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КАЧЕСТВО ЖИЗНИ ПАЦИЕНТОВ С АУТОИММУННЫМ ТИРЕОИДИТОМ

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QUALITY OF LIFE IN PATIENTS WITH AUTOIMMUNE THYROIDITIS

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Резюме. В данной статье представлено описание психологического и физиологического состояния пациентов, страдающих аутоиммунным тиреоидитом, и предложены стратегии для улучшения течения заболевания.

Ключевые слова: аутоиммунный тиреоидит, качество жизни, эндокринные заболевания, гипотиреоз.

Abstract. This article describes the psychoemotional and physiological state of patients with autoimmune thyroiditis and suggests strategies to improve the course of the disease.

Keywords: autoimmune thyroiditis, quality of life, endocrine diseases, hypothyroidism.

Relevance. Over the past couple of decades, there has been a significant increase in the incidence of diseases related to the thyroid gland, one of which is autoimmune thyroiditis, or Hashimoto's thyroiditis, in which immune system cells begin to attack the thyroid gland, making it vulnerable. At the moment, this is one of the most common endocrine pathologies, affecting approximately 3% of the population worldwide. Mainly, this disease affects men and women aged 30-60 years, but children should not be excluded. Thyroiditis leads to various physiological and psycho-emotional disorders that impair the quality of life of patients, as a result of which an important task is the selection of treatment to alleviate the course of this disease.

Aim: to conduct a comprehensive analysis of the literature describing the physiological and psychoemotional state of patients with autoimmune thyroiditis.

Objectives:

1. To determine the parameters characterizing the quality of life of patients with autoimmune thyroiditis.

2. To develop strategies to improve the course of the disease.

Materials and methods. Popular scientific Internet resources, as well as medical publications on websites PubMed, MediaSphera.ru, ScienceDirect.com, MDPI.com relative to the topic were analysed.

Results and their discussion. The thyroid gland is a large, butterfly-shaped endocrine gland located in the neck in front of the trachea. Its main function is to regulate the nervous system, bone growth and development, and metabolism by releasing hormones such as thyroxine, triiodothyronine and thyrocalcitonin into the blood. Thyroxine and triiodothyronine help to control energy levels, body temperature, metabolism, brain development and health of muscles and bones, calcitonin helps to control the amount

of calcium and phosphate. The thyroid gland also influences the functions of other glands, making it one of the most important organs in the human body.

Over the past couple of decades, there has been a significant increase in the incidence of diseases related to this gland, one of which is autoimmune thyroiditis, or Hashimoto's thyroiditis (Hashimoto's disease).

An autoimmune condition is a disease in which healthy tissues are attacked by the immune system. In Hashimoto's disease, the thyroid hormone-producing cells die because of such attack. The condition typically causes hypothyroidism, a decrease in hormone production.

There is a variety of consequences for patients with autoimmune thyroiditis. On the somatic side, hypothyroidism leads to different cardiovascular dysfunctions such as higher blood pressure due to increased systemic vascular resistance and advanced atherosclerosis. Furthermore, autoimmune thyroiditis contributes to a higher risk of infertility and early miscarriage, as well as to weight gain, dry skin, muscle weakness, tenderness and aches, joint pain and stiffness. Less is known about specific psychiatric burden of symptoms in patients with autoimmune thyroiditis. Studies describe a cumulative occurrence of mood disorders and symptoms of depression among patients in a hypothyroid state, as well as frequent thyroid diseases among patients with depression. Moreover, fewer studies describe symptoms of anxiety in patients with autoimmune thyroiditis [3]. Occasional investigations study other psychological symptoms associated with autoimmune thyroiditis, such as attentional and executive disturbances, fatigue. These disorders impair the quality of life of patients, as a result of which an important task is the selection of treatment to alleviate the course of this disease.

Unfortunately, there is no way to cure or reverse Hashimoto's disease. But lifelong medication works effectively to manage hypothyroidism and thyroid hormone levels. Hypothyroidism associated with Hashimoto's disease is treated with a synthetic hormone called levothyroxine, which works like the T4 hormone naturally produced by the thyroid. The dosage of the drug depends on the patient's weight. Levothyroxine is prescribed at the dose of 1.5-1.7 µg/kg body weight/day. In case of incorrect dosage hand tremors, headaches, heart pain, agitation and sleep problems may occur.

The absorption of levothyroxine depends on the health of the liver, gallbladder and small intestine. Endocrinologists strongly recommend following a special diet to maintain the health of the gastrointestinal tract to avoid difficulties in absorption [1-2].

To maintain the health of the gastrointestinal tract, especially the liver and the gallbladder, it is useful to include in the diet vegetables and fruits (carrots, beets, broccoli, cabbage, citrus fruits), legumes (beans, lentils, peas), cereals, lean meat and fish, nuts and seeds. It is also recommended to avoid foods containing high amounts of cholesterol and saturated fats.

The improvement of the thyroid gland functioning is facilitated by the consumption of products rich in various micro- and macroelements. These include: Iodine, a micronutrient necessary for human development and health is required for the synthesis of thyroxin (T4) and triiodothyronine (T3). It is found in seaweed, iodized salt, Greek yogurt.

1. Selenium, which plays a key role in the thyroid gland ability to produce the thyroid hormone. Good sources of selenium are Brazil nuts, brown rice, eggs, tuna.

2. Iron. Its deficiency causes significant fatigue, exercise intolerance and lightheadedness. Liver, red meat and beans contain lots of this element.

3. Magnesium, which is involved in the metabolism of thyroid hormones and helps to prevent autoimmune reactions. Magnesium deficiency may be associated with elevated levels of thyroid antibodies, which can impair the thyroid function.

4. Zinc. It also participates in the synthesis and metabolism of thyroid hormones, as well as in the regulation of their action on target tissues.

The patients are strongly recommended to give up bad habits, because the fact that alcohol causes direct cellular toxicity on thyroid cells producing thyroid suppression and reducing the thyroid volume is well established. In addition, smoking can aggravate symptoms related to hypothyroidism and Hashimoto's disease. It can also increase the risk of developing disorders like Grave's disease.

In no case should patients forget about maintaining a healthy lifestyle, because sufficient physical activity and adherence to sleep and wakefulness are also important for patients since their condition is worsened by the effects of weakness and drowsiness.

Conclusion:

1. While the consequences of autoimmune thyroiditis significantly impair the quality of life of patients, their own perception of their diagnosis, their attitude towards it and the measures they take directly influence the course of their disease. This indicates a close link between the quality of life in patients with autoimmune thyroiditis and their own lifestyle.

2. A diet providing the required amount of essential macro- and microelements, sufficient physical activity, avoiding bad habits and maintaining a good sleep schedule will certainly lead to the improvement in the course of the disease and, therefore, to the improvement of the patients' general condition.

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