

## Effect of Ageing on the Concentration of FT<sub>3</sub>, FT<sub>4</sub> and TSH Levels among Different Age Groups

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### Abstract :

**Background:** The activities of the thyroid gland depend on the age. However, with advancing age the concentration of FT<sub>3</sub>, FT<sub>4</sub> and TSH decrease in apparently healthy elderly persons. **Objective:** This cross-sectional study was designed to observe the influence of ageing on thyroid hormone levels. **Methods:** This descriptive study was carried out in the department of physiology in collaboration with institute of Nuclear medicine and Allied Sciences, Rajshahi. 120 apparently healthy persons in age group of 8-65 years were studied. Random blood sample was taken to measure the level of free T<sub>3</sub>, free T<sub>4</sub>, TSH by Radioimmunoassay(RIA) and Immunoradiometric assay(IRMA). Data were analyzed by ANOVA Test. **Result:** Significant drop of FT<sub>3</sub> level and non-significant drop of FT<sub>4</sub>, TSH level with advancing age. **Conclusion:** This study suggested that ageing has effect on FT<sub>3</sub> level more than FT<sub>4</sub> and TSH level.

**Keywords:** Free triiodothyronine (FT<sub>3</sub>), Free thyroxine (FT<sub>4</sub>), Thyroid Stimulating Hormones (TSH), Radioimmunoassay (RIA), Immunoradiometric assay (IRMA).

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### Introduction

The thyroid gland synthesizes and releases two hormones thyroxine (T<sub>4</sub>) and Triiodothyronine (T<sub>3</sub>) and their concentrations are 93% and 7% respectively. Both T<sub>4</sub> and T<sub>3</sub> hormones are iodine containing amino acids. T<sub>3</sub> is about four times as potent as T<sub>4</sub>, but it is present in the blood in much smaller quantities and persists for shorter time than does T<sub>4</sub><sup>1</sup>.

About 99.98% of T<sub>4</sub> in plasma is bound; the free T<sub>4</sub> level is only about 2 ng/dl. Free T<sub>3</sub> accounts for only about 0.5% of the total T<sub>3</sub>. The free T<sub>4</sub> in the plasma are physiologically active causing the inhibition of the Thyroid stimulating hormone (TSH) secretion. The free T<sub>4</sub> in plasma is important in the metabolic control of human body and therefore free T<sub>4</sub> is believed to be a direct indicator of

thyroid status in an individual. Free T<sub>3</sub> like free T<sub>4</sub> measurement also reflects the thyroid status of individual accurately<sup>2</sup>.

The function of thyroid gland controlled by TSH. The secretion of this tropic hormone is in turn regulated in part by thyrotropin releasing hormone (TRH) from hypothalamus and is subjected to 'negative feedback control' by high circulating levels of thyroid hormones acting on the anterior pituitary and hypothalamus<sup>1</sup>.

Ageing is a physiological process which is characterized by a progressive generalized impairment of many functions of the body resulting in the loss of adaptive responses to stress and a growing risk of age associated disease. However, after the age of 60 years a person is commonly known as old aged person, when it involves progressive loss of cells, reduced metabolic activities and decreased efficiency of many functions of different organs<sup>3</sup>. Ageing is not solely an intrinsic process, as it also occurs in the context of an individual's interaction with the environmental factors such as lack of exercise, poor diet, cigarette smoking and heavy alcohol consumption. Moreover, genetic factor also plays a role in causing physiological changes in ageing process<sup>3</sup>.

The relation of the thyroid gland to the ageing

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process is of interest because of the importance of the organ in regulating the rates of various body functions. It was found that during a normal human life span, serum T<sub>3</sub> remains high during adolescence, then it remains stable until late middle age and ultimately decrease with their increasing age<sup>4</sup>.

Rahman *et al.*<sup>3</sup> and Dambal *et al.*<sup>5</sup> found that FT<sub>3</sub> and FT<sub>4</sub> level were declined with increasing age but TSH levels raised as the age advanced. But Dika *et al.*<sup>6</sup> found no statistically significance difference of T<sub>3</sub>, T<sub>4</sub> and TSH with increasing age.

