PARATHYROIDECTOMY PATIENT INFORMATION SHEET

There are typically four parathyroid glands in the neck. They are located behind the butterfly shaped thyroid gland (hence the term parathyroid).
They are very small (each the size of a small pea) and they control how much calcium is in the body. Most of the time the parathyroid glands work perfectly. Occasionally, one or more of the parathyroid glands can become overactive.
This causes the body to have too much calcium in the bloodstream, a condition called primary hyperparathyroidism. This can be detected by a simple blood test to determine the level of your body's calcium and parathyroid hormone (also referred to as PTH).
While calcium is important to one's health, too much calcium can produce several unwanted symptoms. These can include muscle and bone pain, osteoporosis, fatigue, weakness, kidney stones, and depression. Usually, the cause of primary hyperparathyroidism is a benign (non-cancerous) tumor in one of the parathyroid glands. This tumor is called a parathyroid adenoma. There are other less common causes of excessive calcium as well. Sometimes, all four glands become overactive, a condition called parathyroid hyperplasia.
Occasionally more than one gland develops into an adenoma. In most cases, primary hyperparathyroidism is treated with surgery to remove the abnormal parathyroid gland(s).
Surgery is called minimally invasive parathyroidectomy (MIRP). After removing the abnormal parathyroid gland(s), your calcium and PTH levels will return to normal and symptoms will soon resolve.
Most patients who undergo MIRP parathyroid surgery are discharged home from the hospital the same day.
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SURGICAL RISKS/COMPLICATIONS:

1. BLEEDING
2. HYPO-PARATHYROIDISM OR LOW BLOOD CALCIUM
3. HOARSENESS: Parathyroid surgery involves dissection around the nerves that control the vocal
4. cords. The nerve travels up from below the vocal cords and is named the recurrent laryngeal nerve. Surgery to the parathyroid glands places all these nerves at risk for injury. One-sided surgery places the nerves on that side at risk for injury. Surgery to both sides places all the nerves at risk for injury. Permanent damage to these nerves is rare. Temporary injury to these nerves occurs on occasion. The symptoms of laryngeal nerve injury depend on which nerve(s) is affected and can be as minor as mild hoarseness
5. INFECTION
6. POOR SCARRING
7. NON-RESOLUTION OF THE PROBLEM: 15% chance that the first surgery is not curative, and further surgeries might be necessary.

As with any type of surgery, the risks of *anaesthesia* such as drug reaction, breathing difficulties and even death are possible. Please discuss these risks with your anaesthesiologist. Fortunately, with this procedure, anaesthetic problems are exceedingly rare.