Abstract

The objective of this thesis was to determine whether any causal relationship exists between thyroid gland diseases and frequent and repeated inflammations of upper respiratory pathways, and whether taking hormonal contraception or tonsilectomy undergone in an early age may exert any influence the incidence of thyroid gland diseases. In this study, anonymous answers of 364 patients at the endocrinological outpatient department with various durations of thyreopathy treatment were collected. A questionnaire with open and closed questions was used as the form of the study, and the questionnaire was completed during personal interviews. Common medical division of thyroid gland diseases was respected when processing the results, i.e. division to euthyreosis, inflammation, hypothyreosis, hyperthyreosis, tumour, and surgery in the past.

In general population, 17.8 % of persons older than 15 years of age suffer from diseases of upper respiratory pathways. 35.7 % of the questioned patients reported that they repeatedly suffered from diseases of upper respiratory pathways. It is thus apparent that those suffering from a thyroid gland disorder show a double rate of any disease of upper respiratory pathways than those showing relative health.
Preliminary results of the survey suggest a significant influence of hormonal contraception on more frequent incidence of autoimmune thyreopathies (autoimmune inflammation as an underlying condition for hypothyreosis). Reasons behind the statistically significant reduction of the number of thyroid gland surgeries in women taking hormonal contraception are unclear. This issue requires further and more detailed observation of a larger and accurately defined set of persons.

The research indicated that a manifestation of any thyroid gland disease occurs 36 years after tonsilectomy on average, while in terms of individual types of the diseases, the mean number of years of the disease manifestation shows no considerable differences. It thus cannot be stated that the thyroid gland disease is caused exclusively by tonsilectomy. However, the mean number of 28.3 % patients after surgery cannot be simply omitted. In this case, it is apparently one of many stimulation factors; however, this factor should not be neglected when collecting medical history.

Another product of the survey consisted in the fact that a relatively large number of negative consequences for the patient’s life were determined, which follow from the thyroid gland disease. Based on an overall comparison according to the treatment duration, it follows that most complaints are reported by patients between year 2 and 10, and between year 16 and longer of therapy, and the least complaints are reported during the initial period of the therapy. However, it is quite evident in the case of thyroid gland dysfunction (reduced or increased activity) perceived most by the lay public that manifestations of the disease, although treated, are permanent, at least in one half of the questioned persons. However, the

fact that the patients perceive manifestations of thyroid gland disease highly subjectively is an absolutely clear result of the investigation. At the same time, the research showed that almost one fifth of the questioned persons do not know what kind of a disease they actually suffer from.

Keywords: Thyroid gland diseases – eufunction – inflammation – hypothyreosis – hyperthyreosis – tumours – surgeries – inflammations of upper respiratory pathways – hormonal contraception – subjective and objective problems