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Thyroid Dysfunction in the Elderly

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Background and Aims: Thyroid dysfunction is common in the elderly and increases with age. The clinical picture is often vague, symptoms can be mistakenly associated with comorbidities rather than thyroid dysfunction. Both hypothyroidism and hyperthyroidism are among those responsible for the increase in overall mortality and the incidence of cardio- and cerebrovascular events. The work evaluates dysthyroidism in an Internal Medicine and Geriatrics department in patients with overt pathology and/or signs of thyroid dysfunction.

Materials and Methods: from October 2023 to June 2024, 449 patients were discharged (260 F and 189 M), mean age 85.2. In females, 98 hypothyroidisms and 14 hyperthyroidisms were highlighted and in males 40 and 2 with mean TSH values 1.9 mU/ml females and 2.7 mU/ml males.

Results: In females, 60 hypothyroidisms and 8 hyperthyroidisms were known and treated; in males, 25 hypothyroidisms and no hyperthyroidisms.

Discussion: an increase in TSH was detected in the elderly, in the absence of thyroid pathology. A thyroid evaluation is important because increased or reduced TSH, especially in the very elderly (TSH> 10 µIU/L or < 0.4 µU/ml) is clinically relevant if related to the clinical picture and its "fragility".

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