



FIG. 2. High-resolution sonography, performed upon the diagnosis and 20 months later, revealed both an enlarged right lobe with inhomogeneous echo and no evidence of nodular alteration. Furthermore, color Doppler imaging highlighted a much greater vascularization (arrow) of the right lobe. In contrast the left lobe was of normal size, vascularization, and had uniform echo throughout the entire lobe.

Physicians should be aware that Graves' disease can present with unilateral involvement of the thyroid gland at isotope scanning; in this case, ultrasound examination is indicated to detect the presence of contralateral thyroid tissue, and to exclude the possibility of a hyperfunctioning nodule. Although indicated for hyperfunctioning nodules, hemithyroidectomy does not seem to be an appropriate treatment for unilateral Graves' disease: the two patients described by Sakata et al. (2) had prompt recurrence in the contralateral lobe after hemithyroidectomy.

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