



Briefing for the Public Petitions Committee

Petition Number: [PE 1463](#)

Main Petitioner: Sandra Whyte, Marian Dyer and Lorraine Cleaver

Subject: Calls on the Parliament to urge the Scottish Government to take action to ensure GPs and endocrinologists are able to accurately diagnose thyroid and adrenal disorders and provide the most appropriate treatment.

Hypothyroidism

Hypothyroidism is a condition in which the thyroid gland produces insufficient amounts of Thyroxine, a hormone important for regulating the body's metabolism. Low levels of Thyroxine can result in symptoms such as tiredness, weight gain and depression. It is estimated that 3.7% of patients registered with a GP practice in Scotland have been diagnosed with hypothyroidism¹, resulting in an estimated 103,000 people being seen annually by either a GP or practice nurse².

Diagnosis and Treatment

Testing for hypothyroidism occurs mainly in primary care on patients presenting with symptoms. A patient presenting with symptoms and suspected of having hypothyroidism would typically undergo a thyroid function test to confirm diagnosis. This test measures the levels of Thyroid Stimulating Hormone (TSH) and free Thyroxine (T4) in a person's blood.

Once diagnosed, hypothyroidism is usually treated in primary care with the prescription of Thyroxine (T4) tablets (Levothyroxine). Patients then undergo monitoring to ensure their levels of TSH and T4 are within normal limits.

The Petition

The petition calls for a number of changes to the diagnosis and treatment of hypothyroidism. As such it seeks to influence current clinical practice. Clinical

¹ ISD Scotland (Online) [Quality and Outcomes Framework Prevalence Data – Hypothyroidism](#)

² ISD Scotland (Online) [Practice Team Information Statistics – Hypothyroidism](#)

practice is guided by general principles outlined by the General Medical Council (GMC) as well as the availability of specific clinical guidelines. The GMC guidance on 'Good Clinical Care' states that in providing care, a doctor must "provide effective treatments based on the best available evidence"³. Doctors are also expected to keep their knowledge and skills up to date, and to be familiar with relevant guidelines and developments that affect their work.

The Scottish Intercollegiate Guidelines Network (SIGN) is the body responsible for publishing national clinical guidelines for the NHS in Scotland. To date it has not published any guidelines on the diagnosis and management of hypothyroidism. However there are guidelines which were co-published in 2008 by a number of professional bodies⁴. These guidelines were revised in June 2011⁵.

The guidelines specifically address point 3 of the petition which relates to alternative treatments to T4 alone, including the combined use of T3 (see footnote ⁶) and T4. It states:

"The RCP does not support the use of thyroid extracts or levothyroxine and T3 combinations without further validated research published in peer reviewed journals. Therefore, the inclusion of T3 in the treatment of hypothyroidism should be reserved for use by accredited endocrinologists in individual patients."

The guidelines do not address the other points made by the petitioners.

Scottish Government Action

No specific work on this topic has been undertaken by the Scottish Government and, to date, the Scottish Intercollegiate Guidelines Network (SIGN) has not produced guidelines on hypothyroidism.

Scottish Parliament Action

No specific work on this issue has been conducted by the Scottish Parliament.

Kathleen Robson
Senior Researcher
11th January 2013

³ General Medical Council (Online) [Good Medical Practice](#)

⁴ Endorsed by the Royal College of Physicians, the Association for Clinical Biochemistry, British Thyroid Foundation, Society for Endocrinology, Royal College of General Practitioners, British Thyroid Association, British Society of Paediatric Endocrinology and Diabetes.

⁵ Royal College of Physicians (2011) [The Diagnosis and Management of Primary Hypothyroidism](#) [online]

⁶ T3 refers to triiodothyronine, another hormone produced by the thyroid gland.

SPICe research specialists are not able to discuss the content of petition briefings with petitioners or other members of the public. However if you have any comments on any petition briefing you can email us at spice@scottish.parliament.uk

Every effort is made to ensure that the information contained in petition briefings is correct at the time of publication. Readers should be aware however that these briefings are not necessarily updated or otherwise amended to reflect subsequent changes.