

Thyroid Disease

Summary of Recommendations for Thyroid Testing from National Organizations

Organization	Core Recommendation	Recommendation – Pregnant Women
American Academy of Family Physicians	Evidence is insufficient to recommend for or against routine screening for thyroid disease in adults. <i>(Clinical Considerations: http://www.aafp.org/patient-care/clinical-recommendations/all/thyroid.html)</i>	
American Association of Clinical Endocrinologists (AACE) and American Thyroid Association (ATA) Taskforce on Hypothyroidism in Adults	AACE recommends routine TSH measurement in older patients – age not specified – especially women. ATA recommends screening at age 35 yrs and every 5 yrs thereafter. <i>(Jeffrey R. Garber, Rhoda H. Cobin, Hossein Gharib, James V. Hennessey, Irwin Klein, Jeffrey I. Mechanick, Rachel Pessah-Pollack, Peter A. Singer, and Kenneth A. Woeber for the American Association of Clinical Endocrinologists and American Thyroid Association Taskforce on Hypothyroidism in Adults. Thyroid. December 2012, 22(12): 1200-1235. doi:10.1089/thy.2012.0205)</i>	It remains unclear if screening for hypothyroidism in pregnancy is beneficial. A consensus statement in 2004 and clinical practice guidelines in 2007 and 2011 found insufficient data to support a 1999 and 2005 recommendation for universal screening for thyroid dysfunction during pregnancy, but rather recommended aggressive case finding. <i>(Jeffrey R. Garber, Rhoda H. Cobin, Hossein Gharib, James V. Hennessey, Irwin Klein, Jeffrey I. Mechanick, Rachel Pessah-Pollack, Peter A. Singer, and Kenneth A. Woeber for the American Association of Clinical Endocrinologists and American Thyroid Association Taskforce on Hypothyroidism in Adults. Thyroid. December 2012, 22(12): 1200-1235. doi:10.1089/thy.2012.0205)</i>
American College of Obstetrics and Gynecologists		Thyroid testing is not a routine part of prenatal care and should be limited to women with symptoms of thyroid disease and those with a history of thyroid disease or other medical conditions associated with it, such as diabetes. <i>(Committee Opinion #381, Subclinical Hypothyroidism in Pregnancy, Obstetrics & Gynecology. October 2007. Practice Bulletin Number 148: Thyroid disease in pregnancy, April 2015. Obstet Gynecol. 2015;125: 996–1005 - recommendation to not perform routine screening for thyroid disease in pregnancy has not changed.)</i>
The Endocrine Society		The committee could not reach agreement regarding screening recommendations for all newly pregnant women. 1) Some members recommended screening of all pregnant women for serum TSH abnormalities by the ninth week or at the time of their first visit. 2) Some members recommended neither for nor against universal screening of all pregnant women for TSH abnormalities at the time of their first visit. These members strongly support aggressive case finding to identify and test high-risk women (Table 1) for elevated TSH concentrations by the ninth week or at the time of their first visit before and during pregnancy. <i>(Abalovich M, Alexander EK, Amino N, Barbour L, Cobin RH, De Groot L, et.al. Management of Thyroid Dysfunction during Pregnancy and Postpartum: An Endocrine Society Clinical Practice Guideline. J Clin Endocrinol Metab, August 2012, 97(8):2543–2565.)</i>
United States Preventive Services Task Force	Current evidence is insufficient to assess the balance of benefits and harms of screening for thyroid dysfunction in nonpregnant, asymptomatic adults. <i>(Released March 2015.)</i>	

Guidelines are intended to be flexible. They serve as reference points or recommendations, not rigid criteria. Guidelines should be followed in most cases, but there is an understanding that, depending on the patient, the setting, the circumstances, or other factors, care can and should be tailored to fit individual needs.