Pre-Congress Symposium 8
Thyroid + Radiation Protection Committee / European Thyroid Association (ETA) / European Society of Endocrine Surgeons (ESES)
Saturday, October 17, 13:00-16:00

Session Title
Update on Treatment of Hyperthyroidism

Chairpersons
Luca Giovanella (Bellinzona, Switzerland)
Kristien Boelaert (Birmingham, United Kingdom)
Christian Scheuba (Vienna, Austria)

Programme
13:00 - 13:20 Luca Giovanella (Bellinzona, Switzerland): Diagnosis of Diseases Leading to Hyperthyroidism
13:20 - 13:40 Kristien Boelaert (Birmingham, UK): Medical Treatment of Hyperthyroidism
13:40 - 14:00 Philipp Riss (Vienna, Austria): Surgical Treatment of Hyperthyroidism
14:00 - 14:15 Discussion

14:15 - 14:45 Coffee Break
14:45 - 15:05 Désirée Deandreis (Torino, Italy): Radioiodine Treatment of Hyperthyroidism
15:05 - 15:25 Lidia Cunha (Ermesinde, Portugal): Radioiodine for Benign Disease - Radiation Protection
15:25 - 15:45 Ioannis Iakovou (Tessaloniki, Greece): Risk of Cancer Following Radioiodine Treatment for Hyperthyroidism
15:45 - 16:00 Discussion

Educational Objectives
1. Refresh on hyperthyroidism diagnosis and differential diagnosis
2. Refresh on medical and surgical treatment of hyperthyroidism
3. Update on radioiodine treatment of hyperthyroidism, including dosimetry, radiation protection, side effects and risk of stochastic effects.

Summary
Hyperthyroidism is an excessive concentration of thyroid hormones in tissues caused by increased synthesis of thyroid hormones, excessive release of preformed thyroid hormones, or an endogenous or exogenous extrathyroidal source. The most common causes of an excessive production of thyroid hormones are Graves disease, toxic multinodular goiter, and toxic adenoma.
The most common cause of an excessive passive release of thyroid hormones is painless (silent) thyroiditis, although its clinical presentation is the same as with other causes. Hyperthyroidism caused by overproduction of thyroid hormones can be treated with antithyroid medications (methimazole and propylthiouracil), radioactive iodine ablation of the thyroid gland, or surgical thyroidectomy. The choice of treatment depends on the underlying diagnosis, the presence of contraindications to a particular treatment modality, the severity of hyperthyroidism, the side effects profile and the patient’s preference.

**Key Words**
Hyperthyroidism, Thyrotoxicosis, Radioiodine, Surgery, Antithyroid Drugs