

Abstract

Title: Quality of life post thyroidectomy in benign goitres

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Objectives:

Primary objective: To assess the impact of thyroidectomy on QOL in patients with benign goitres using the ThyPRO 39 questionnaire

Secondary objective: To assess the significance of age, gender, type of goitre, specimen weight and dimension, duration of symptoms, functional status, post operative hypocalcaemia and pathology on quality of life following thyroidectomy.

Methods:

50 patients between January 2017 and August 2018 were prospectively evaluated using the ThyPRO 39 questionnaire, developed by Torquil Watt. This was administered pre operatively and six months following the operation to assess impact in quality of life post thyroidectomy.

The variables affecting the outcome and having a bearing on the overall quality of life were also studied.

Results:

The mean age of the study population was 43.30 years \pm 11.61. A female preponderance was noted (34:16). The mean duration of symptoms was 49.46 \pm 40.40 months and the majority of the patients were euthyroid (74%). The mean duration of hormonal dysfunction in hyperthyroid patients was 39.92 \pm 28.35 months.

The most common presentation was multinodular goitre in 23 (46%) and the most common indication for surgery was progressive increase in size of the goitre (62%). 90% of the patients underwent total thyroidectomy with the mean weight of the thyroidectomy specimen being 73.62 gm. The most common histopathology report was nodular/ adenomatous hyperplasia (62%).

Univariate analysis showed a significant association between age ($p=0.011$), gender ($p=0.015$) and duration of symptom ($p=0.049$) with post thyroidectomy improvement in quality of life. However, none of these factors were significant on multivariate analysis. All the 12 domains listed in the ThyPRO 39 questionnaire were compared post operatively, and there was a significant change in all domains except for depression ($p=0.126$). Further, comparison of pre and post operative composite score revealed a significant improvement in the quality of life postoperatively (0.00).

Conclusion:

There was a significant improvement in quality of life post thyroidectomy in all domains except depression. The study also detected baseline impairment in quality of life pre operatively. Thus offering surgery benefits the patient with overall improvement in quality of life.