



Barnmorskemottagningar, Regionhälsan
Patientinformation Tyreoidea översatt till engelska
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Patient information

For pregnant women with thyroid disorders

The midwife takes a blood test (TSH) for thyroid function early in pregnancy in all pregnant women. It is important to detect and treat both low and high thyroid function.

Thyroid function can vary:

- It can be completely normal.
- Low thyroid function (hypothyroidism) entails a lack of thyroxine, and an elevated TSH level. It is a common condition that is treated with a medication called Levaxin®.
- High thyroid function (hyperthyroidism) entails an excess of thyroxine, and a low TSH level. This condition is less common than hypothyroidism. Sometimes medication or surgery is required.
- Thyroid function can be normal but the tests can still be abnormal in early pregnancy, due to the production of other hormones creating the false impression that you have a thyroid disorder. This can be detected by repeated blood tests.

- Your thyroid tests were completely normal.
- Your TSH level is elevated, indicating that you have low thyroid function.
- Your TSH level is low, indicating either that your thyroid function is completely normal, but that your tests are abnormal at the moment, or that you have high thyroid function. You will be contacted about repeat blood tests and possibly be given information by a doctor.

If you have low thyroid function and need Levaxin®

Many pregnant women have been treated with Levaxin® and there are no known risks associated with treatment during pregnancy. Some women can experience side effects, such as heart palpitations, feeling hot or shakiness, but most women feel completely normal during Levaxin® treatment. The dose often needs to be adjusted during pregnancy, so your midwife will test you regularly, most often until pregnancy week 25. You will be informed, well before delivery, about if/how to medicate after your baby is born

- You have an e-prescription for..... µg/day
- Your dose is changed from..... µg/day to. µg/day
- You have a new e-prescription for..... µg/day to add to your previous dose..... µg/day making a total of µg/day
- Continue with your current dose.....µg/day
- After delivery, change your dose to.....µg/day

Your next blood test will be in about.....weeks. Your midwife will tell you when and where you will be tested.

If you are taking Levaxin®

Remember not to take iron together with Levaxin® because iron reduces the absorption of Levaxin®. If you are taking both medications, wait at least two hours between taking them.