothyroidism was 1.08 ± 0.21 mmol/L and the mean serum PO4 level was 1.75 ± 0.33 mmol/L. The mean serum albumin level was 3.47 ± 0.58 g/dL.

Treatment with all patients of T3 has been started in the treatment of hypothyroidism with the aim of restoring normal thyroid hormone levels and improving the patient's clinical condition. There were no significant differences in serum Ca levels between the T3 and control groups (p = 0.155). There were no significant differences in serum PO4 levels between the T3 and control groups (p = 0.235). There were no significant differences in serum albumin levels between the T3 and control groups (p = 0.148).

TSH (mU/L) and T3 (nmol/L) levels were significantly lower in patients with hypothyroidism compared to the control group. There were no significant differences in TSH levels between the T3 and control groups (p = 0.155). There were no significant differences in T3 levels between the T3 and control groups (p = 0.235).

DISCUSSION

The results of this study showed that the mean serum Ca and PO4 levels were not significantly different between the T3 and control groups. The results of this study support the findings of previous studies that have shown a lack of significant difference in serum Ca and PO4 levels between patients with and without hypothyroidism. This may be due to the fact that hypothyroidism is a condition that can lead to abnormalities in various systems of the body, including the cardiovascular system. It is possible that the changes in serum Ca and PO4 levels are not significant due to the compensatory mechanisms that occur in the body in response to hypothyroidism. Further studies are needed to explore the mechanisms underlying these findings.