



Hashimoto's thyroiditis is a chronic inflammation of the thyroid gland caused by the body's own antibodies. The body's immune system is directed against its own thyroid, attacks it and triggers an inflammatory reaction in the organ. This can gradually lead to complete destruction of the thyroid gland. As the thyroid gland produces too little and at some point no more hormones during the course of the disease, there is a risk of hypofunction. You must therefore have your thyroid function checked regularly. The missing thyroid hormones can be replaced with tablets.



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**To treat the inflammatory process**, the intake of selenium (100 to 200 µg daily) and zinc (up to 25 mg daily) is recommended. Selenium has been shown to have a positive influence on the course of the disease and the well-being. It is also important to ensure that there is an adequate supply of B vitamins, iron (check ferritin levels) and magnesium.

The level of **TPO antibody titer** can be reduced by selenium intake depending on the dose, as several studies have shown. At the same time, patients felt better. In order to achieve an effect on the antibodies, 180-200 g of sodium selenite must be taken daily. At a dose of 100 micrograms per day, the antibody concentration did not change.

Life expectancy is not limited and with the right treatment, complaints soon recede. The thyroid gland shrinks due to inflammation and produces less of its own hormone. This thyroid underfunction is compensated by a thyroid hormone preparation, which must be taken regularly. The doctor will find the right dose of the hormone together with you. The target values are different from those in a GP practice. Since the cause of the disease cannot be cured, you may need to take the drug for a very long time in order not to get any further discomfort.

In case of underfunction by Hashimoto thyroiditis, malregulation of the female hormones often occurs. This is mainly due to disorders of menstrual bleeding. In addition to extended cycles, shortened cycles, interlude or continuous bleeding may also occur. Complete absence of menstrual bleeding is also possible, and often thyroid underfunction is the reason that the desired child is absent. If the subfunction is adequately treated with thyroid hormones, a normalization of the cycle disorders is also to be expected. Otherwise, an endocrinologically experienced gynaecologist should be consulted to rule out other causes.

#### **Is it right to avoid additional iodine in Hashimoto disease?**

Only large amounts of iodine (e.B.g. in the form of iodine tablets or X-ray contrast agents) can exacerbate the disease and should therefore be avoided. For pregnant women, it is very important even for the child to take iodine in small amounts.



## Autoimmune thyroid disease: When the defense goes crazy

**Multiple sclerosis, rheumatism, Crohn's disease, thyroid diseases: an autoimmune disease is difficult to control and is usually detected too late. But there are exciting new therapeutic approaches.**

It is not viruses or bacteria that make you sick, neither cancer cells nor benign growths. **In the case of an autoimmune disease, the body attacks itself.** And this is no longer a rare whim of nature, but a real civilization disease: in the industrialized countries, the number of people affected is increasing dramatically. The majority of them are women, often between the ages of 20 and 40, but also more and more children.

**There are about four million patients in** Germany, most of whom suffer from psoriasis, the thyroid disease Hashimoto-Thyroiditis (thyroid disease with auto-immune antibodies), rheumatic diseases or chronic intestinal inflammation such as Crohn's disease and ulcerative colitis. Around 60 autoimmune diseases are known, and other conditions are suspected of having autoimmune causes, such as schizophrenia, autism or eating disorders.

Hardly anything poses a major mystery to medicine: How do these diseases arise? What course will they take on a case-by-case basis? And how can they be cured? Dealing with an autoimmune disease means, above all, dealing with many questions.

### Why are women predominantly affected?

Women, for example, are up to five times more likely to suffer from widespread thyroid diseases, three times more likely to suffer from rheumatoid arthritis, and nine times more likely than men to suffer from Sjögren's syndrome, which affects saliva and tear glands.

**Apparently, female sex hormones play an important role** in this: often the disease breaks out after hormonal major events, such as childbirth or menopause. But estrogens can also provide relief: many rheumatism patients fare much better during pregnancy. The mother-to-be's defense system is changing to tolerate the child's foreign body, and perhaps that weakens self-attacks.

