OBJECTIVE: To study if subclinical hypothyroidism is associated with increased cardiovascular risk factors (CVRF) in postmenopausal women without hormone therapy. INTRODUCTION: The association between subclinical hypothyroidism (SH) and ischemic heart disease has been a matter of debate. There is also debate on whether a link exists between SH and CVRF. The issue has not been explored in postmenopausal women (PW), a period in which disorders have been described in variables potentially relevant. MATERIAL AND METHOD: We studied a cohort of 300 PW aged less than 70 yr with normal free T4 levels. They were classified into quartiles according to levels of TSH (IU/ml): group 1 (0.4 to 2.5, n=118), group 2 (2.51 to 5, n=143), group 3 (5.01 to 10, n=28) and group 4 (> 10, n=10). We analyzed CVRF, as defined in the European Guidelines on Cardiovascular Disease Prevention in Clinical Practice 2012): blood pressure, weight, waist circumference (WC), High-Sensitivity C-Reactive Protein (hs-CRP), glycemia, lipids, homeostatic model assessment index (HOMA), and the estimated 10-year risk of a first fatal atherosclerotic event according to SCORE: age, sex, smoking, systolic arterial pressure and total cholesterol ratio: total/high density lipoprotein (HDL). RESULTS: The mean age was 56 years. No significant change was detected except a non-significant trend in WC>88 cm and in hs-CRP when women were stratified in TSH 1 hs-CRP levels was higher in group 3 (40%) than in group 1 (25%). No linear correlation was detected between TSH levels for any of the CVRF studied (Table 1).