

Repeat surgery not indicated, declined, not suitable or feasible

Albumin-adjusted serum calcium level is:

- $2.85 \mathrm{mmol} / \mathrm{litre}$ or above with symptoms of hypercalcaemia or
- $3.0 \mathrm{mmol} /$ litre or above with or without symptoms of hypercalcaemia


Base decisions on whether to continue treatment with cinacalcet on how well it reduces symptoms
Initial albumin-adjusted serum calcium level is $2.85 \mathrm{mmol} / \mathrm{litre}$ or above with symptoms of hypercalcaemia

Change in clinical features

Offer monitoring:

- measure albuminadjusted serum calcium and eGFR or serum creatinine annually, or every 2 to 3 months if the person is taking cinacalcet
- consider a DXA scan at diagnosis and every 2 to 3 years
- offer ultrasound of the renal tract at diagnosis and when presenting or if a renal stone is suspected.


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Consider a
bisphosphonate to reduce fracture risk for people with primary hyperparathyroidism, in line with the NICE technology appraisal guidance on bisphosphonates for treating osteoporosis

