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Hyperthyroidism

Patient name: _____ Admission: _____

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- I. **The client/caregiver has a basic understanding of the anatomy and physiology of the thyroid gland.**
 - A. The thyroid gland is located in the lower neck and in front of the trachea.
 - B. It is divided into two lobes and is joined by a band of tissue called the isthmus, making it resemble a butterfly.
 - C. It concentrates iodine from food and uses it to synthesize two hormones.
 - D. These two hormones regulate the body's metabolic rate.

- II. **The client/caregiver can define hyperthyroidism and possible causes.**
 - A. It is a syndrome that occurs when the thyroid gland produces an excess of thyroid hormones.
 - B. Excess thyroid hormones cause an increased rate at which the body uses energy.
 - C. Noncancerous lumps growing in the thyroid gland can also increase the production of hormones and cause hyperthyroidism.
 - D. Graves' disease (an autoimmune disorder) can attack the thyroid gland and cause overproduction of hormones.

- III. **The client/caregiver can recognize signs and symptoms of hyperthyroidism.**
 - Heat intolerance, sweating
 - Sudden weight loss
 - Alterations in appetite
 - Frequent bowel movements
 - Changes in vision
 - Fatigue and muscle weakness
 - Menstrual disturbance
 - Impaired fertility
 - Mental disturbances possibly depression
 - Sleep disturbances
 - Tremors
 - Thyroid enlargement
 - Rapid heartbeat

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- Wider, swollen or red eyes
 - In severe cases exophthalmos, in which eyes appear to protrude because of enlarged muscle and fatty tissue surrounding the eyes
- IV. **Client/caregiver can list measures to alleviate symptoms of hyperthyroidism.**
 - A. Restlessness
 1. Avoid emotional or physical stimulation until metabolism returns to normal
 2. Avoid excessive exercise and plan for rest periods
 3. Avoid caffeine, yellow and red food dyes, and artificial preservatives
 4. Avoid aspirin and aspirin products
 - B. Weight loss
 1. Eat a high-carbohydrate, high-protein diet
 2. Monitor weight on a regular basis
 - C. Diarrhea
 1. Avoid highly seasoned foods
 2. Use BRAT (bananas, rice, apples, tea) during acute episode
 3. Increase fluids to maintain hydration
 - D. Eyeball protrusion and eye irritation
 1. Apply cool moist compresses
 2. Shield eyes with eye patches or sunglasses
 3. Cover or tape eyelids shut at night
 4. Sleep with head of bed elevated
 5. Limit fluids and sodium to decrease fluid retention in eyes
 6. Notify physician of visual disturbances
 7. Use artificial tears or eye lubricants as ordered
 - E. Heat intolerance
 1. Provide cool environment
 2. Dress appropriately
 3. Encourage good hygiene
 - F. Depression
 1. Obtain emotional support or counseling as needed
 2. Dress attractively to increase self-esteem

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- V. **The client/caregiver is aware of possible medical treatment.**
 - A. Suppression of hormone production with medication (check medication classification for thyroid medication)
 - B. Destruction of thyroid tissue with radioactive iodine
 - C. Surgical removal of part of the thyroid gland

- VI. **The client/caregiver is aware of signs and symptoms of possible complications.**
 - A. Thyroid storm or thyrotoxic crisis has a sudden onset with symptoms of high fever, very rapid heart rate, delirium, dehydration, and extreme irritability. Prompt treatment is necessary because it can be life threatening.
 - B. If untreated, thyroid disease can cause elevated cholesterol levels, heart disease, infertility, and osteoporosis.

American Thyroid Association
www.thyroid.org/

National Institutes of Health/Thyroid Disease
www.nlm.nih.gov/medlineplus/thyroiddiseases

Community support group

Dietician or nutritionist

REFERENCES

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RESOURCES

National Institute of Diabetes and Digestive and Kidney Diseases
www2.niddk.nih.gov/