



P4. THE IMPACTS OF THE THYROID GLAND DISEASES ON A CURRENT OF MENOPAUSE.

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CONTEXT: Thyroid diseases predominantly affect women. Additionally, the prevalence of most thyroid diseases increases with age, especially occur most often in postmenopausal women. The diagnosis of thyroid disease is difficult in this group of patients because the symptoms like anxiety, heart palpitations, sweating, gaining weight and insomnia are common for the both thyroid and ovarian dysfunction. Although thyroid status has a well-known impact on cardiovascular risk, cognitive function, disability, and longevity there is no consensus on universal screening for thyroid dysfunction of postmenopausal women among medical associations.

OBJECTIVE: The purpose of this study was to evaluate the impacts of the thyroid gland functions on a current of a menopause, to define opportunities of the screening for thyroid dysfunction and the interpretation of the results of thyroid function tests.

METHODS: We studied 65 women of the menopausal age. The majority of patients (97.6%) had associated thyroid pathology. The patients were divided into two clinical groups in relation to type of thyroid disorder. Group 1 included 60 women with hypothyroidism. Group 2 consisted of 25 patients with hyperthyroidism types. Hormonal examination included measurement in the blood serum of TSH and thyroid hormone levels (thyroxine (T4), tri-iodothyronine (T3)).

RESULTS: The results of this study showed that hypothyroidism, especially its subclinical form, is the most commonly occurring thyroid disorders and its rate increases with age. In comparison with pre-menopausal women, post-menopausal women had higher levels of TSH and rises in women over 65 years of age. The serum TSH elevated; freeT4 decreased depending on age of menopause. The risk of cardiovascular disease, cardiac insufficiency, and cardiovascular mortality were associated with TSH ≥ 10 mIU/l and age < 65 years. The progression of subclinical to overt hypothyroidism is about 2-3 % per year and can double in cases with a-TPO positivity or TSH > 10 mIU/l. Approximately, 44% of cases of hyperthyroidism – suppressed serum TSH; elevated T3 and/or T4, were noted before 45 years of age and 38% among women aged 45-64 years.

CONCLUSION: The serum TSH, thyroxine (T4), and tri-iodothyronine (T3) concentrations depend on age, comorbidities, and medical treatment. Thyroid diseases especially frequent in postmenopausal women.

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