



York and Scarborough  
Teaching Hospitals  
NHS Foundation Trust

# Parathyroidectomy

Information for patients, relatives and carers

① For more information, please contact:

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## **A renal doctor's perspective**

Your doctor has referred you to a surgeon for an operation called a parathyroidectomy. This is to treat a condition called tertiary hyperparathyroidism that has developed as a consequence of your kidney failure.

The surgical procedure and potential complications of the actual operation are described in a separate leaflet (Parathyroidectomy – Endocrine and Surgical perspective, leaflet 1). In this leaflet we want to explain the medical treatment before and after surgery.

## **Your blood chemistry and parathyroid surgery**

You have been referred for an operation because you have a high level of parathyroid hormone in your blood, and this is causing damage to your bones and/or blood vessels. This often leads to high blood calcium levels. After the operation your bones will start to heal.

To do this they will take a lot of calcium out of your blood and this can lead to low blood calcium levels for a few weeks.

If blood calcium levels fall too low, you may feel unwell. Mild symptoms include tiredness and muscle weakness. More severe symptoms include muscle cramps, spasms or even fits (seizures).

Your blood calcium levels will go back to normal after several weeks, but you will need careful monitoring and medicines to prevent a severe drop in calcium levels.

With careful management we can almost always keep blood calcium levels well controlled and avoid severe symptoms.

## **What will happen to my tablets before my operation?**

Before your operation you will be started on a form of vitamin D called alfacalcidol. You may have been on this treatment before or may be taking it now, but the dose and timing may change.

If you are on haemodialysis or peritoneal dialysis, then we will change the level of calcium in your dialysis solution or bags.

## **What will happen to my tablets after my operation?**

After your operation you will continue to take alfacalcidol. In addition, you will be given calcium supplements. You may be asked to take these either with food or between meals depending on your blood phosphate levels.

## **How long will I need to take these tablets for?**

Most people have four parathyroid glands. We usually try and remove all four glands. If all four glands are successfully removed then you will probably need to take alfacalcidol all your life, but the dose will get lower as time goes by.

Sometimes only one gland is very enlarged and just that one gland is removed. On other occasions two or three glands are enlarged and the others are so small that they cannot be found. In these cases, some parathyroid tissue will be left behind and you may not need to continue alfacalcidol forever.

Unless all the glands have been removed there is a chance that any remaining glands will become overactive in the future, resulting in the need for a further operation.

Further problems are most common in people who are on dialysis, so in dialysis patients we usually try and remove all four glands if we can.

## **How will I know what my blood tests are doing and how much medication I need?**

You will need a blood test the day after your operation to monitor your calcium level. Providing your calcium level does not drop too quickly most patients can go home within a day or two of their operation.

If you are on haemodialysis, then your bloods will be checked each time you come for dialysis.

If you are on peritoneal dialysis then the PD nurses will arrange blood tests with you, usually once or twice a week until your blood results are stable.

If you are predialysis or have a kidney transplant, then you will come back to the renal unit for regular blood tests. Initially blood tests need doing every two to three days, but the frequency decreases as the blood calcium level stabilises. This usually takes between 10 days and four weeks, but this time varies a lot between patients.

## **Do you have any other questions?**

If you have any other questions then please speak to your consultant, kidney nurse or the renal pharmacist.

## **Tell us what you think of this leaflet**

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact:

Michelle Potts, Senior Pharmacy Technician,  
Renal Medicine, The York Hospital, Wigginton Road,  
York, YO31 8HE or telephone 01904 725963.

## **Teaching, training and research**

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

## **Patient Advice and Liaison Service (PALS)**

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email [yhs-tr.patientexperienceteam@nhs.net](mailto:yhs-tr.patientexperienceteam@nhs.net).

An answer phone is available out of hours.

# Leaflets in alternative languages or formats

If you would like this information in a different format, including braille or easy read, or translated into a different language, please speak to a member of staff in the ward or department providing your care.

Patient Information Leaflets can be accessed via the Trust's Patient Information Leaflet website:  
[www.yorkhospitals.nhs.uk/your-visit/patient-information-leaflets/](http://www.yorkhospitals.nhs.uk/your-visit/patient-information-leaflets/)

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