

**Table I. Drugs and Agents Associated with Thyroid Dysfunction**

<b>Medication or agent</b>	<b>Effects on Serum Thyroid Function Tests</b>
Glucocorticoids	- Can transiently suppress TSH without hyperthyroidism
Dopamine and Dobutamine	- Can transiently suppress TSH without hyperthyroidism
Amiodarone	- Can induce either hypothyroidism or hyperthyroidism - May observe a transient TSH increase in the first days and weeks following amiodarone introduction - LT4 requirements in treated hypothyroid patients are increased
Lithium	- Can induce hypothyroidism but also less commonly, transient hyperthyroidism (similar to silent thyroiditis)
Interferon	- Can induce hypothyroidism (permanent or transient) but also less commonly, hyperthyroidism (similar to Graves' disease and silent thyroiditis)
Tyrosine kinase inhibitors (sunitimib, sorafenib, imatinib)	- Can induce hypothyroidism (permanent or transient)
Alemtuzumab	- Hyperthyroidism (Graves' disease)
Iodine-containing medications and agents	- Can unmask latent hyperthyroidism in iodine deficient individuals - Can induce hypothyroidism in euthyroid patients with underlying thyroid disease
Drugs which reduce LT4 absorption (cholestyramine, calcium, sucralfate, sevelamer)	- Increases LT4 requirements in treated hypothyroid patients
Drugs which increase hepatic metabolism of thyroid hormones (phenobarbital, carbamazepine, phenytoin, rifampicine)	- Increases LT4 requirements in treated hypothyroid patients
Drugs which increase TBG levels (estrogen)	- Increases LT4 requirements in treated hypothyroid patients