The thyroid gland is a small butterfly-shaped gland located in the neck, below the Adam’s apple. Although tiny, the thyroid gland is enormously important (especially for teenagers) as it manufactures the hormones needed to control metabolism and growth. To do its job, the thyroid needs “Iodine” that the body absorbs from the food and water that is ingested.

Hyperthyroidism is a condition where too much thyroid hormone is produced. Causes include: Graves Disease, toxic nodular, multinodular goiter, or thyroiditis. Symptoms include: fast or irregular heartbeat, nervousness, weight loss, sweats, heat intolerance, and tremor. Treatment includes: Drugs to control symptoms and to lower thyroid hormone production, radiation therapy, and in some cases surgical removal of the thyroid gland.

Hypothyroidism is a deficiency of thyroid hormones. Causes include: Chronic lymphocytic thyroiditis, surgical removal of the thyroid gland, destruction of the thyroid gland by medication or radiation, side effects of some medications, thyroid cancer, and congenital thyroid impairments. Symptoms include: Slow metabolism, weight loss, hair loss, dry skin, cold intolerance, slow pulse, menstrual irregularity, and edema. Most cases are easily treated with thyroid hormone replacement.

Goiters and Thyroid Nodules
A goiter is an enlarged thyroid. A toxic goiter produces too much thyroid hormones while a non-toxic goiter (euthyroid goiter) does not overproduce thyroid hormones. Some of these non-toxic goiters are lumpy or nodular. Thyroid nodules are common and most will be benign, however a fine needle biopsy is necessary to determine whether cancer is present or not. Larger nodules are more likely to be malignant.

Thyroid Disease, (for reasons not yet fully understood), is many times more common among women than men. If left untreated, thyroid disease increases the risk for heart disease, infertility, and osteoporosis. The American Association of Clinical Endocrinologists suggests that there is a possible genetic tie between thyroid disorders and other autoimmune conditions, including diabetes, lupus, and some forms of arthritis. This genetic tie could be the reason why many more women than men suffer from thyroid disorders.

To properly evaluate a client’s insurability you must ask the following important questions:

When was the client diagnosed with thyroid disease?
It is always important to document the start of the disease process and to determine when the condition was first brought under control.

What kind of treatment did the client have for the thyroid disease and has it ended?
Most thyroid conditions are mild, and easily controlled, occasionally however, more aggressive treatment is necessary, indicating to the underwriter that a more serious condition exists.

What current medications is the client taking?
Hyperthyroidism requires medication to try to reduce the amount of thyroid hormones produced. Hypothyroidism or thyroid removal requires medication to replace the thyroid hormone not being produced naturally by the body.

It is important in evaluating your case for the underwriter to know what medications are required, and the dosages needed. In addition are other medications required?

Is there any indication that the thyroid may be cancerous?
Occasionally, a malignancy will be detected, in which case a far more severe condition exists with far more ominous implications.

UNDERWRITING PROGNOSIS
Most mild Thyroid Disease, after proper diagnosis and disease management should present little difficulty in underwriting. Offers of standard to slightly sub-standard should be common.

More severe cases of thyroid disease, including cases that have been left untreated for long periods of time will be far more challenging, and it may be difficult, in some cases, impossible to obtain offers even on a severely sub-standard basis. This will be especially true where other life threatening conditions such as heart disease, diabetes, etc. have developed as a result of the thyroid condition, or where cancer is present.

by Donald Victorson, CLU

UNDERWRITER:
Defined as someone sitting in an ivory tower 900 miles from here, trained to say, “NO.”

YOUR JOB:
To convince that underwriter, with truthful information, presented in as favorable a light as possible that it is desirable, even possible to say “YES.”