

Hypothyroidism is a condition that is very frequent, very common to see in the practice. General internal medicine doctors, gynecologists, geriatricians, they will all see patients that they suspect to have hypothyroidism. And that's important to recognize these patients, because hypothyroidism, even though it's a slow-progressing disease, can impair quality of life in a different way, in multiple ways.

For example, it can impair cognition. The patient starts to feel low energy, forgetful, difficult to make decisions. But also hypothyroidism has a metabolic fingerprint on patients, and the patients will have increased cholesterol levels, slight increase in body weight. So there's something happening from a metabolic point of view and also from a cognitive point of view that combined will slowly, progressively, erode the quality of life of those patients.

And I think that's really important for physicians to be attentive to that and try to diagnose it, because diagnosis is really simple. Just a measurement of TSH and free T4 will make the diagnosis. So it's really not worth having the question or doubt whether or not that patient has hypothyroidism without going ahead and doing the laboratory that's necessary for that.

Now, we expect, based on different numbers, that about 4.5% or maybe 5% of the population will have hypothyroidism. So this is a very common disease. If you think that the United States has about 300 million people, you would think that at least 10 to 15 million individuals have hypothyroidism, have been diagnosed with hypothyroidism.

So that's an important thing to keep in mind when seeing patients. On a regular basis, like when the patients come for a physical checkup on a yearly basis, physicians should always ask themselves, this patient, do we have signs or evidence or complaints that are compatible with hypothyroidism and go ahead and do a screening check.