SUMMARY

Objective: The literature on the impact of thyroid abnormalities on pregnancy and the postpartum has expanded rapidly over the last two decades. Objective of present study was to determine the level of knowledge of endocrinologists, obstetrician/gynecologists, internists, and family physicians in regard to thyroid disease and pregnancy.

Design: A 16-item questionnaire on issues related to thyroid disease and pregnancy was developed by the authors. Endocrinologists (N=116), obstetrician/gynecologists (N=81), internists (N=109), and family physicians (N=99) were asked to complete the questionnaire. Physician self-report of confidence regarding degree of knowledge was obtained through completion of a seven-point scale (the “Likert” scale).

Main Outcome: The percentage of questions answered correctly by all physicians was 63%. Endocrinologists had the highest correct response rate (77%), followed by obstetrician/gynecologists. Hierarchical regression analysis revealed that medical specialty, years of training, confidence level, and whether or not the physician treated pregnant women were significantly related to the overall knowledge score.

Conclusions: The present survey demonstrates a suboptimal level of knowledge regarding thyroid disease and pregnancy among physicians in four specialties. A comprehensive physician education program is needed.

COMMENT

A large series of clinical studies conducted over the last two decades has rapidly expanded our knowledge of the complex interrelations between pregnancy and thyroid diseases. We understand better today how thyroid disorders may influence the outcome of pregnancy and alternatively how pregnancy may influence the course of thyroid diseases. The challenge is to translate new research-derived information into clinical practice. This goal can only be achieved through education of the various medical care providers involved with pregnant women.

Present survey consisted in a 16-item questionnaire developed to assess level of knowledge of clinicians on thyroid disease associated with pregnancy and postpartum. Questions asked corresponded to a multiple-choice type questionnaire on: hypothyroidism & Graves’ disease in pregnancy, thyroid autoimmunity & pregnancy, postpartum thyroiditis, risk of IQ impairment in progeny of mothers with thyroid disorders. Questionnaires were distributed to participants in the New Jersey/New York metropolitan area. A total of 412 physicians completed the questionnaire. Among them, percentages of physicians who treated pregnant women were 94% (endocrinologists), 90%
In 2005, an international ad hoc committee was established under the auspices of the American Endocrine Society to review the best evidence for thyroid disorders associated with pregnancy and develop evidence-based guidelines for clinical practice. Members of the ten-person task force included representatives of the Endocrine Society, the American, European, Latino-American and Asian-Oceanic regional Thyroid Associations, the American Association of Clinical Endocrinologists, and the American College of Obstetrics & Gynecology. All these medical and scientific associations (except for ACOG) eventually endorsed the 35 recommendations made by the committee. They have been published in a supplement to the JCEM (August 2007) and the full text is available on the website of the Endocrine Society. One can only hope that efforts such as those undertaken by such expert committees will help improve the overall knowledge in this important clinical field.

(Daniel Glinoer, M.D.; Ph.D.)

See Figure below

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Shows the overall percentage of correct responses

(obstetrician/gynecologists), 58% (internists), and 68% (family physicians). Main findings indicated a ‘disturbingly’ low level of knowledge in physicians across all disciplines. Knowledge gaps were mainly related to areas of relatively recent scientific new acquisitions, but also to facts that have been known for decades. Endocrinologists scored highest (77% correct responses to the questionnaire & a 5.1 confidence level on the Likert scale (1 ‘not confident’ to 7 ‘extremely confident’)). Two questions dealt specifically with Graves’ disease in pregnancy (on the natural course of the disease & the goal of treatment with antithyroid drugs). Correct response rates to these questions were 71% for endocrinologists, <50% for obstetrician/gynecologists & internists, and finally <40% for family physicians. The overall low scores may be attributed to a lack of adequate education on thyroid disease during pregnancy, lack of exposure to women during pregnancy, or the inability to translate research information into clinical practice.