INSTRUCTIONS FOR PATIENTS RECEIVING RADIOACTIVE IODINE THERAPY FOR HYPERTHYROIDISM

The following information relates to therapy utilizing radioactive iodine (I-131) for hyperthyroidism (overactive thyroid). You will receive an individually determined oral capsule of radioactive iodine. A large portion of the radioactive iodine will localize in the hyperfunctioning thyroid tissue destroying the gland and correcting the overactivity.

The process is slow, usually taking 2-6 months to achieve its full therapeutic effect.

One inevitable result of radioactive iodine therapy is that almost all patients develop hypothyroidism (underactive thyroid) sooner or later in life. This may occur even many years later. Hypothyroidism can be readily treated with the daily administration of thyroid hormone in pill form. The condition is permanent and requires life-long replacement therapy. It is extremely important to remember that you received radioactive iodine therapy and that you are followed by your physician so that hypothyroidism, when it develops, is adequately treated.

On rare occasions, there may be temporary inflammation of the thyroid producing some pain, tenderness and swelling. This usually resolves spontaneously in a few days, and can be relieved by simple analgesics (aspirin, Tylenol, etc).

Concern regarding the possibility of an increased incidence of malignancies, leukemia or congenital defects in offspring of patients treated with radioactive iodine has been evaluated. When comparing patients treated with radioactive iodine to patients treated surgically, no evidence was found indicating increased incidences of birth defects, malignancies or leukemia.

Some patients develop an eye condition called Grave’s ophthalmopathy, which is a bulging or swelling of the eyes. This condition may occur before or concurrently with the development of hyperthyroidism, or even years after the hyperthyroidism has been cured. The eye disease is due to the Grave’s disease itself, however, there have been several reports of occasional worsening of this condition following radioactive iodine therapy.

Weight gain after therapy is common. The hyperthyroid patient with increased metabolism requires more calories and usually eats more. After therapy, when the patient has a normal metabolic rate, fewer calories are required. If the patient continues to eat more calories than are needed, weight gain results, exactly the same as it would in the normal population.

What Can I Do To Reduce Radiation Exposure To Others?
There are three (3) basic principles used to reduce radiation exposure to others:

1. **Time**: Try to make every attempt to minimize the time spent with family and others after the therapy.
2. **Distance**: The greater the distance you are from others, the less radiation they will receive. Even an increase of a few feet from others will greatly decrease their exposure.
3. **Hygiene**: The radioactive iodine that is not concentrated in your thyroid tissue leaves your body mainly in your urine. There is also some concentration in your saliva, feces, blood and sweat. Good toilet hygiene and careful, thorough washing of your hands will reduce the possibility of contamination. All tissues used in the first 5 days should be flushed down the toilet.
**DO NOT** TAKE ANY THYROID MEDICATIONS FOR 2 WEEKS PRIOR TO THE RADIOACTIVE IODINE THERAPY INCLUDING: PTU (propylthiouracil) or Tapazole (methimazole).

**Women age 55 years or younger** – Blood testing (serum HCG pregnancy test) is required **prior** to the therapy. **You must abstain** from sexual activity from the day of this blood draw until 5 days after the radioactive thyroid therapy.

**WE STRONGLY RECOMMEND THAT YOU ADHERE TO THE FOLLOWING GUIDELINES**

1. Flush the toilet 2 to 3 times after each use for the first 5 days, since most of the excess radioiodine will be excreted in your urine and feces. If you are incontinent, please notify the technologist.
2. Drink plenty of liquids for the first 3 days. The more liquids you take in, the more you will urinate. Urinating helps flush excess radioiodine from your body quicker.
3. Sleep alone for the first 5 days after your therapy. During this period avoid kissing and sexual intercourse. Also avoid prolonged physical contact, particularly with children and pregnant women. The thyroid glands of children and fetsuses are more sensitive to radiation than those of adults.
4. Make arrangements for another individual to be a primary caretaker for children/infants for the first 5 days following your I-131 therapy-avoid any close contact with children/infants for at least 5 days. If this is impossible, make every effort to keep close contact to a minimum. Avoid having children/infants too close to you (sitting in your lap, in bed with you) for any prolonged period of time. Do not sleep with children/infants/pregnant partner for **3 WEEKS**.
5. Wash your hands thoroughly and often, especially after going to the bathroom. Rinse the bathroom sink and tub thoroughly after each use.
6. Use separate **REUSABLE** eating utensils for the first 5 days and wash them separately. This will reduce contaminating family members with radioiodine from your saliva. **DO NOT USE DISPOSABLE DISHES/PLATES/UTENSILS.**
7. No foods that could be contaminated with your saliva should be eaten the first week after therapy. This would include but is not limited to apples, bone in fried chicken, barbecued ribs, corn on the cob, etc. (cut up apples, chicken/ribs cut off the bone, corn cut off the cob is acceptable).
8. Use separate towels and washcloths. Launder your bath towels, bed linens and clothing separately 5 days after therapy.
9. We recommend taking a laxative the third night after your radioiodine therapy. This eliminates the radioiodine in the feces. A bottle of Citrate of Magnesia gives good results.
10. Radioiodine **MUST NOT** be given to pregnant women or nursing mothers as it is taken up by the fetus and secreted in the mother’s milk. You must notify us if there is any possibility of pregnancy or if you are nursing an infant. Stop breastfeeding.
11. We also recommend that women of child-bearing years do not become pregnant for at least 6 months following therapy.
12. Avoid public places (ex: grocery stores, shopping centers, theaters, restaurants and sporting events) for **5 DAYS**.
13. If you seek any other medical attention or are admitted to a hospital in the next 3 weeks, please notify the medical staff of your recent radioactive iodine therapy.

In our experience, one dose of radioactive iodine is sufficient to cure hyperthyroidism in 9 out of 10 patients. If the first dose is insufficient, a second dose can be administered in 6 months.

If any questions arise after your therapy, please call us at 631-2500 EXTENSION=*2147

_________________________  ____________________________
Date                        Signature of patient

_________________________
Signature of witness

_________________________
Signature of Physician administering Therapy Dose