


Dynamic Monitoring of Hypothyroidism During Pregnancy [Letter]

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Dear editor

With great interest, we have read the research by Kidus Kebede Abadi et al about prevalence of hypothyroidism in pregnancy and its associations with adverse pregnancy outcomes among pregnant women in a general hospital.¹ The purpose of this research is to determine the magnitude and pregnancy adverse outcomes associated with hypothyroidism among pregnant women having maternity services in a general hospital in Somalia. After rigorous experimental design and implementation, this study has shown a high prevalence of hypothyroidism during pregnancy at Daruxannan Hospital compared to previous studies around the world.

In this study, the authors used the standard 0.3–3.0 mIU/L for third trimester. The diagnosis of hypothyroidism in pregnancy is dynamic. In first and second trimesters, normal thyroid stimulating hormone has different ranges, which are usually 0.1–2.5 mIU/L and 0.2–3.0 mIU/L.² Many studies have recommended the establishment of specific TSH reference ranges for each region.³ This study also needs to consider the proportion of abnormal thyroid stimulating hormone in late pregnancy had been already abnormal in first and second trimesters. This hypothyroidism may require intervention. Therefore, some of the adverse pregnancy outcomes in the study, such as hypertensive disorders of pregnancy and preterm birth, may be related to hypothyroidism in first and second trimesters rather than late pregnancy.

In general, this study helps to establish local thyroid stimulating hormone reference ranges. The management of hypothyroidism is required throughout pregnancy.

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Data Sharing Statement

Data sharing is not applicable to this article as no new data were created or analyzed in this study.

Author Contributions

All authors made a significant contribution to the work reported, whether that is in the conception, study design, execution, acquisition of data, analysis and interpretation, or in all these areas; took part in drafting, revising or critically reviewing the article; gave final approval of the version to be published; have agreed on the journal to which the article has been submitted; and agree to be accountable for all aspects of the work.

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Disclosure

The authors declare no conflict of interest in this communication.

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