





Helpful Tips

Hypothyroidism can develop during or after pregnancy. It also can affect a woman's ability to become pregnant.

A woman has a 25% higher risk for developing hypothyroidism after pregnancy if she has diabetes or another autoimmune disorder. A miscarriage may be an indication that antithyroid antibodies were present before pregnancy. These antibodies do not cause the miscarriage, but seem to be a marker for other immune system problems that can lead to pregnancy loss.

How Hypothyroidism Can Affect Pregnancy

Hypothyroidism can affect pregnancy in several ways:

- + It can cause infertility in women because it can prevent the production of eggs.
- + A pregnant woman with hypothyroidism is at higher risk for miscarriage.
- + Women with untreated hypothyroidism near the time of delivery are in danger of developing high blood pressure and premature delivery.
- + Babies born to women with untreated hypothyroidism may not achieve their full intellectual potential.

Untreated hypothyroidism can cause serious problems for an unborn child, so many experts recommend that all pregnant women be tested for thyroid function during the pregnancy.

Every woman treated with thyroid hormone who anticipates becoming pregnant or is found to be pregnant should have her thyroid hormone levels monitored more closely. Some woman may need to have their dosage of medication increased by as much as 50% during pregnancy. Thyroid medication is safe to take during pregnancy.

A collaboration between a woman's endocrinologist and obstetrician will maximize the chances for a successful pregnancy and delivery and make the mother's postpartum adjustments as easy as possible.

Hypothyroidism Resulting From Pregnancy

One in every 20 women will develop hypothyroidism after pregnancy. This happens because they developed antibodies to their own thyroid prior to the pregnancy, and this caused an inflammation of the thyroid after delivery. This condition most often develops between four months to a year after delivery and usually resolves on its own. If it is long lasting or permanent, it is easily treated with medication.

Nice To Know:

Q: We tried to conceive for several years, and now I'm finally pregnant. My obstetrician did some blood work when I went to see her, and she says I'm at risk for thyroid trouble after the baby comes. I don't recall any doctor talking about my thyroid before. What does she mean?

A: Postpartum thyroiditis (an inflammatory condition of the thyroid that develops after delivery) affects about 5% to 9% of mothers. About 80% to 90% of women who develop postpartum thyroiditis had antibodies directed against their thyroid gland in their blood before their pregnancies. Ask your doctor what she found in your blood test results - do you have antithyroid antibodies in your blood? A consultation with an endocrinologist may be helpful.