

CHAPTER V

CONCLUSION

It may be concluded from this study that

1. The normal ranges of serum T_4 and serum T_3 in Thai subjects are not different from those found in Caucasian subjects. The normal ranges found are 3-11 $\mu\text{g}\%$ for serum T_4 and 70-200 $\text{ng}\%$ for serum T_3 .
2. Incidence of T_3 toxicosis in Thailand is about the same as those found by other authors in Caucasian subjects. The incidence in these series is 12.5%.
3. With methimazole therapy serum T_3 dropped faster than serum T_4 during the first few days making T_4/T_3 ratio increase in the first few weeks after therapy. With prolonged therapy especially when hypothyroidism developed T_4 dropped to a much lower level than T_3 making T_4/T_3 ratio very low.
4. Serum T_3 is a better indicator of hyperthyroidism than serum T_4 but in hypothyroid state serum T_4 is a better test than serum T_3 .
5. Most frequent side effect of therapy with methimazole is skin rashes which were found in 9.8% of the patients.
6. Hypothyroidism with low serum T_4 was found in up to 72% of patients after 8 months of therapy with methimazole. However only 33% of these patients had low serum T_3 .
7. There is a lag period of many weeks between development of hypothyroxinemia and development of signs and symptoms of hypothyroidism.