

Preoperative preparation for thyrotoxic patient

The patient must be euthyroid at the time of surgery as proved by physical signs e.g. pulse rate and by serial estimation of thyroid function test.

Preparation is usually done on an out patient basis and rarely hospitalization required.

Carbimazole at a dose of 10 mg tid or qid is the drug of choice. When euthyroid state is reached, the dose is reduced to 5 mg tid continuing to the evening of surgery.

Iodine may be given in conjunction with carbimazole during the last 10 -14 days prior to surgery to decrease the vascularity of the gland. 10 drops of lugol's iodine three times daily (8 hourly).

Propranolol 40 mg tid is used either alone for preparation of mild cases or in conjunction with carbimazole. Propranolol as a beta blocker, it acts on the target organs. However it has no effect on the thyroid gland neither itself nor its hormonal production, thus, hormonal levels remain elevated during treatment with propranolol alone, and some days post operatively, hence it is mandatory to continue the drug (propranolol) for a few days after operation