

# THYROID GLAND

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Largest endocrine gland situated in front of the larynx, bilobed connected by a bridge of tissue called thyroid isthmus.

## Histology

Thyroid is made up of multiple follicles lined by cuboidal epithelial cells.

Thyroid gland is composed of a large number of closed **follicles**. These follicles are lined with cuboidal epithelial cells, which are called **follicular cells**. Follicular cavity is filled with a colloidal substance known as **thyroglobulin**, which is secreted by the follicular cells.

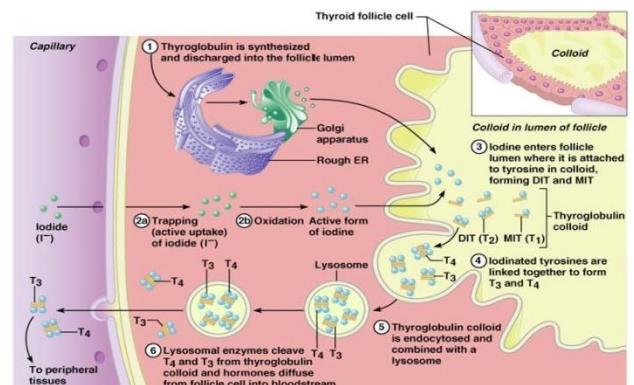
## Thyroid hormones

- Thyroxine (T<sub>4</sub>)-Follicular cells
- Tri-iodo-thyronine(T<sub>3</sub>)-Follicular cells
- Calcitonin-Para follicular cells

**Synthesis of thyroid hormones occurs in five stages:**

1. Thyroglobulin synthesis
2. Iodide trapping
3. Oxidation of iodide
4. Transport of iodine into follicular cavity
5. Iodination of tyrosine
6. Coupling reactions

## SYNTHESIS OF THYROID HORMONES



(Picture courtesy: <http://www.biosciencenotes.com/synthesis-of-thyroid-hormones/>)

## Actions of thyroid hormones

- **Calorigenic action**  
T<sub>3</sub> and T<sub>4</sub> increase the O<sub>2</sub> consumption of almost all metabolically active tissues except adult brain, testis, spleen, lymph node, ovary, uterus and ant. pituitary. T<sub>3</sub> is more effective than T<sub>4</sub>
- **On metabolism**  
On protein metabolism-anabolism of protein  
Thyroxine stimulates almost all processes involved in the metabolism of carbohydrate  
Thyroxine decreases the fat storage by mobilizing it from adipose tissues and fat depot
- **On cardiovascular system**

T4 increases heart rate and force of myocardial contraction. Increase in cardiac output increase the systolic Bp

- T4 increases body temperature and produce vasodilatation thus decrease peripheral resistance diastolic Bp
- On bone marrow metabolism
- T4 deficiency leads to anemia and excess causes erythropoiesis
- **On vitamin:** Increase the demand for co-enzymes and vitamins from which they are formed. hepatic conversion of beta carotene to vit-A and retinine
- **On lactation:** maintenance of galactopoiesis
- **Gonadal development** , development of secondary sexual character

### **Serum thyroid hormone and TSH Level**

Total T3 = 0.12 µg/dL

Total T4 = 3-8 µg/dL

Serum TSH = 0.2-5 microIU/ml

### **Applied Physiology**

#### **Goiter**

Enlargement of thyroid gland is called goiter

#### **Goitrogenic agents:**

- Iodide deficiency. (normal intake-100-200 microgm )
- Excess iodide
- Vegetables of brassicae family

#### **Goiter in Hyperthyroidism – Toxic Goiter**

Toxic goiter is the enlargement of thyroid gland with increased secretion of thyroid hormones, caused by thyroid tumor.

#### **Goiter in Hypothyroidism – Non-toxic Goiter**

Non-toxic goiter is the enlargement of thyroid gland without increase in hormone secretion. It is also called hypothyroid goiter (Fig. 67.6).

Based on the cause, the non-toxic hypothyroid goiter is classified into two types.

1. Endemic colloid goiter-due to deficiency of iodine
2. Idiopathic non-toxic goiter-unknown cause

#### **Hypothyroidism**

Due to reduced T3 and T4

It is of two types: Myxoedema and cretinism

**Myxoedema:** Hypothyroidism in adults

**Features of Myxoedema**

- Swelling of face
- Baggy eyes
- Non-pitting type of edema
- Atherosclerosis

**Cretinism**

Cretinism is the hypothyroidism in children, characterized by stunted growth

**Causes for cretinism**

Cretinism occurs due to congenital absence of thyroid gland, genetic disorder or lack of iodine in the diet.

**Features of cretinism**

- Few weeks after birth, the baby starts developing signs like sluggish movements and croaking sounds while crying. Unless treated immediately, the baby will be mentally retarded permanently.
- Stunted growth with a bloated body
- Protruded abdomen with enlarged protruded tongue
- Failure of sexual development
- Other characteristic features of hypothyroidism

**Hyperthyroidism**

Increased levels of free T4 and T3

Common Cause- Grave's disease- autoimmune disease

**Signs and Symptoms of Hyperthyroidism**

1. Intolerance to heat as the body produces lot of heat due to increased basal metabolic rate caused by excess of thyroxine
2. Increased sweating due to vasodilatation
3. Decreased body weight due to fat mobilization
4. Diarrhea due to increased motility of GI tract
5. Muscular weakness because of excess protein, catabolism
6. Nervousness, extreme fatigue, inability to sleep, mild tremor in the hands and psychoneurotic symptoms such as hyperexcitability, extreme anxiety or worry. All these symptoms are due to the excess stimulation of neurons in the central nervous system
7. Toxic goiter
8. Oligomenorrhea or amenorrhea
9. Exophthalmos, lid lag
10. Polycythemia
11. Tachycardia and atrial fibrillation
12. Systolic hypertension
13. Cardiac failure.



