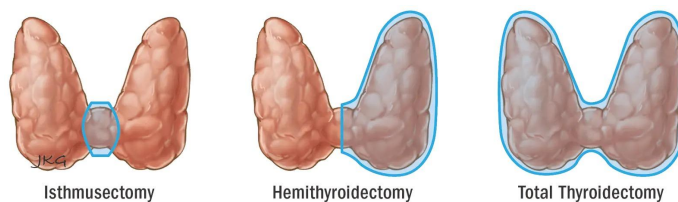




# Thyroidectomy

A thyroidectomy is a procedure to remove part or all of the thyroid. Most often, surgeons may perform this operation to treat thyroid cancer, a suspicious thyroid nodule, or other thyroid conditions such as an enlarged goiter or hyperthyroidism.



## Types of Surgery

- **Isthmusectomy:** Removal of only the isthmus of the thyroid (the small central part of the thyroid that connects the two lobes).
- **Hemithyroidectomy:** Removal of one half of the thyroid gland.
- **Total Thyroidectomy:** Removal of the entire thyroid gland.
- **Completion Thyroidectomy:** Removal of the remaining half of the thyroid in patients who previously underwent a hemithyroidectomy.

Depending on the type of surgery performed, you may need to take thyroid hormone medication to compensate for the loss of part or all of the thyroid. If the entire thyroid gland is removed, medication will be necessary. However, if only half of the thyroid gland is removed, thyroid medication may not be required.

## Before Surgery

To appropriately prepare for the procedure, you should not eat or drink anything, aside from essential medications, after midnight the night before surgery. On the day of surgery, you should arrive at the hospital a few hours before the scheduled procedure. The nurses, anesthesiologist, and surgical team will check in with you to review the plan and answer last minute questions you may have. You should alert their physician if you feel sick before surgery.



Please note that this information is intended for educational purposes. It does not replace consultation with your doctor, and it should not be interpreted as medical advice. We encourage you to speak to your health care provider if you have further questions or concerns regarding your medical care.

For more information scan this code or visit:

<https://thancguide.org/cancer-basics/treatments/surgery/ablative/thyroidectomy/>

## The Surgery

General anesthesia will be used to put you to sleep during the surgery. The surgeon will create a small, horizontal incision in the low central neck to perform your thyroidectomy. This incision should heal well over time and scarring is usually minimal. The healthcare team will provide information about minimizing scarring during your postoperative visit. The surgeon may monitor the nerves that control movement of the vocal cords (recurrent laryngeal nerves) during the operation using a specialized tube. The surgeon may also place a temporary surgical drain in the neck to help remove excess fluid. The drain is very small and can normally be painlessly removed within 1-2 days.

Additionally, the surgeon may remove lymph nodes in the central neck compartment that are adjacent to the thyroid gland. This is done to ensure that as much disease or problematic tissue as possible is removed. In cases where cancer has spread to areas on the side of the neck (lateral compartments of the neck), lateral compartment lymph nodes will likely be removed as well.

## Risk Associated with a Thyroidectomy

Although risks are associated with a thyroidectomy, patients who experience them usually see a quick resolution.

- Bleeding
- Infection
- Collection of body fluid in the neck (Seroma)
- Low calcium levels (Hypocalcemia)
- Low thyroid hormone levels (Hypothyroidism)
- Hoarseness or change in voice (Dysphonia)

## Post-Surgery

Recovery will depend on the extent of the surgery. Typically, total thyroidectomy patients will remain in the hospital overnight and be discharged the following morning. Hemithyroidectomy patients will usually be able to go home the same day of the procedure. Eating and drinking is permitted immediately after the surgery. A dedicated discharge planning team will work with your family to ensure you are properly cared for once you leave the hospital.

The neck scars from a thyroidectomy will appear red initially and fade over time. To ensure that your thyroidectomy scar heals well, you should avoid direct exposure to the sun for six months post-operation. Over the counter skincare products, like sunscreen, can be used to minimize the appearance of the scar. After a total thyroidectomy, you will need to visit your endocrinologist intermittently and so that they can monitor thyroid hormone levels and adjust your medication if needed.



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