Should women be screened for postpartum hypothyroidism?

**Bottom line**
There are no RCTs or Cochrane reviews to guide whether to screen for postpartum thyroiditis. Organizations including the US Preventive Services Task Force (USPSTF), the American College of Obstetricians and Gynecologists (ACOG), the Endocrine Society, and the American Thyroid Association (ATA) have noted that evidence is insufficient to screen all women for postpartum thyroiditis. Yet, postpartum thyroiditis is common and should be considered in women with symptoms including low energy, postpartum blues or depression, weight gain, cold intolerance, palpitations, abnormal bleeding, and poor milk production.

**Evidence summary**
Postpartum thyroiditis typically progresses from transient thyrotoxicosis to transient hypothyroidism and eventually back to normal thyroid activity. Postpartum thyroiditis develops in approximately 8% (range, 1.1%–16.7%) of pregnant women, and 10% to 20% of women with postpartum thyroiditis develop permanent hypothyroidism.\(^1\)

There are no RCTs for an evidence-based recommendation whether to screen for postpartum thyroiditis. A cohort study of 605 asymptomatic women found postpartum thyroiditis developed in 7.8%.\(^2\) Of these women, only 11% had permanent hypothyroidism. No patients needed therapy for thyrotoxicosis, and only 40% who developed hypothyroidism required treatment.\(^2\) Based in part on these findings, ACOG recommended against universal screening for postpartum thyroiditis.\(^3\)

Other organizations also recommend against screening all postpartum women for thyroid abnormalities, including the USPSTF,\(^4\) the Endocrine Society,\(^5\) and the ATA.\(^6\)

However, according to ACOG, assessment for postpartum thyroiditis with thyroid-stimulating hormone (and perhaps a reflexive free T4) should take place when indicated by history or physical examination.\(^3\) Signs and symptoms that may prompt screening include low energy, postpartum blues or depression, weight gain, cold intolerance, palpitations, abnormal bleeding, and poor milk production. Most of these findings are common in postpartum women and providers—in collaboration with their patients—can decide whether evaluation for postpartum thyroiditis is warranted.

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**REFERENCES**

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Evidence-Based Practice learning objectives

1. To become knowledgeable about evidence-based solutions to commonly encountered clinical problems.
2. To understand how ground-breaking research is changing the practice of family medicine.
3. To become conversant with balanced appraisals of drugs that are marketed to physicians and consumers.