



Patient & Family Guide

2023

Parathyroidectomy and Kidney Disease

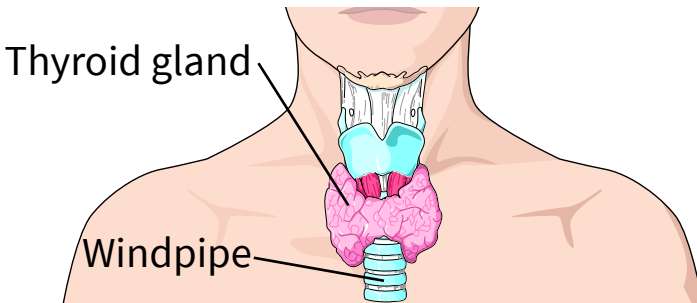


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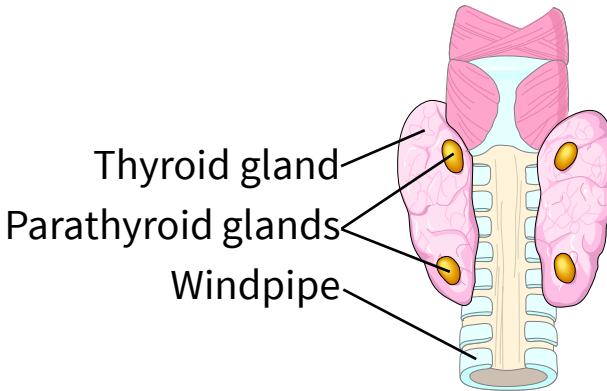
Parathyroidectomy and Kidney Disease

What is a parathyroidectomy?

- Parathyroidectomy is a surgery that removes your **parathyroid glands**.
- Your parathyroid glands are in your neck (usually on the back of the thyroid gland). They help to control your blood calcium and phosphorous levels.
- **Hyperparathyroidism** is when one or more of the parathyroid glands makes too much parathyroid hormone in your blood. If this happens, you will need a parathyroidectomy.



- Most people have 4 parathyroid glands. Your surgeon will usually take out all 4 glands, but may leave one if they think it is right for you.
- To remove them, the surgeon will make a small incision (cut) above your collarbone.



(This view is from the back of the neck.)

What are the possible complications with this surgery?

Anesthesia

- You will have general anesthesia (medication to put you to sleep) with this surgery. Most of the time general anesthesia is very safe, but there are some risks. The anesthesiologist will explain these risks to you.

A second surgery

- The surgeon may not find all 4 parathyroid glands during the first surgery. You may need a second surgery if the hyperparathyroidism is not corrected.

Low blood calcium after surgery

- It is common to have low blood calcium levels for 2 to 4 days after your surgery. We will check your blood work and give you medication(s), as needed.
- If you have kidney disease, you may have low calcium levels for some time after surgery. Every patient is different. It can take several weeks for your calcium levels to adjust. We will check your blood work and make changes to your medication(s), if needed.
- Low blood calcium can cause:
 - › numbness or tingling around the mouth, hands, or feet.
 - › muscle spasms (sudden tightening of a muscle) in the hands.
 - › muscle cramps.
- If you have any of these symptoms, tell a member of your health care team right away.

After surgery

Managing discomfort

- Some common side effects of general anesthesia are:
 - › Nausea (feeling sick to your stomach)
 - › A sore throat
 - › Confusion or not being able to think clearly
- There are medications that can help with these side effects. Ask a member of your health care team, if needed.
- Some of the small muscles in your neck may have been cut during surgery. When you are getting up from lying down, place your hands together behind your neck for support. This will protect your neck muscles from strain.
- **Do not** tense your neck (tighten your muscles) or hold your shoulders still. This will cause more soreness and stiffness. Your nurse or physiotherapist can teach you exercises to help build your strength and avoid discomfort.

Meals

- Soft foods (like smoothies, yogurt, puddings, soups) can be easier to eat while your throat is sore.
- Follow the eating plan that you have been given by your dietitian.

Activity

- You can get up and out of bed shortly after your surgery. A member of your health care team may help you when you get up for the first time.
- Your health care team will teach you deep breathing and coughing exercises to do after surgery. These exercises keep your lungs clear and free of infection.
- Walk as much as you can.
- Add more activity every day. For example, add 5 more minutes of walking every day.
- **Do not lift more than 5 pounds for 2 weeks (14 days) after your surgery.** This includes lifting children. If you have small children, ask someone to help you for the first 2 weeks after surgery.
- You can drive when you can turn your head fully with no pain.

Do not have sex for the first week (7 days) after your surgery. After the first week, you can have sex when you feel well enough.

How do I take care of my incision?

Drain

You may have a small drain (tube) in your incision. This drain will remove any blood or fluid. It will be removed 1 to 2 days after your surgery.

