



Post-Op Thyroid- / Parathyroid -ectomy Instructions

❖ What should I expect after my surgery?

- Your recovery will depend on why you had surgery, the type of surgery performed, and your previous activity level.
- Neck incisions heal rapidly. You may shower and wash gently with soap and water over the incision 24 hours after surgery.
- You will see swelling or bruising develop in the area around the incision 1-3 days after surgery. You may also notice swelling, firmness, a pulling sensation, or even some trouble swallowing. This often increases over the first 1-2 weeks and then begins to resolve over 6-8 weeks. These are normal sensations.
- You will likely be able to eat normally the morning after surgery, but if you experience any discomfort then stick to soft foods such as mashed potatoes, jelly, yoghurt etc for the first few days.
- Your scar will be most visible for the first 1-2 months after surgery, improve significantly over 2-3 months, and gradually fade over the next 6-9 months. Once the wound has fully healed, massage it frequently with cream or oil for at least 6 weeks. Massage improves the appearance of the scar.
- UV rays from sunlight can make your scar darker than normal. Once your surgical dressing has come off and any surgical adhesive has dissolved, please use sunblock (SPF >30) over your incision daily and reapply frequently when outdoors for long periods of time.
- Do not expose your incision to the lights used in tanning salons.
- Allow one full year for your incision site and scar to take its final form, colour, and consistency. The scars are often barely noticeable, but everyone heals their scars in their own way. If you are concerned about the appearance of your scar after a year, there are options for treatment.

❖ Will my neck hurt?

- Most patients experience very little pain from the incision and may complain more about a sore throat from the breathing tube. You may experience stiffness or soreness in your shoulders, back, or neck. Tension headaches may also be experienced and can take a few days to go away. These are common symptoms and are best treated with anti-inflammatories, warm compresses, and light massage. You may also use a heating pad on the affected areas for 15-20 minutes at a time several times a day. Do not sleep on the heating pad or leave the heating pad directly on the skin for extended periods of time to prevent accidental injury or burns.
- For a sore throat, you can try either warm or cool liquids for relief. You may also use throat lozenges or other soothing ingredients as needed.
- The skin just above and below your incision will feel numb. This will usually improve over several months, although this can be permanent in some patients.
- You may apply a cold pack over your incision to relieve any pain and help minimize swelling. This is most beneficial in the first 24 hours after surgery.
- Do not be afraid to move your neck. You may move your head in all four directions. Be careful about looking upward to any great extent so the edges of the incision do not separate.

❖ Will my voice be affected?

- Your voice may be slightly hoarse or weak after surgery. This is normal and does not mean there was damage to the nerves that make the vocal cords move. The breathing tube used during surgery often irritates the vocal cords. Your voice will usually return to normal within 6-8 weeks after surgery and often after only several days.

❖ **How do I take care of my incision?**

- 48 hours post-op, start applying Bactroban (generics such as Supiroban, Nuban etc are fine) every 2 hours and cover with an island-style dressing.

❖ **How will I manage my pain at home?**

- NSAIDs (non-steroidal anti-inflammatory drugs) such as ibuprofen, Nurofen, Arcoxia, Celebrex or acetaminophen (Panado) are most helpful for any pain experienced after thyroid or parathyroid surgery. In general, over the counter anti-inflammatories are more helpful than stronger narcotic pain medicines for these types of surgeries.
- To prevent overdosing on acetaminophen, do not take it at the same time as a narcotic medication that also contains acetaminophen, such as Tramacet or Oxynorm. You may take these two types of medications 4-6 hours apart as long as the total maximum daily dose of acetaminophen is not exceeded.
- A prescription for a stronger pain medication or narcotic (such as Tramacet or Oxynorm) will be given to you at the time of discharge. Do not feel you need to automatically fill this prescription. If you are doing well with over the counter medications alone, that is fine. The prescription is to be filled only if you feel you need it. Do not drive a car, operate other heavy equipment, or drink alcohol while taking narcotic medications.
- Narcotics may cause constipation. Stool softeners (Movicol – available without a prescription), fibre (fruits, bran, vegetables), and extra fluid may help. A stimulant laxative (Senokot) may also help.
- Do not take Milk of Magnesia. It competes with calcium supplements for adsorption.

❖ **Can I resume my previous medications?**

- Yes, unless directed not to by your doctor.
- Before discharge, be sure to review your medications with your doctor or inpatient medical team if you have any questions about what medications you should or should not take.

❖ **What new medications might I need to take?**

- Thyroid Hormone: If you had thyroid surgery, you may be prescribed a type of thyroid hormone replacement called levothyroxine (Synthroid, Levothroid, Levoxyl, etc.). You should take your thyroid hormone medication on an empty stomach and by itself. Avoid taking calcium or any other medication within an hour of taking your thyroid hormone pill. A blood test will be done in 6-8 weeks to ensure the amount prescribed is correct. If you have thyroid cancer and will need to have a radioactive iodine scan, you will likely be placed on liothyronine (Cytomel) instead of levothyroxine. After your radioactive iodine scan, you will be placed on levothyroxine.
- Calcium Supplement: Your body's calcium level may decrease after undergoing total thyroidectomy, completion thyroidectomy, or parathyroidectomy. The overall dose and the number of times during the day you should take the medication following surgery will depend on your surgeon's instructions.
- Vitamin D: If you are vitamin D deficient, your doctor may prescribe a Vitamin D supplement. The prescription should be filled before you leave the hospital as many pharmacies do not regularly stock these medications.

❖ **When should I call my doctor?**

Most patients have no problems after surgery, but if you are concerned, please do not hesitate to call us for the following situations:

- If you have trouble talking or breathing.
- If the area around your mouth/lips or the tips of your fingers on both sides of your body become numb and begin to tingle, this may indicate your calcium level is low. These symptoms may also be related to side effects of some pain medications, the position of the breathing tube during surgery, positioning of your arms and hands in the operating room, or how you were positioned when sleeping at home. Your calcium supplementation may need to be increased. Occasionally, we will ask you to have labs drawn.

- If you develop a fever greater than 38.6 degrees Celsius. Take your temperature only if you feel like you have a fever. It is common to have a low-grade fever in the late afternoon/early evening. This does not mean you have an infection.
- If you have difficulty breathing or note yellow sputum production when you cough.
- If your incision becomes red or begins to drain fluid.
- If you have difficulty urinating and feel like you aren't fully emptying your bladder.
- If you begin feeling worse several days after surgery rather than better.
- If you are discharged with a drain and the site becomes red, swollen, or you have a sudden, large change in the amount of drainage (more or less).
- If you experience significant nausea, vomiting or abdominal pain.

If you cannot reach your doctor, you will need to go to the Casualty Department for any of the above symptoms.

It takes 5-7 working days to get the test results from the laboratory.

Follow-up appointments are not required unless something seems wrong or if you are concerned about something. If that is the case please feel free to contact the rooms for an appointment.