

## PARATHYROID SURGERY PRE-OPERATIVE INSTRUCTIONS

### **Why do I need Parathyroid Surgery?**

Parathyroidectomy is surgery to remove one or more of your parathyroid glands. The parathyroid glands control the level of calcium in your blood and bones. Most people have four (sometimes more) tiny parathyroid glands tucked behind the thyroid in the front part of the neck. When a parathyroid gland grows abnormally, the blood calcium level can rise too high and the bones may become weak. Without surgery, eventually the bone and kidneys may be damaged and high blood pressure may develop or worsen. With successful surgery, these risks are reduced, and bone pain may resolve quickly. After several months, some patients may notice improved energy, mood or clearer thinking. It is important that you understand this information so ask your surgeon about anything that is unclear. Overall, surgery for hyperactive parathyroid glands has a high success rate. However, you may choose not to have this treatment, so long as you are aware of the risks of your condition.

### **How do I get ready for Parathyroid Surgery?**

**Avoid all medications that may thin your blood, including vitamin E, Fish oil and all non-steroidal medications (NSAIDs) such as Motrin, Advil, Aleve and ibuprofen for 7 days before surgery, and hold aspirin and aspirin-containing medications for 10 days before surgery. If you don't stop these medications appropriately, your surgery will be cancelled.** It is OK to take Tylenol. Please discuss the management of Coumadin, Plavix, Pradaxa, Eliquis and Xarelto (or any other blood thinners) with your surgeon pre-operatively.

Some patients who have a parathyroid operation stay in the hospital overnight, but most patients are discharged home the same afternoon after an observation period. When you arrive at the hospital the morning of your surgery, you should be prepared to stay overnight. You'll need to plan for a ride home and for your care and recuperation after the operation. If possible, you should try to find someone to help you at home the next day. Recovery is generally rapid.

### **What happens to me during the operation?**

The anesthesia doctor will meet you and talk with you the morning of surgery. **Your operation may take place earlier or later than the scheduled time.** Please bring a book to read or a small electronic device to pass time. In the operating room, you will receive a relaxing medication through an intravenous line and then you will go to sleep under a general anesthetic.

After giving numbing medicine, the surgeon will make a small horizontal incision at the front of the neck and then spread the muscles to locate the abnormal parathyroid gland(s) and remove them. Your parathyroid hormone level may be measured several times to help find and remove all the abnormal tissues. These measurements are sometimes taken from an IV site placed in the foot or leg. If your surgeon suspects a cancer, she may remove some of the nearby tissues as well, including thyroid tissue. The majority of patients do not need to have stitches removed after the surgery.

### **What happens after the operation?**

After you wake up, you may have a sore throat from the breathing tube. You may have nausea. You may have mild hoarseness. If the surgeon places a small tube to help drain fluid from under the skin of the neck, this will be removed before you go home. Most patients are discharged from the hospital the afternoon of surgery. Do not expect to leave immediately after surgery.

# PARATHYROID SURGERY PRE-OPERATIVE INSTRUCTIONS (continued)

You may need to stay for an observation period or overnight. If you are sent home on new medications, take them exactly as directed by your physician. You should call for an appointment to see your surgeon in the office in 1-2 weeks (if not already scheduled). Most patients find that Regular or Extra Strength Tylenol takes care of pain from the incision very nicely.

Many patients allow for 3-14 days off work after the surgery, but you may return to work earlier – as soon as you feel ready. If your employer has a form to be completed, please mail to the FVSS office, FAX to (920) 358-1064 or bring to your first post-operative visit.

You should shower the day after the operation, using mild soap to lightly wash the incision. Do not scrub the Dermabond glue or Steri-Strips off your wound. You may eat regular food. You may take stairs. There are no restrictions on lifting or activity after the surgery. You may drive and work as soon as you feel it is safe. Do not drive if taking narcotic medication. You will be prescribed calcium carbonate (TUMS ULTRA strength 1000 mg/tablet) tablets to take after surgery as your normal parathyroid gland(s) have been suppressed by overactive glands and also to aid in bone rebuilding.

## **What are the risks of Parathyroid Surgery?**

The nerves of the voice box (laryngeal nerves) may be injured so your voice may be temporarily or permanently soft, hoarse or weak and/or there may be trouble swallowing. The chance of permanent vocal cord paralysis is low. If the calcium level drops, you may need temporary or permanent vitamin D and calcium medications. The chance of needing calcium and/or vitamin D medication permanently is low. Bleeding or infection may require treatment, but these are uncommon. If the abnormal parathyroid gland is elsewhere in the body, your high calcium level may persist. Abnormal parathyroid tissue may persist or grow back. If thyroid surgery is required, you may require thyroid medication permanently. Your anesthesia doctor will tell you about risks associated with having a general anesthetic. **If you have any questions or concerns about these risks, please discuss further with your surgeon prior to the day of surgery.**

## **When should I call?**

Your surgeon's phone number is on the front of this sheet. Please call the office during business hours (weekdays from 8:30 am- 5:00 pm) if you have any questions. The pathology report should be back within 1 week post-op and will be discussed with you at your post-op visit. Our phones are answered 24 hours/7 days a week by an on-call surgeon **for emergencies only**. Stiff neck, constipation, headache, muscle aches, hoarseness, insomnia and medication questions are almost always not an emergency.

During the first several days after surgery, you may notice numbness in your lips or fingertips. Mild tingling is normal and common. **Be sure to take your calcium pills exactly as directed.** Please call about mild tingling during business hours, so your calcium medication can be adjusted if necessary. Call the office back about these symptoms at any hour if they worsen. **Call the office ASAP or go to the ER if you develop severe tingling, hand cramping or severe weakness.**

Most incisions develop mild swelling under the stitches. This can look like a hotdog lying sideways or a small chicken nugget sized pouch. Mild swelling is normal and expected and will slowly go away. Mild bruising is also normal. Please call if you have persistent vomiting or develop a fever above 101 degrees (take your temperature with a thermometer first).

***For severe swelling or symptoms, call the emergency line promptly.  
For difficult breathing or a life-threatening emergency, go the nearest emergency room.***

Fox Valley Surgical Specialists  
(920) 731-8131 or (800) 574-3872  
[www.FoxValleySurgical.com](http://www.FoxValleySurgical.com)