Wilke *et al.*<sup>7</sup> found that free T<sub>4</sub> progressively decreased. But Peeters *et al.*<sup>8</sup> observed serum TSH and T<sub>3</sub> level decrease with age whereas serum free T<sub>4</sub> level usually remains unchanged.

In addition Kumari *et al.*<sup>9</sup> and Bremner *et al.*<sup>10</sup> found FT<sub>4</sub> level remain almost static throughout all decades of life and TSH level Increase with age.

So, the present study has been designed to find out the normal level of FT<sub>3</sub>, FT<sub>4</sub> and TSH among different age.

## Materials and Methods

This cross-sectional descriptive study was carried out in the department of Physiology in collaboration with institute of Nuclear medicine and Allied Sciences between the period of January 2016 to December 2016. The protocol of this study was approved by Institutional Review Board (IRB) and Ethical Review Committee (ERC) of Rajshahi Medical College. Apparently 120 healthy persons aged 8-65 years were selected residing in Rajshahi City. Purposive sampling technique was applied to select each subject. Subject having history of thyroid disorder, chronic illness, renal failure, malignancy, cirrhosis of liver, diabetes mellitus, pregnancy was excluded from this study.

After proper counseling, the aim, objectives, benefit, risk and procedure of the study were explained in details to the subjects. After taking

informed consent, complete history taking and physical examination were done and recorded in a preformed data sheet. After breakfast, 5ml of venous blood sample were drawn into the test tube (from the antecubital space of the forearm) by venipuncture after taking all aseptic precautions. After coagulation serum was separated by centrifugation at 3500 rpm for 2 minutes. Then serum was used for estimation of FT<sub>3</sub>, FT<sub>4</sub> and TSH level by Radioimmunoassay (RIA) and Immunoradiometric assay (IRMA). The results of TSH were expressed in  $\mu$ IU/ml and FT<sub>3</sub> and FT<sub>4</sub> were expressed in fmol/ml. Collected data were analyzed by using SPSS (statistical package for social sciences) computer software programmed (version-20) and the tests of significance were calculated by using ANOVA test. P value at or below 0.05 was taken as level of significance.

## Result

**Table-I: Serum free triiodothyronine (FT<sub>3</sub>) levels in different age groups (n=120).**

Age group in years (including both male and female)	FT <sub>3</sub> fmol/ml (mean $\pm$ SD)	p-value
Group 1 (8-17 yrs)	8.01 $\pm$ 2.32	0.144 <sup>ns</sup>
Group 2 (18-40 yrs)	8.21 $\pm$ 1.75	
Group 3 (41-65 yrs)	7.42 $\pm$ 1.23	

Level of significance among different age group figured by ANOVA test

	FT <sub>3</sub> fmol/ml
(Group 1) Vs (Group 2)	0.907 <sup>ns</sup>
(Group 2) Vs (Group 3)	0.018 <sup>ns</sup>

ns=Not significant ( $p>0.05$ ).

s=Significant ( $p<0.05$ )

The mean FT<sub>3</sub> levels is almost same in adolescent group and in people up to 40 years of age. After that slight decrease of FT<sub>3</sub> level is seen. FT<sub>3</sub> level showed significant variation between people from 18 to 40 years and people whose age is above 40 years shown in table I.

The test of significance was calculated using ANOVA test.

**Table-II: Serum free thyroxine (FT<sub>4</sub>) levels in different age groups (n=120).**

Age group in years (including both male and female)	FT <sub>4</sub> fmol/ml (mean±SD)	p-value
Group 1 (8-17 yrs)	22.10±5.88	0.932 <sup>ns</sup>
Group 2 (18-40 yrs)	21.46±12.53	
Group 3 (41-65 yrs)	22.42±5.94	

Level of significance among different age group figured by ANOVA test

	FT <sub>4</sub> fmol/ml
(Group 1) Vs (Group 2)	0.170 <sup>ns</sup>
(Group 2) Vs (Group 3)	0.979 <sup>ns</sup>

ns=Not significant (p=>0.05).

