

# Thyroid Surgery at Hisar Hospital

Thyroid surgery is performed for several reasons and can include symptomatic thyroid nodules, recurrent thyroid cysts, goiter, Graves' disease, and to rule out or treat thyroid cancer. The purpose of thyroid surgery is to remove part or all of the thyroid gland. You will be in the hospital usually one night. Your surgeon will explain your specific surgery and why it is recommended in your case.

As with any surgical procedure, there are risks involved. There is a risk of bleeding, but this is very low. The average blood loss is less than an ounce. The risk of infection is so low that antibiotics are not routinely used. There is also a very low risk of injury to important nerves in the neck, called recurrent laryngeal nerves. These nerves control the vocal cords. Injury to these nerves could affect your voice. The parathyroid glands are located near the thyroid gland and may be injured during thyroid surgery. This can result in a drop in blood calcium levels. There is also a small risk associated with anesthesia. However, the relative risk of complications is very low and is usually outweighed by the potential benefits of having the surgery. Your surgeon will go over this information with you and answer any questions you might have.



Before Your Appointment

Our physicians want to make sure we are prepared for your visit and therefore, before we can schedule an appointment, we will need you to provide us with the following:

- Medical records
- Biopsy report
- Cytology report
- Ultrasound images (on CD) and report

#### Before Surgery

Once the surgery has been scheduled, arrangements will be made for your pre-operative evaluation. The pre-op exam can include laboratory work, chest X-ray, and EKG. This will be done at the Hisar Hospital Outpatient Center and will be scheduled by your surgeon's secretary.

If you take aspirin or nonsteroidal anti-inflammatory agents, you should stop taking these one week before surgery. The night before surgery, do not have anything to eat or drink after midnight. Get a good night's sleep.

#### What will happen in surgery?

You will be given general anesthesia to put you to sleep. You are positioned with special pillows under your neck to tilt your head back. An incision is made at the base of your neck and is about three to four inches long. Using magnifying lenses, the surgeon locates the thyroid gland and associated structures and all or part of the thyroid is removed. In some cases additional surgery will involve removal of lymph nodes and other structures. The incision is stitched closed and is then covered with steri-strip tapes and a dry gauze dressing. The operation generally lasts from two to three hours.

#### After Surgery

The evening after surgery you will have a liquid diet for dinner. You may have a sore throat. The nurse will provide lozenges and/or throat spray to help relieve this. If you need something for pain, the nurse will give you a liquid pain medicine. You will have a dressing on your neck which will be removed in the morning. The head of your bed will be raised to decrease swelling. You will have an intravenous line to give you fluids until the next day. You will have routine blood tests. You will be offered regular food the next morning. Most people are ready to go home after breakfast.

#### How will I feel after surgery?



Everyone is different. You will most likely be tired and a bit sore for a few days. You may have pain not only from your incision, but also from muscle soreness in your upper back and shoulders. This is from the positioning in the operating room during the surgery. You will have liquid pain medicine in the hospital and a prescription for pain pills at home.

You may have a sore throat. This is a result of the placement of anesthesia tubes during surgery. Throat lozenges and spray usually help. Your neck may be slightly swollen as well. You may feel like you have a lump in your throat when you swallow. This will improve after a few days but may continue for a week or so. If you notice sudden swelling in your neck contact your surgeon and Hospital. Your calcium level may drop after surgery. This is related to disturbance of the parathyroid gland, which regulate calcium balance. This will be monitored through blood tests. You may notice numbness and tingling of your fingers or around your mouth. You will have instructions about taking calcium replacement if needed.

#### Recovering at Home

Most people take 1 to 2 weeks off to recover. You should not drive for at least a week. There are no other restrictions. Depending on the amount of thyroid tissue that was removed and the reason for your surgery, you may be placed on thyroid hormone, Your doctor will discuss your situation with you.

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