Thyroid Dysfunction in Patients on Regular Hemodialysis

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Dear Sir,

Thank you for referring the letter of L. Hegedüs, commenting our article on thyroid dysfunction in patients on regular hemodialysis [1]. We were unaware of their findings on the same subject [2] as they appeared in Nephron while ours were still in press.

We congratulate them for the strict method they used to compare thyroid size in normals and patients on hemodialysis and we agree that clinical evaluation only is inaccurate. However, the echographic approach, as used by them, would be an enormous task in Belgium and perhaps not without bias. Indeed, whereas the urinary excretion of iodine is comparable in Copenhagen and Brussels, the prevalence of goitre is not [3]: nonexistent in Denmark but significant in Belgium. Therefore, it would be very difficult to define accurately a 'normal' gland size and we are compelled to rely upon less strict criteria.

We cannot therefore escape the conclusion that our data suggest (certainly do not prove) that in Brussels dialysis patients do not differ from the 'normal' population as far as gland size (and iodine content) is concerned. As a result we will not invest more time in looking for an unknown factor that eventually might explain the appearance of goitre in uremic patients.

References

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