FT<sub>4</sub> level does not differ significantly among different age group. Which was shown in table II. The test of significance was calculated using ANOVA test.

**Table-III: Serum thyroid stimulating hormone (TSH) levels in different age groups (n=120).**

Age group in years (including both male and female)	TSH µIU/ml (mean±SD)	p-value
Group 1 (8-17 yrs)	2.62±3.50	0.862 <sup>ns</sup>
Group 2 (18-40 yrs)	3.17±7.60	
Group 3 (41-65 yrs)	2.59±3.90	

Level of significance among different age group figured by ANOVA test

	TSH µIU/ml
(Group 1) Vs (Group 2)	0.346 <sup>ns</sup>
(Group 2) Vs (Group 3)	1.00 <sup>ns</sup>

ns=Not significant (p=>0.05).

TSH level does not differ significantly among different age group which was shown in table III. The test of significance was calculated using ANOVA test.

## Discussion:

In this study, significant drop of FT<sub>3</sub> level and non-significant drop of FT<sub>4</sub>, TSH level with advancing age. These findings are compatible with Ahmed *et al.*<sup>11</sup>, Khan *et al.*<sup>12</sup>, Suzuki *et al.*<sup>13</sup>, Abbas *et al.*<sup>14</sup>, Alom *et al.*<sup>15</sup> and Kumari *et al.*<sup>9</sup>. Ageing affect FT<sub>3</sub> level more than FT<sub>4</sub> level.<sup>9</sup> It occurs due to reduced secretion and concentration of FT<sub>3</sub> levels and increaseturnover rate of FT<sub>3</sub><sup>11</sup>. FT<sub>3</sub> levels decrease with advancing age and slightly increased level of FT<sub>4</sub> in older age, due to primary retardation process for hormone metabolism within the cell which is associated with ageing process, increase degradation rate of thyroid hormone in old age<sup>15</sup>. Decline of hepatic 52-deiodinase activity with ageing that may reduce peripheral conversion of T<sub>4</sub> to T<sub>3</sub> which leads to higher level of FT<sub>4</sub> but lower level of FT<sub>3</sub><sup>16</sup>.

On contrary, Dika *et al.*<sup>6</sup> showed non-significant influence of aging on FT<sub>4</sub>, FT<sub>3</sub> and TSH level. It may be due to narrow age range of their sampling which failed to find out influence of aging process. However, there is increased level of FT<sub>4</sub>, FT<sub>3</sub> and decrease level of TSH concentration in advanced age<sup>3</sup>. This discrepancy may be due to the increased requirement of these hormones for the various biochemical and physiological function of the body<sup>12</sup>.

This study showed higher FT<sub>4</sub> and TSH concentration in (8-17) years age group in comparison to all other groups. Almost similar type of result observed by other previous studies<sup>4</sup>. This finding represents that marked changes occur in thyroid function during puberty as an adaptation to physical and sexual development. Adaptation of hypothalamo-pituitary-thyroid axis during puberty in response to increase energy expenditure may be the reason<sup>5</sup>.

One of the strengths of this study is that we have included only healthy persons (both males and female) who are absolutely free from any diseases.

es. So, it was possible for us to detect the variation of FT<sub>3</sub>, FT<sub>4</sub> and TSH level in different age.

### **Conclusion :**

After analyzing the result of the study, it can be concluded that ageing has significant effect on the level of FT<sub>3</sub>, without significant effect on the level of FT<sub>4</sub> and TSH.

### **Limitations :**

- The sample size was small.
- Only healthy persons range from 8 to 65 years were included in the study.
- Infant, newborn baby, pregnant women were not included in this study.
- Seasonal variation was not considered.

### **Recommendation :**

- A study with larger population should be conducted.
- Infant, newborn, pregnant women, BMI group should be included in the study for understanding their thyroid status.
- Comparative study between different variables should be done.

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