



# American Association of Clinical Endocrinologists

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## Over 13 Million Americans with Thyroid Disease Remain Undiagnosed

~January is Thyroid Awareness Month~

2003 Campaign Encourages Awareness of Mild Thyroid Failure, Importance of Routine Testing

**NEW YORK - January 2003** - Did you know that 1 in 10 Americans - more than the number of Americans with diabetes and cancer combined<sup>1,2</sup> - suffer from thyroid disease, yet half remain undiagnosed<sup>1</sup>? In order to counteract this lack of awareness and educate the public about the prevalence of thyroid disease, diagnosis, and treatment, the American Association of Clinical Endocrinologists (AAACE) continues its annual thyroid awareness campaign. The 2003 campaign, *Hiding in Plain Sight: Thyroid Undercover*, launched today in conjunction with AAACE's annual sponsorship of Thyroid Awareness Month.

New clinical guidelines published by AAACE in November 2002<sup>3</sup> not only enable doctors to more easily identify patients with thyroid disease, but also provide treatment standards. Using a simple blood test called the thyroid stimulating hormone (TSH) test, any physician can determine whether someone is suffering from an overactive or underactive thyroid - in many cases, even before patients begin to experience symptoms<sup>4</sup>.

Until November 2002, doctors had relied on a normal TSH level ranging from 0.5 to 5.0 to diagnose and treat patients with a thyroid disorder who tested outside the boundaries of that range<sup>5</sup>. Now AAACE encourages doctors to consider treatment for patients who test outside the boundaries of a narrower margin based on a target TSH level of 0.3 to 3.04. AAACE believes the new range will result in proper diagnosis for millions of Americans who suffer from a mild thyroid disorder, but have gone untreated until now.

"The prevalence of undiagnosed thyroid disease in the United States is shockingly high - particularly since it is a condition that is easy to diagnose and treat," said Hossein Gharib, MD, FACE, and president of AAACE. "The new TSH range from the AAACE guidelines gives physicians the information they need to diagnose mild thyroid disease before it can lead to more serious effects on a patient's health - such as elevated cholesterol, heart disease, osteoporosis, infertility, and depression."

If the thyroid gland doesn't work properly, neither do you. The thyroid gland, a butterfly-shaped gland located in the neck just below the Adam's apple and above the collarbone, produces hormones that influence essentially every organ, tissue and cell in the body<sup>6</sup>. If thyroid disease is left untreated, it can lead to such complications as elevated cholesterol levels and subsequent heart disease, infertility, muscle weakness, osteoporosis and, in extreme cases, coma or death<sup>7</sup>.

Thyroid disease is of particular concern to women, since they are five to eight times more likely than men to be diagnosed with the condition<sup>8</sup>. The elderly are also at increased risk for the disease - by age 60, as many as 17 percent of women and nine percent of men have an underactive thyroid<sup>9</sup>. Thyroid disease is also linked to other autoimmune diseases, including certain types of diabetes, arthritis, and anemia<sup>10</sup>. For example, 15 to 20 percent of people with Type 1 diabetes, as well as their siblings or parents, are at a greater risk of testing positive for a thyroid disorder<sup>11</sup>.

Eighty percent of patients diagnosed with thyroid disease have hypothyroidism (underactive thyroid)<sup>12</sup>. Common symptoms of hypothyroidism include: fatigue, forgetfulness, depression, constipation, and changes in weight and appetite<sup>4</sup>. The good news is that this serious condition is easily treatable by taking a levothyroxine sodium pill once a day to restore thyroid hormone to its normal level<sup>4</sup>. Once a patient is stabilized on medication, switching brands or dosage is not recommended unless otherwise directed by their physician<sup>4</sup>.

"Because the symptoms of thyroid disease are somewhat vague or subtle, patients often don't know they should be asking their doctor for a TSH test," said Gharib. "In fact, many patients have said they didn't realize they were ill until they began treatment and started feeling more energetic and healthy."

Although mild hypothyroidism can often be treated by a primary care physician, AAACE recommends that certain types of hypothyroidism patients see an endocrinologist:

- Patients of age 18 years or less
- Patients unresponsive to therapy
- Pregnant patients
- Cardiac patients
- Presence of goiter, nodule, or other structural changes in the thyroid gland
- Presence of other endocrine disease

While the TSH blood test is the most sensitive and accurate diagnostic tool for thyroid disease, AAACE also recommends that patients perform a simple self-examination called the Neck Check<sup>TM</sup>. This easy, quick self-exam, unveiled by AAACE in 1997, helps Americans detect if they have an enlarged thyroid gland and should speak with their doctor about further testing.

For step-by-step instructions on how to perform the Neck Check<sup>TM</sup>, or to view the new AAACE clinical guidelines for hypothyroidism and hyperthyroidism, visit the AAACE web site at [www.aace.com](http://www.aace.com).

The American Association of Clinical Endocrinologists (AAACE) was established in 1991 and is the country's largest professional organization of clinical endocrinologists. Its membership consists of more than 4,200 clinical endocrinologists devoted to providing care for patients with endocrine disorders. The association strives to improve the public's understanding and awareness of endocrine diseases and the added value of the clinical endocrinologist in the diagnosis and treatment of these diseases.

Thyroid Awareness Month is supported through an unrestricted grant from **Abbott Laboratories**.

<sup>1</sup>National Diabetes Fact Sheet: National estimates and general information on diabetes in the United States. National Institutes of Health, et al, 1997

<sup>2</sup>Johns Hopkins Urban Health Institute, Special Projects, Johns Hopkins University, 2001

<sup>3</sup>AAACE Medical Guidelines for Clinical Practice for the Evaluation and Treatment of Hyperthyroidism and Hypothyroidism, Endocrine Practice, Vol. 8, No. 6,