



BASIC INFORMATION

DESCRIPTION

The parathyroids are four pea-sized glands located within the thyroid gland in the neck. They produce a hormone (PTH) that helps maintain the body's mineral levels. Hyperparathyroidism occurs when these glands become overactive and produce too much PTH. This triggers an imbalance of minerals (calcium and phosphorous) that affects the body's bones and muscles. Hyperparathyroidism can affect both sexes and all ages. It is more common in women ages 30 to 50.

FREQUENT SIGNS AND SYMPTOMS

- There may be no symptoms, or the symptoms may be mild to severe. This disorder comes on over years, so symptoms may not get noticed at first. Many cases are first diagnosed on a routine blood test.
- Loss of appetite, thirst, frequent urination, weight loss, or constipation.
- Feeling tired, depressed, or anxious.
- Muscle weakness, bone and joint pain.
- Nausea, vomiting.
- Severe side (flank) pain caused by kidney stones.
- Easy bone fractures due to reduced calcium in the bones.
- High blood pressure.
- Pain in the upper abdomen caused by a peptic ulcer or pancreatitis (inflammation of the pancreas).

CAUSES

- Benign tumors (adenomas) that grow in one or two of the parathyroid glands. Why the tumors occur is unknown.
- Sometimes caused by an enlargement of the glands (hyperplasia); the cause for this is unknown.
- Very rarely is a cancer involved.

RISK INCREASES WITH

Females over age 50.

PREVENTIVE MEASURES

No specific preventive measures.

EXPECTED OUTCOMES

Outcome is favorable in almost all cases.

POSSIBLE COMPLICATIONS

- Weak bones (osteopenia and osteoporosis).
- Kidney damage.
- Peptic ulcer.
- Pancreatitis.
- Nervous system problems.
- Hypoparathyroidism (too little PTH) caused by removal of too much parathyroid tissue during surgery.



DIAGNOSIS & TREATMENT

GENERAL MEASURES

- Your health care provider usually will do a physical exam and ask questions about your symptoms. Medical tests may include studies of blood and urine, x-rays of bones, and other tests to confirm the diagnosis.
- Surgery is usually the best form of treatment. The parathyroid gland or glands that are producing the excess hormones are removed. There are different types of operations that are done. Your health care provider will explain them to you.
- In mild cases, or when there are no symptoms, watchful waiting may be an option. This means monitoring the patient for a time to see if the disorder shows signs of getting worse. A follow-up exam may be done every 6 months for 1 to 3 years, and then less often, if tests are normal.

MEDICATIONS

- Don't take antacids that contain calcium without medical approval.
- Estrogen or bone-building drugs for postmenopausal females may be prescribed.

ACTIVITY

- Follow medical advice about returning to normal activities following surgery.
- Exercise daily to maintain good health.

DIET

- Drink extra water to prevent complications.
- Your health care provider will discuss the amount of calcium intake that is recommended. This is usually about 1000 mg/day.



NOTIFY OUR OFFICE IF

- You or a family member has symptoms of hyperparathyroidism.
- Any new symptoms occur after surgery.
- You did not have surgery and you need to schedule appointment for follow-up studies.

Special notes:

More notes on the back of this page