Thyroid Replacements - levothyroxine (Synthroid) Cheat Sheet

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Med Names

Prototype Med	Levothyroxine (Synthroid)
Other Meds	liothyroxine (Cytomel)
	liotrix (Thyrolar)
	Thyroid USP

Action: Levothyroxine is a synthetic form of thyroxine or T4 which is then converted to T3 in the body

Therapeutic Use

Hypothyroidism

Adverse Drug Reactions

Thyrotoxicosis, Hyperthyroidism (from excessive doses)

Headache, irritability, insomnia

Abdominal cramping, diarrhea

Tachycardia, arrhythmia

Heat intolerance, diaphoresis

Menstrual irregularities

Nursing Interventions

Monitor thyroid function

Monitor for indications of hyperthyroidism (anxiety, tachycardia, palpi- tations, tremors, altered appetite, heat intolerance, fever, diaphoresis, weight loss)

Patient Education

Watch for and report nervousness, rapid heart rate, palpitations, trem- ors, altered appetite, heat intolerance, fever, sweating, weight loss, and chest pain.

Contraindications

Thyrotoxicosis

Recent myocardial infarction

Precautions

Cardiovascular disorders (hypertension, angina pectoris, ischemic heart disease)

Renal impairment

Diabetes mellitus

Older adults

Administration

Give orally to treat hypothyroidism and IV to treat myxedema coma.

Give daily on an empty stomach (at least 30–60 min before breakfast with full glass of water).

Measure baseline vital signs, weight, and height, and monitor periodical- ly thereafter.

Monitor for cardiac excitability (angina, chest pain, palpitations, dys- rhythmias).

Monitor T4 and TSH levels.

Be aware that the various formulations of thyroxine are not inter- changeable; instruct clients to notify the provider if a pharmacy dispens- es a different levothyroxine product.

Expect lifelong replacement therapy.

Interactions

Cholestyramine (Questran), antacids, iron and calcium supplements, and sucralfate (Carafate) reduce absorption, so clients should not take levothyroxine within 4 hr of these drugs

Food reduces absorption

Many antiseizure and antidepressant drugs, including carbam- azepine (Tegretol), phenytoin (Dilantin), phenobarbital, and sertraline (Zoloft), decrease levels.

Anticoagulant effects of warfarin (Coumadin) increase.

Cardiac response to catecholamines (such as epinephrine) increases.

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