

Prof. [REDACTED]
[REDACTED] Hospital Medical Centre
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Tel: [REDACTED]

Dr. R. T

23/08/2012

[REDACTED]

Dear Dr T

Re: G C DOB 26. 07. 1951

[REDACTED]

Referral Problem:

Post-operative hypoparathyroidism post total thyroidectomy for MNG in 2008
Osteoporosis with L1 fracture

Current Medication:

Thyroxine 112.5 mcg daily. Rocaltrol 0.25 mcg bd; 'Raw calcium' 5tbl daily
(dose?); Strontium three tablets daily; Vitamin K2;

G came to see me on 21 August 2012. He seems well and had no falls or fractures since I saw him last. He is active delivering mail and has started using magnetic pulse therapy, which he feels has very positive effects on his health. He had no hypocalcaemic signs or symptoms and appears euthyroid. He tolerates the Rocaltrol without side effects.

His serum calcium value is 2.21mmol/L, slightly higher than usual. His serum phosphate level is elevated at 1.7mmol/L, which is in keeping with his low PTH (1.3pmol/L). His 25OH vitamin D level was good at 68nmol/L and his TFTs were within the normal range.

His repeat BMD scan shows very encouraging results with a 10% increase in LS BMD (T-score now -1.3 at L2-4), and stable to slightly increasing BMD at the hip. I would of course believe this to be an effect of the Rocaltrol, although G might attribute it to the magnetic pulse therapy. And who knows who is right - probably both of us. The main thing, however, is that G's bones have improved and he remains fracture and symptom free. I therefore recommend he continue with his current therapy and see me again in 6 months' time.

With kind regards,



Cc: Patient