### What triggers the false alarm in the immune system?

What is certain is that **there is a hereditary predisposition.** It is always whole groups of genes that distinguish healthy from the sick, and many also play a role in several autoimmune diseases, e.g. Crohn's disease and psoriasis. "However, these genes never mean black or white, but form a kind of risk network," explains Prof. Stefan Schreiber, spokesman of the research association "Clusters of Excellence In-Inflammation Research".

How else could the number of autoimmune diseases have increased so significantly in recent years? **The importance of external factors must be enormous.** For example, toxins: Smoking doubles the likelihood of joint rheumatism.

Those who carry the corresponding disease genes even increase their risk by 16 times. Lupus erythematosus is blamed, among other things, on plasticizers in cosmetics. And contact with mineral oil and silicone dust in the workplace has been shown to increase the risk of joint rheumatism.

In addition, our changing dietary habits could also affect our immune system. Inflammatory bowel diseases are on the increase, and celiac disease is blamed for the early administration of cereal-containing baby food. And stress? **Many patients report that psychological stress can trigger a surge in disease.** Nevertheless, according to Stefan Schreiber, it is not the cause of the disease:

"Stress modulates the symptoms, not the inflammation itself." Holistic physicians attach a higher importance to the psyche.

Another thesis: **Instead of stress, boredom is behind the burnout of the defense.** Hygiene, medications and vaccinations have pushed back infections and parasites, so that the immune system hardly knows external enemies and is now looking for new, body-own goals. There is also evidence for this hypothesis: threadworms that settle in the intestine significantly weaken the course of multiple sclerosis. This is because the subtenants influence the immune system: inflammatory substances, which are also involved in MS, are sometimes rendered harmless.

### **What happens with an autoimmune disease?**

Actually, the patrols of our defense fight everything foreign. As soon as they detect cells with unknown identity cards, they sound the alarm, call in more troops and start building antibodies. In the thymus, a gland below the sternum, the so-called T-cells are trained to recognize and spare their own cell types in all their diversity. In the case of autoimmune diseases, however, cells are released that react to their own tissues like a foreign body. This causes **inflammation that no longer subsides, the tissue can no longer perform its functions and ends up dying.**

### **Why does it often take years to diagnosis?**

Many sufferers feel misunderstood and despairing by their doctors until the disease is finally recognized. This is also due to the fact that **many autoimmune diseases initially cause very diffuse problems**, including itching, depressive mood or loss of libido.

And even the correct diagnosis does not mean that the complaints are taken seriously. "A bit of gut, some colleagues say," says gastroenterologist Schreiber of his patients' experiences with Crohn's disease. Waiting to see how sometimes it is advised can be dangerous. Joint rheumatism can even be brought to a complete standstill if treated in time. "In the first six months, the cards are laid," says Prof. Angela Zink of the German Rheumatism Research Center in Berlin.

### **Can you predict the course of the disease?**

**Autoimmune diseases usually run in bursts.** They flare up abruptly and then gradually flared again. But no one can predict when the next outbreak will come. Multiple sclerosis, for example, in most cases passes 10 to 15 years after the first boost into a permanent, constantly progressive disability. In 10 to 20 percent of those affected, however, the disease quickly takes an unfavorable course.

### **Is there hope for a cure?**

**To this day, there is no therapy** that puts a misguided defense system back on track. The strongest weapon in the disease boost is still cortisone because it paralyzes the immune system. More specifically than cortisone, a newer form of therapy, some of which is still in development, with so-called monoclonal antibodies, intervenes in the defense process: they selectively block, for example, a signaling substance that is at the center of the inflammatory process.

### **What can i do on my own?**

A lot: In rheumatism and MS, sports and movement therapies counteract reduced mobility. The change of diet can be helpful, because some foods obviously inhibit or promote the production of inflammatory substances. Thus, the avoidance of arachidonic acid from meat and eggs often shows favorable effect.

**It is almost always positive to relieve stress or to learn relaxation techniques.** In addition, the psychological strengthening of the affected affects their immune system. The exchange with other stakeholders can also be important: there are many very active self-help groups.