

## Review of: "[Short Communication] Advisory caution message on retail packaging of Levothyroxine and its significance in the treatment of hypothyroidism"

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Potential competing interests: No potential competing interests to declare.

While agreeing with the basic intention of the author to avoid unnecessary prescriptions of Levothyroxine, the proposed caution may not be appropriate during pregnancy according to ATA Guidelines (<a href="https://www.thyroid.org/hypothyroidism-in-pregnancy/">https://www.thyroid.org/hypothyroidism-in-pregnancy/</a> last checked 02052023):

For women with TSH measured between these (2.5-10), ATA recommendations for treatment vary and may depend on whether or not the mother has TPO antibodies. When TPO antibodies are positive, treatment is recommended when the TSH is above 4 and should be considered when the TSH is between 2.5-4.0. However, when there are no TPO antibodies (i.e. negative), current ATA recommendations are less strong and suggest that treatment 'may be considered' when TSH is between 2.5-10.0 mIU/L.

I suggest rephrasing the Caution: Not recommended for non-pregnant patients with normal T3/T4 and TSH below 10mIU/L

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