**End of the case report 3:**

After initiation of levothyroxine substitution treatment, the patient became pregnant in four months. The replacement dose increased from 75µg/ day to 150 µg/ day during pregnancy, and the treatment was supplemented with iodide 100 µg/ day within whole pregnancy and breastfeeding. The TSH laboratory result was monitored every 4 weeks till 20th week of pregnancy, then after the puerperium and 3 months after delivery. After delivery, levothyroxine treatment returned to the pre-pregnancy dose of 75 µg daily. The other two successful pregnancies were followed.