

PE1463/S

Thyroid Patient Advocacy Email of 19 September 2013

Please would you circulate the hyperlink below to Eric Pritchard's recently published paper 'Reducing the Scope of Guidelines and Policy Statements for Hypothyroidism':

<https://www.csom.ca/wp-content/uploads/2013/06/Reducing-the-Scope-of-Guidelines-and-Policy-Statements-for-Hypothyroidism-28.2.pdf>

This should be passed to all attending the round table meeting on 1 October and especially the representatives from the Scottish Government. This paper sums up exactly where endocrinology is going wrong and why over 300,000 UK citizens are being left to suffer so unnecessarily.

I have already sent this to every NHS endocrinologist throughout the UK for their information, but until the Royal College of Physicians and the British Thyroid Association take such information on board and amend their policy statement on the diagnosis and management of primary hypothyroidism, medical practitioners' hands will remain tied.

Also, please check out my request for amendments to be made as a matter of urgency to the 'NHS United Kingdom Medicines Information (UKMi)' on the subject "What is the rationale for using a combination of levothyroxine and liothyronine (such as Armour Thyroid) to treat hypothyroidism?"

<http://tpauk.com/forum/content.php?1407-NHS-UKMi-Q-A-56-5-%28November-2011%29-TPA-REBUTTAL>

The UKMi Pharmacists set out Questions and Answers on all medicines and send these out to all NHS healthcare professionals and they HAVE to be 100% correct, but in this case, THEY ARE NOT.

<http://tpauk.com/forum/content.php?1311-NHS-United-Kingdom-Medicines-Information-Q-A-56-5-%28November-2011%29>

Their Q and A document is yet another reason WHY doctors are refusing to treat their patients with any form of the active thyroid hormone T3, either synthetic or natural.

Sheila Turner
Chair
Thyroid Patient Advocacy