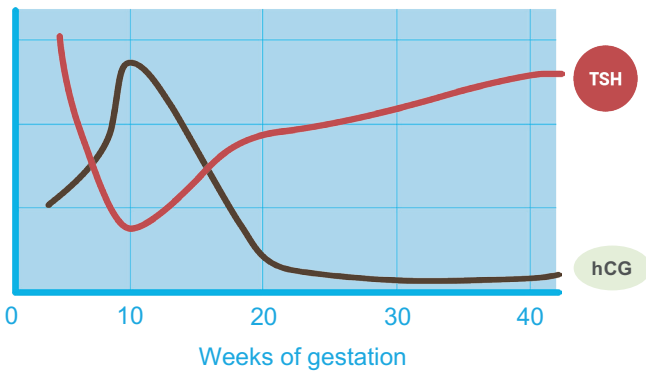
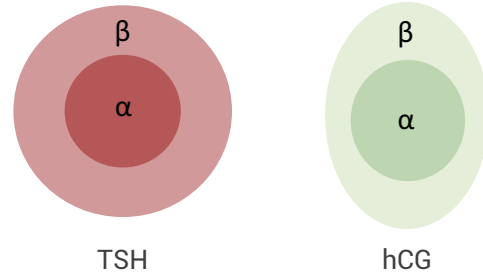


PREGNANCY

Examining abnormal thyroid function tests

Multiple hormonal effects during pregnancy result in changes in thyroid hormone levels.

TSH and hCG have a similar structure—the same alpha subunit, but different beta subunits.



This similarity allows hCG to stimulate the TSH receptor, leading to high hormone levels in early pregnancy, with suppression of TSH. As hCG levels decline in later pregnancy, TSH levels return to normal.

This is a normal response to pregnancy and **no treatment** is needed.

Iodine needs increase during pregnancy, due to increased renal iodine loss and increased iodine needs due to fetal thyroid hormone production. For women with low iodine diets, this can result in hypothyroidism during pregnancy. This **does require treatment**, as early as possible to ensure adequate thyroid hormone levels for the baby.

Further reading

DeGroot L, Abalovich M, Alexander EK, et al. Management of thyroid dysfunction during pregnancy and postpartum: an Endocrine Society clinical practice guideline. *J Clin Endocrinol Metab.* 2012. 97(8):2543–2565.