Home Care After Surgery

1. Activity

You can resume normal activities as your condition improves.

2. Diet

There are no restrictions on your diet. However, soft diet is advised if you have throat discomfort.

3. Medications

Take thyroid hormone replacement and/or calcium supplements as prescribed by your doctor.

4. Wound Care

Keep the exposed wound clean and dry.

Check your wound daily for:

- Redness
- Swelling
- Discharge (blood, pus)
- Severe pain

If you develop any of the above, please inform the ENT clinic or surgeon immediately.

5. Care of Drain

If you are discharged with a neck drain, keep the drain well secured and anchor it at waist level. Remember to measure and record the amount of drainage daily.

6. Follow-up Appointment

Please keep to your appointment date and timing for review of wound and removal of stitches or drain.



Clinics 1B TTSH Medical Centre, Level 1 Contact: 6357 7000 (Central Hotline)



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Department of OTORHINOLARYNGOLOGY (EAR, NOSE & THROAT)

Thyroidectomy



What is Thyroidectomy?

Thyroidectomy refers to the surgical removal of the thyroid gland.

Types of Thyroidectomy

1. Hemithyroidectomy

Removal of either the right or left thyroid lobe with the isthmus (central part of the thyroid gland)

2. Total Thyroidectomy

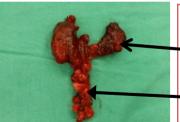
Removal of the whole thyroid gland. Patients will need to take lifelong thyroid hormone replacement after the surgery.

When is Thyroidectomy Needed?

- 1. Thyroid cancer
- 2. Swelling in the neck (large goitres) causing difficulty in breathing, speaking and swallowing
- 3. Refractory hyperthyroidism despite medical treatment (e.g. Graves disease)
- 4. Surgical restoration or enhancement of physical appearance



Total thyroidectomy completed. Pointer showing right recurrent laryngeal nerve



Specimen showing entire thyroid gland removed with attached <u>lymph</u> nodes

How is the Surgery Performed?

- Performed under general anaesthesia
- A recurrent laryngeal nerve monitor may be used
- Two types of surgical methods:
 - 1. Conventional open approach
 - 2. Endoscopic / robotic approach
- Duration of surgery ranges from two to four hours, depending on the procedure and approach

Preparation for Surgery

- You will undergo anaesthesia review and blood tests before the surgery to determine your fitness for surgery.
- You may need to stop aspirin and other blood thinning medications for seven to ten days before the surgery to reduce the risk of bleeding. If you have to continue them for other medical reasons, please consult your surgeon.
- Your surgery may be postponed if you develop a fever, cold, flu, sore throat or any other illnesses 24 to 48 hours before the day of surgery. Please inform your doctor if you feel unwell.

What to Expect Immediately After the Surgery?

- Stitches and numbness around the wound site
- A neck drain may be placed around the wound site.
- You will be able to eat, drink and talk after the surgery.

Possible Risks of Surgery

1. Voice Changes

After surgery, there may be temporary weakness of the nerves that supply the voice box, resulting in a hoarse, weak voice or swallowing issues. If the nerves are injured, your airway and breathing may be affected, however this rarely occurs. Risk of permanent damage to these nerves is about 1%.

2. Low Calcium Levels

In a total thyroidectomy, injury or damage to the parathyroid glands will cause low calcium levels. You may experience symptoms like numbness or tingling in the finger or lips. This is usually temporary, as the parathyroid glands eventually recover. Calcium and Vitamin D replacement will be prescribed.

3. Bleeding

There is a risk of bleeding from the wound site which can lead to swelling and blockage of the airway. Drains may be placed during surgery to facilitate drainage of excess fluid and prevent formation of blood clots.

4. Neck Numbness

Numbness around the wound site is common after surgery. This improves as the wound heals.

5. Wound Scarring

The chance of scar or keloid formation is less than 1%.

6. Hypothyroidism

Following surgery, the remaining thyroid gland may not produce enough thyroid hormone, which may cause you to feel lethargic and weak. You will require life-long thyroid hormone replacement in such cases.