

# THYROID DISEASE

Here I will talk about Thyroid and their main goal to support our bodies.

*Human Disease  
Project*

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## Introduction

Thyroid is a small bowtie or butterfly-shaped gland, you can find it wrapped around the windpipe, behind and below the Adam's apple area. The thyroid produces several hormones, of which two are key: triiodothyronine (T3) and thyroxine (T4). These hormones help oxygen get into cells, and make your thyroid the master gland of metabolism.

The thyroid has the only cells in the body capable of absorbing iodine. The thyroid takes in iodine, obtained through food, iodized salt, or supplements, and combines it with the amino acid tyrosine. The thyroid then converts the iodine/tyrosine into the hormones T3 and T4. The "3" and the "4" refer to the number of iodine molecules in each thyroid hormone molecule. In the prime of your thyroid, out of your entire thyroid, 80% will

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be T4 and 20% T3. T3 is considered, the biologically more active hormone -- the one that actually functions at the cellular level and is also considered several times stronger than T4. Once released by the thyroid, the T3 and T4 travel through the bloodstream. The purpose is to help cells convert oxygen and calories into energy.

As mentioned, the thyroid produces some T3. But the rest of the T3 needed by the body is actually formed from the mostly inactive T4 by a process sometimes referred to as "T4 to T3 conversion." This conversion of T4 to T3 can take place in some organs other than the thyroid, including the hypothalamus, a part of your brain. The thyroid is part of a huge feedback process. The hypothalamus in the brain releases Thyrotropin-releasing Hormone (TRH). The release of TRH tells the pituitary gland to release Thyroid Stimulating Hormone (TSH). This TSH, circulating in your bloodstream, is what tells the thyroid to make thyroid hormones and release them into your bloodstream.

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## Causes

Radiation Treatment	Exposure to radiation	Lithium	Chronic Fatigue syndrome
Surgical Treatment	Overconsumption of iodine	Cordarone (heart drug)	Family history
Shortage of iodine in diet	Overconsumption of isoflavone	Overconsumption of uncooked food	Radioactive Iodine treatment

## Symptoms

Thyroid Nodules-	Lumps In the Thyroid gland
Hypothyroidism -	An Underactive Thyroid
Hyperthyroidism -	An overactive Thyroid
Goiter-	An enlarged Thyroid
Thyroid Cancer-	Malignant Thyroid nodules or tissue
Thyroiditis-	Inflammation of Thyroid

## Remedies

Theirs really only one substantially effective home remedy and that is to fully cleanse the system and the adaptation of a new diet, combined with adequate rest and relaxation. To begin with, juices of fruits such as orange, apple, pineapple, and grapes may be taken every two or three hours from 8 am to 8 pm for five days. The bowels, Intestine or gut, should be cleaned daily with lukewarm water.

After the juice fast, the patient may spend further three days on fruits and milk, taking three meals a day of juicy fruits such as apple, pineapple, grapes, and papaya, with a glass of milk, at five hourly intervals. Thereafter, the patient may adopt a well-

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balanced diet consisting of seeds, nuts and grains, vegetables and fruits. The patient should take plenty of rest and spend a day in bed every week for the first two months of the treatment. More and more exercise should be taken after the symptoms subside.

The appetite of the thyroid patient is usually very large and the weight reduction cannot be prevented for some time. This is because until the heart beat slows down and the tremors stop, there will be incomplete assimilation of food, but as soon as the balance is restored, weight will slowly increase. To help the absorption of food, a narrow waist compress and, later, a neck compress should be worn for five nights a week. As weight increases, the almost constant hunger will gradually disappear, on no account should any stimulants be administered to create an appetite.

Certain foods and fluids are extremely injurious for thyroid patients and should be avoided by them. These include white flour products, white sugar, flesh foods, fried or greasy foods, preserves, condiments, tea, coffee and alcohol.

**Keep in Mind** no drugs should be taken as they cause irritation in the tissues so speak with your **Doctor** before taking anything. **Levothyroxine**, also **L-thyroxine** or **T<sub>4</sub>**, is a synthetic form of thyroid hormone (or thyroxine), the hormone normally secreted by the follicular cells of the thyroid gland. Levothyroxine is used to treat thyroid hormone deficiency, and occasionally to prevent the recurrence of thyroid cancer. Levothyroxine differs from natural thyroxine in that it is chemically in the chiral *L*-form. The related drug dextrothyroxine (D-thyroxine) was used in the past as a treatment for **hypercholesterolemia** (elevated cholesterol levels) but **was withdrawn** due to cardiac

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side-effects. Iodine is undoubtedly most helpful in many cases, but it should be introduced in organic form all foods containing iodine should be taken liberally. These are asparagus, cabbage, garlic, onion, oats, pineapple, whole rice, tomatoes, watercress and strawberries.

Great care must be taken never to allow the body to become exhausted and any irritation likely to cause emotional upset should be avoided. The cure of thyroid disease is not a speedy one and there is often a recurrence of symptoms but these should gradually become less pronounced. Strict adherence to diet is essential for complete cure. Half the daily intake of food should consist of fresh fruits and vegetables and the starch element should be confined to whole wheat products and potatoes. Potatoes are the most valuable form of starch. They should preferably be taken in their jackets. The protein foods should be confined to cheese, peas, beans lentils and nuts. All fresh proteins must be avoided.

The diet outlined here should be strictly adhered to for a year and the compresses on neck and waist applied for five consecutive nights in a week for two months and discontinued for one month. Water treatments should be taken to increase skin elimination. Application of sponge to the entire body before retiring and a cold sponge on rising will be very helpful. It is most important that the bowels are kept working efficiently to avoid danger of a toxic condition of the blood arising from that source.

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All efforts should be made to prevent emotional stress. There may be slight recurrence of this extremely nervous complain for some times, but the attacks will become less severe and of shorter duration as the treatment progresses. And above all, there must be no lessening of the patient's efforts to help him because success can only be attained by assiduous efforts.

## Cures

Many doctors will not treat patients who present clinical symptoms of hypothyroidism, test positive for Hashimoto's antibodies, but have a normal TSH level -- known as being "euthyroid" -- or, "in the normal range."

There are, however, some endocrinologists, as well as holistic MDs, osteopaths and other practitioners who believe that the presence of thyroid antibodies alone is enough to warrant treatment with small amounts of thyroid hormone. If you've tested positive for antibodies, and have a TSH in the "normal range," but still don't feel well, you may wish to consult with a practitioner who has this philosophy. The practice of treating patients who have Hashimoto's thyroiditis but normal range TSH levels is supported by a new study, reported on in the March 2001 issue of the journal *Thyroid*. In this study, German researchers reported that use of levothyroxine treatment for cases of Hashimoto's autoimmune thyroiditis where TSH had not yet

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elevated ("euthyroid") beyond normal range could reduce the incidence and degree of autoimmune disease progression.

In the study of 21 patients with euthyroid Hashimoto's Thyroiditis (normal range TSH, but elevated antibodies), half of the patients were treated with levothyroxine for a year, the other half were not treated. After 1 year of therapy with levothyroxine, the antibody levels and lymphocytes (evidence of inflammation) decreased significantly only in the group receiving the medication. Among the untreated group, the antibody levels rose or remained the same.

The researchers concluded that preventative treatment of normal TSH range patients with Hashimoto's disease reduced the various markers of autoimmune thyroiditis, and speculated that that such treatment might even be able to stop the progression of Hashimoto's disease, or perhaps even prevent development of the hypothyroidism.

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