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Thyroid Disorders in Pregnancy in Elbasani District

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Abstract

Background: Thyroid dysfunction is a common endocrine disorder in pregnancy, influencing maternal and fetal health.

Aim: This study aims to assess the prevalence of thyroid function categories (euthyroidism, hypothyroidism, and hyperthyroidism) among pregnant women and explore associations with parity, gestational period, sociodemographic factors, and thyroid-stimulating hormone (TSH) levels.

Study design: This is a cross-sectional study.

Methods: The study was conducted in 2024 at the Endocrinology Outpatient Service in Elbasan, Albania, including 121 pregnant women. Data collection involved clinical evaluations and laboratory measurements of TSH levels. Women were classified as euthyroid, hypothyroid, or hyperthyroid and stratified based on parity (primigravida vs. multigravida), gestational period (trimester), age, residence, socioeconomic status, and education level.

Results: Of the 121 participants, 70.2% were euthyroid, 19.8% had hypothyroidism, and 9.9% had hyperthyroidism. There was no significant association between thyroid function and parity ($p = 0.962$) or gestational period ($p = 0.999$). Additionally, age ($p = 0.999$), residence ($p = 0.958$), socioeconomic status ($p = 0.999$), and education level ($p = 0.998$) did not significantly impact thyroid function. TSH levels varied significantly between groups ($p < 0.001$), with euthyroid women having a mean TSH of

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1.76 ± 0.59 mIU/ml, hypothyroid women 8.68 ± 2.9 mIU/ml, and hyperthyroid women 0.04 ± 0.02 mIU/ml.

Conclusion: Thyroid dysfunction affects nearly one-third of pregnant women, independent of parity, gestational age, or sociodemographic factors. Given the potential maternal and fetal complications, routine thyroid screening during pregnancy is essential to ensure early detection and management.

Keywords: Thyroid dysfunction, Pregnancy, Hypothyroidism, Hyperthyroidism, Thyroid-stimulating hormone