Stitches

- Your incision may have been closed with a stitch or stitches that dissolve (break down). These do not need to be removed.
- If you have stitches that do not dissolve, they may be removed at your follow-up appointment with your surgeon. Your surgeon will tell you when your stitches need to be removed.

Steri-strips™

- You may have tape called Steri-strips™ over your incision.
- **Do not** get the Steri-strips™ wet for 2 days after your surgery. After 2 days, it is OK if they get wet in the shower or bath.

- The edges of the Steri-strips™ will start to curl up after 5 to 7 days. You can remove them after 7 days. Hold the curled-up edge and pull the Steri-strip™ off like a Band-Aid®.
- When the Steri-strips™ are removed, wash the area 2 times a day. **Pat the incision dry. Do not** rub the incision or the area around it.
- After each wash, put Polysporin® ointment on the wound until your follow-up visit with your surgeon.

Healing

- Some swelling and redness around the incision is normal. The swelling will usually start to go away about 1 to 2 weeks after surgery.
- It will take 3 to 6 months for the incision to finish healing.
- Keep the incision out of direct sunlight for **1 year**. Do this by covering the area with clothing and/or sunscreen with an SPF of 30 or higher.

Blood work

- After your surgery, you will get blood work done to check your blood calcium and phosphorus levels until they are within a safe and healthy range. It may take days or weeks for your blood levels to reach this range.
- If you are getting **hemodialysis**, you will get your calcium and phosphorus levels **checked 1 to 2 times a week at first, or more often if needed**. Once your levels adjust, they will not be checked as often. Your medication(s) may change depending on your blood work.
- If you are getting **peritoneal dialysis**, you will need to get your calcium and phosphorus levels checked in your local blood collection clinic. Your nephrologist (kidney doctor) will tell you how often you will need your calcium and phosphorus levels checked.

Medications

- You may have to take calcium pills and supplements when you go home. Your health care team will tell you what calcium to take and how to take it. **Do not** take any other supplements that have calcium unless told by your health care team.
- You may also be prescribed alfacalcidol (brand name: ONE-ALPHA®) or calcitriol (brand name: ROCALTROL®). These are forms of Vitamin D and will help raise your calcium levels.
- Your nephrologist or primary health care provider will adjust the doses of these medications based on your calcium levels.
- To keep your calcium at a safe and healthy level, it is very important to take these medications as you are told by your primary health care provider or by your renal team (if you are on dialysis).
- For most people, low calcium levels after surgery will return to normal a few weeks or a few months after surgery.

Your calcium may be out of balance if you have any of the following symptoms.

Symptoms of low calcium:

- › Tingling or numbness in your hands or feet
- › Numbness around the mouth area
- › Muscle spasms
- › Confusion or not being able to think clearly
- › Irregular heartbeat

Symptoms of high calcium:

- › Headache
- › Feeling very thirsty and urinating (peeing) more than usual
- › Nausea and/or vomiting (throwing up)
- › Low appetite (not wanting to eat)
- › Constipation (not being able to poop)
- › Irregular heartbeat
- › Confusion

If you get these symptoms while you are at home, go to the nearest Emergency Department right away.

- Tell staff at the Emergency Department that you have had your parathyroid glands removed. Bring all of your medications in their original containers, or a list of your medications.

If you have any of these symptoms, go to the nearest Emergency Department right away:

- › A fever (temperature above 38° C/100.4° F)
- › Trouble breathing
- › Bleeding from your incision
- › Swelling at the incision site that is getting worse
- › Drainage from the incision site

Medication Chart

Please show this chart to your community pharmacist(s) and primary health care provider.

Valid as of: (YYYY/MM/DD) _____ **Time (hh/mm)** _____

Pharmacist name: _____ **Primary health care provider name:** _____

Allergies: _____

Medications	Directions for use	Comments	Time							
				Bkfast		Lunch		Supper		Bed
Calcium elemental (Tums® Extra Strength) or other (specify):		Calcium supplement								
Alfacalcidol (ONE-ALPHA®) or other (specify drug):		Activated vitamin D								

NOTES:

- Try to take your medication(s) at the same time each day.
- Make sure you or your community pharmacist keep this schedule up-to-date if your medication(s) changes.
- Avoid taking over-the-counter medications (like cough and cold medications) without first checking with your pharmacist or primary health care provider.

Looking for more health information?

Find this pamphlet and all our patient resources here: <https://library.nshealth.ca/PatientEducation>

Contact your local public library for books, videos, magazines, and other resources.

For more information, go to <http://library.novascotia.ca>

Connect with a registered nurse in Nova Scotia any time: call 811 or visit <https://811.novascotia.ca>

Learn about other programs and services in your community: call 211 or visit <http://ns.211.ca>

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The information in this pamphlet is to be updated every 3 years or as needed.