

# 碘過多與甲狀腺

陳涵栩

台北榮民總醫院 新陳代謝科；國立陽明大學 醫學院內科

Iodine is a micronutrient that is essential for the production of thyroid hormones. The primary source of iodine is the diet via consumption of foods that have been fortified with iodine, including salt, dairy products and bread, or that are naturally abundant in the micronutrient, such as seafood. Recommended daily iodine intake are 150 $\mu$ g in adults, 220-250 $\mu$ g in pregnant women, and 250-290 $\mu$ g in breastfeeding women in the United States.

Sources of iodine excess include iodine supplementation to the diet, vitamins and supplements, medications, contrast media and topical iodine. Supraphysiologic doses of iodine are appropriate in certain specific medical indications, including its use in the treatment of severe hyperthyroidism before thyroid surgery, amiodarone for arrhythmia, and as potassium iodide following a nuclear accident. Ingestion of greater than 1,100  $\mu$ g of iodine per day is not recommended but is generally well-tolerated. However, in certain susceptible individuals, including those with pre-existing thyroid disease, the elderly, fetuses and neonates, or patients with other risk factors, the risk of developing iodine-induced thyroid dysfunction might be increased.

The cumulative incidence of goiter decreased with increasing iodine intake. Iodine-induced hypothyroidism or hyperthyroidism might be either subclinical or overt. More iodine intake may increase the incidence and prevalence of autoimmune thyroiditis. No significant difference in the cumulative incidence of hyperthyroidism in iodine adequate area. For patients who receive the large amounts of iodine should be monitored for iodine-induced thyroid dysfunction.