

## 20. MANAGEMENT OF PATIENTS WITH HYPOTHYROIDISM

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**Introduction.** Hypothyroidism (HT) is a clinical, biochemical syndrome, characterised by a deficiency of thyroid hormones with a negative impact on the function of vital physiological systems and metabolic processes in the body. The SARS-CoV-2 coronavirus uses the angiotensin-2 converting enzyme to enter the thyroid and pituitary cells and can trigger a "cytokine storm". Thyroid hormone replacement therapy with levothyroxine is the standard treatment for the condition.

**Aim of study.** Research of the clinical signs and medication of hypothyroidism.

**Methods and materials.** The study included 50 patients with hypothyroidism, hospitalised in 2021.

**Results.** Gender prevalence indicates the predominance of the disease among females (88%) over males (12%). Most cases of illnesses are registered at the age of 30 (21%) and increase with age (66%). The most common symptoms are: fatigue (28.5%), cold limb syndrome (89.4%), increased body mass (48.1%), hoarse voice (20.2%) and dry skin (22.4%), symptoms variation being related to the age and gender of the patients. Standard treatment is long lasting, recommends replacement therapy with levothyroxine, liothyronine, or a combination of these, and is given in relation to the serum level of thyroid-stimulating hormone ( $TSH_{10} > mIU/L$ ), starting with a lower dose and increasing every 4-6 weeks until the normalisation of the TSH level. The pathogenic and symptomatic treatment consists in the pharmacotherapy of complications that occurred following the illness, targeting vitally important physiological systems and metabolic processes of the organism.

**Conclusion.** Thorough monitoring of thyroid gland function and thyroid hormone levels leads to the installation of euthyroidism, with improvement of patient health and subclinical HT prophylaxis and prevents the development of "cytokine storm" in case of SARS-CoV-2 virus contamination.