

## **Notice to my Thyroid Patients Who Become Pregnant**

July, 2017

Though I have managed thyroid replacement for some pregnant patients in the past, I no longer provide that service. Though no adverse events have occurred due to my management, some of my patients and I have been subject to sharp criticism by other doctors involved in the care of these women. And as we all know, there is a lot of emotion involved when one chooses to do something different from the pack. Similarly, there is also a lot of emotion involved in obstetric care. The combination of these facts and the fact that I do not carry malpractice insurance for obstetrics, makes it simply too dangerous for me to manage hypothyroidism in pregnant patients. In addition, the stress on the pregnant patient and her family due to ongoing philosophical differences among their doctors is also concerning and undesirable.

I have spoken with Dr. Albert Coo, a local endocrinologist, about this situation. He is well respected in the local medical community, and no one would question his management. He is also in my opinion the most open-minded endocrinologist in town, and the smartest as far as I am concerned. I asked him if he would be willing to manage the thyroid needs of my pregnant patients during their pregnancies, and he has agreed, as long as he is not expected by either myself or my patients to do anything other than what his clinical judgment dictates. In other words, we can't and shouldn't ask or expect him to manage thyroid the same way that I do. I think that's reasonable and only fair. He is a careful and caring doctor, and he will be a lot more reasonable that anyone else I know. He may drop your dose a little, but I guarantee he'll be careful about it. He knows the consequences of low thyroid in pregnancy.

Therefore, I ask that if you become pregnant when on thyroid, please consider having Dr. Coo manage your dose during those 9 short months, because I simply can't risk my license anymore to do such. His office number is 703-823-9570, and his location is just a couple blocks away from our office. I am sorry that I am essentially abandoning my pregnant patients during this very important time, but I just have no other choice, and I think we now have a reasonable alternative. In the meantime, I will continue to try to show the medical community the inherent folly of the TSH-based approach to thyroid management, but change comes slowly. If I were to lose my license, I would never be able to do that, nor would I be able to help anyone again, pregnant or not. I can't take that chance. Thanks for your understanding about this very difficult matter.

Sincerely,

Donna Hurlock, MD