A dysfunctional thyroid can affect almost every aspect of your health.

Imbalances of the thyroid are connected into many female hormone issues. These can include breast cancer, uterine fibroids, ovarian cysts, endometriosis, infertility, postpartum depression, miscarriage, PMS, amenorrhea and menorrhagia. Hypothyroidism or underactive thyroid is often linked with adrenal fatigue, estrogen dominance and progesterone deficiency. A dysfunctional thyroid can affect almost every aspect of health. It is one of the most under-diagnosed hormonal imbalances of aging, together with estrogen dominance and metabolic syndrome.

More than 10 million Americans have been diagnosed with thyroid disease, and another 13 million people are estimated to have undiagnosed thyroid problems. About 10 percent of the adult population is afflicted with this frequently overlooked disease of epidemic proportions.
The first step is to find out if you have any of the chronic symptoms of hypothyroidism or any of the diseases associated with hypothyroidism. Ask yourself if you have any of the following symptoms:

- Weight gain; Inability to lose weight
- Sluggishness in the morning
- Poor concentration and memory
- Low-grade depression

- Swollen feet/swollen eye lids
- Dry skin
- Hoarse voice
- Excessive ear wax
- Thinning hair
- Coarse hair
- Being very sensitive to cold and having cold hands and feet
- Low body temperature
- Muscle pain
- Weakness or cramps
- Low sex drive
- Fluid retention
- High cholesterol

Causes of Hypothyroidism

- High or low cortisol, low DHEA
- Estragon dominance, HRT, BCP
- Progesterone deficiency
- Extreme hormonal fluctuations such as pregnancy, childbirth and menopause
- Increased or prolonged stress
- Sluggish liver
- Iron deficiency anemia
- Nutritional deficiencies (zinc, selenium copper, manganese, magnesium, Vitamins A, B2, B3, B6, B12, C and E
- Iodine deficiency

- Heavy metal toxicity (lead, cadmium and mercury interfere with the conversion of T4 into T3 in the liver)
- Injury to the cervical vertebrae
- Accumulating fluoride levels
- Radiation from x-rays
- Food allergies (gluten, animal protein and dairy)
- Candida overgrowth and bowel toxicity

Testing for Hypothyroidism

Standard laboratory tests have been established for thyroid disease although there are additional hormones that need to be evaluated when examining the many aspects of thyroid imbalances.
The Basal body Temperature test can be used as an indication to the presence of a thyroid disorder. Hormones secreted by the thyroid gland reflect the metabolic rate as the body temperature is examined. This is deemed as the most sensitive thyroid test.

Basal Body Temperature Test

1. Shake down the thermometer to below 95°F and place it by your bed before going to bed at night.
2. On waking place the thermometer in the armpit for a full ten minutes. It is important to move as little as possible; lying and resting with closed eyes is best. Do not get up until the 10 minutes has passed
3. After 10 minutes, read and record the temperature and date.
4. Record the temperature for at least three mornings at the same time of day.

A normal temperature is 97.8-98.2°F or 36.6-36.8°C with fluctuations that occur with the menstrual cycle. Menstruating women must perform the test on the 2nd, 3rd and 4th days of the menstrual cycle.

Post-Menopausal women can perform the tests on any day. If your temperature is consistently lower than this, there may be an indication of hypothyroidism. If the temperature is consistently higher this may be an indication of hyperthyroidism.
A complete thyroid profile includes free T4, free T3, TSH, and TPO and can indicate the presence of an imbalance in thyroid function. It is highly advisable to also check estrogen, progesterone, testosterone, cortisol and DHEA levels as they are greatly affected by thyroid function. Alternatively imbalances in these hormones can also negatively affect the function on the thyroid.
Complete hormone testing is 10% off for the month of March. This comprehensive panel includes estrogen, progesterone, testosterone, cortisol, DHEA, TSH, T4, T3 and TPO.