

# [Dietary(nutritional) recommendations for hypothyroidism (underactive thyroid glan...](https://assignbuster.com/dietarynutritional-recommendations-for-hypothyroidism-underactive-thyroid-gland/)

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Dietary (Nutritional) recommendations for Hypothyroidism (Underactive Thyroid Gland There are certain foods which can exacerbate hypothyroidism, soidentifying and avoiding those foods is critically valuable. Soy foods do not increase the risk of hypothyroidism in adults provided iodine intake is sufficient. When iodine intake is inadequate, soy foods can cause hypothyroidism (Messina & Redmond 2006, p. 249). Therefore, dietary recommendation is to maintain a healthy iodine intake instead of avoiding soy foods. It is unfortunate that people are naïve about the link between soy foods and hypothyroidism (Ede 2012). Extremes should be avoided in context of iodine intake. Both deficiency and excess of iodine are bad. Excess intake in a patient with underlying thyroid disease can cause full-blown thyroid dysfunction. 1. 1mg daily iodine intake is recommended (Leung cited in Ede 2012). Levothyroxine is a thyroid hormone synthetically manufactured. It is used in patients with hypothyroidism. But, food-drug interactions are very important here because certain foods can decrease its absorption in the biological system. Soy flour, calcium juices or supplements, and dietary fiber can decrease absorption of levothyroxine. So after taking this thyroid hormone, these foods should be avoided for several hours. But, fasting is prohibited because prolonged fasting state can drastically increase thyroid hormone levels (Wickham 2013). Levothyroxine can also impair absorption of hypoglycemic drugs, so blood glucose levels should be carefully monitored (NLM 2009). For hypothyroidism, iodine supplements are mostly unnecessary since the introduction of iodized salt and food fortification unless one is living in a poverty-stricken or severely underdeveloped region. Though iodine supplements may still be required in some cases, levothyroxine is usually considered sufficient for safe treatment of hypothyroidism (Nippoldt 2012).   
References:   
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