Fast-track radioactive iodine ablation therapy for graves' disease patients

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Introduction

At our institution, a significant time delay between radioactive iodine uptake scan (RAIU) and radioactive iodine ablation (RAIA) was discovered for many of our patients with Graves' disease. This delay resulted in additional unnecessary Endocrinology and Nuclear Medicine (NM) appointments, restarting anti-thyroid medication, repeat RAIU scans and even a hospitalization due to hyperthyroidism.

Our study's goal was to develop and implement a Fast-track RAIA pathway for select Graves' disease patients in order to reduce time between RAIU and RAIA, and to improve patient satisfaction.

Disclosure/Disclaimer

The authors have no disclosures relevant to this study.

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Abbreviated Fast-track Protocol

- Patients with suspected Graves' disease meet with Endocrinology and discuss treatment options.
- Endocrinology place orders for RAIU and RAIA, for patients desiring RAIA, at the same time.
- After NM approval, an appointment is scheduled for RAIU and potential RAIA on the same day as the RAIU scan.
- If RAIU is consistent with Graves' disease, NM physician counsels/consents the patient for RAIA and administers RAIA I-131 dose on the same day.

Patient Statistics Assessed

Patient data (18 pre- and 2 post-Fast-track) were evaluated

- Time from RAIU to RAIA
- Number of NM and Endocrinology Visits
- Thyroid Labs
- Post-RAIA patient satisfaction survey

Results

	Pre-Fast-track	Post-Fast-track
Average Number of Endocrine Visits	2.9	1.5
Average Number of Days from RAIU to RAIA	46.3	0

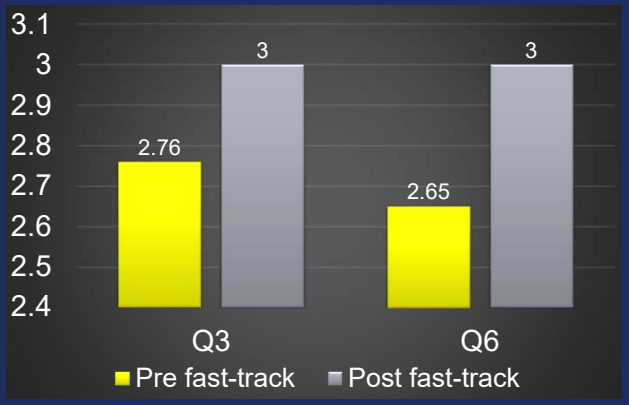
Select Survey Questions

Survey responses were reported as: disagree, neutral, and agree. They were then quantified on a scale of 3, with 3 being agree and 1 being disagree.

Q3: I was satisfied with the waiting time period between radioactive iodine uptake scan and ablation.

Q6: I was satisfied with the coordination of care between endocrinology and nuclear medicine.

Survey Responses



Conclusion

We have successfully implemented a Fast-track process to treat Graves' patients with RAIA on the same day as their RAIU scan. Since implementation, we have significantly reduced time between RAIU and RAIA, decreased patient appointments, and improved patient satisfaction, without reducing patient safety.