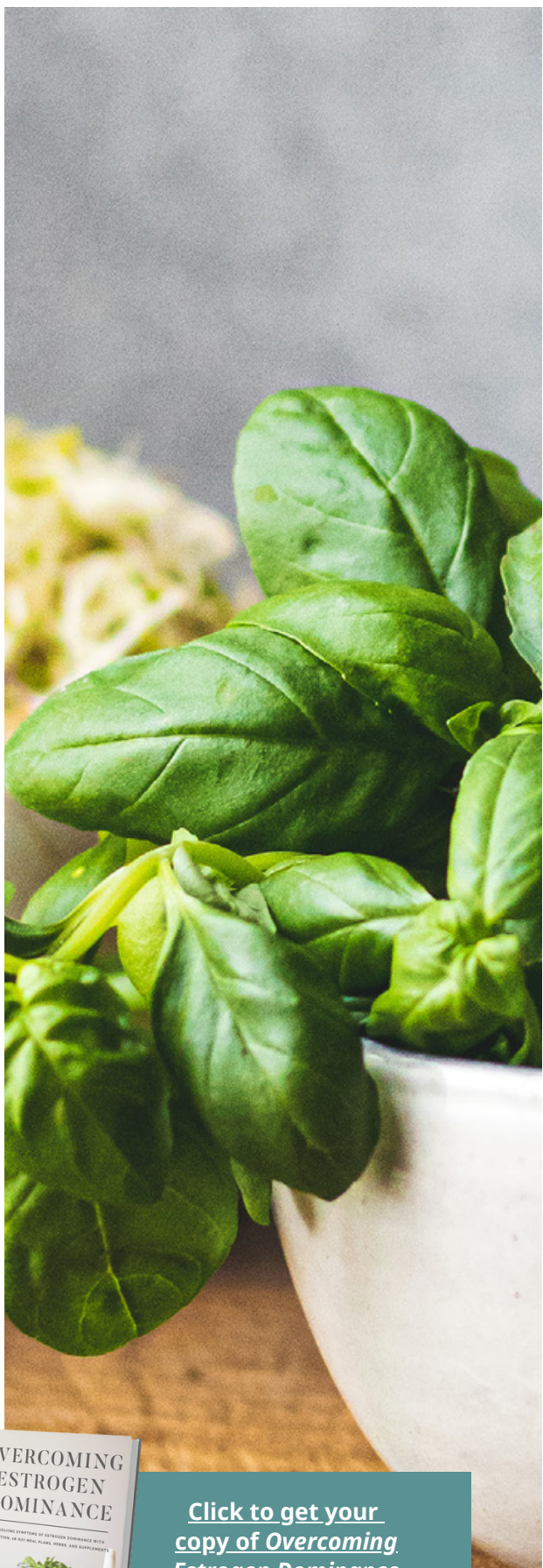




Overcoming Estrogen Dominance

Lab Testing Checklist

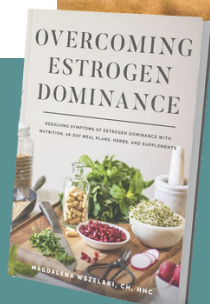
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ORDER NOW





To test or not to test?

Do you need to order labs? Are they vital before starting the program? Only you can decide whether or not lab testing is right for you at this time, but I want to give you a few pointers.

Some women feel they already know that they have estrogen dominance based on the list of symptoms and therefore feel that tests aren't necessary.

Some women simply have no budget (the urine and saliva hormone tests are most often not covered by insurance, although that may depend on your policy).

Other women feel that they want to identify their baseline hormone levels before they start the program. They then do the labs again after the protocol to see what's changed. It can be very encouraging to have absolute proof in the numbers that you're moving in a positive direction and see the "before" and "after" in black and white. If this appeals to you, consider testing.

I also recommend testing if you're suffering from many different symptoms; have a history of estrogenic cancer such as breast, ovarian, uterine, or thyroid, or you've tried many different ways to resolve your symptoms but are still struggling.

In summary, order labs if you

- want a baseline, before and after doing the Overcoming Estrogen Dominance protocols
- are suffering from many symptoms or have a history of estrogenic cancers (breast, ovaries, uterus, thyroid)
- have tried to resolve your symptoms in many ways and are still struggling

Before you test your hormones

Your hormones start acting up after years of other health issues going awry. Hormones are typically the last “to go.” Furthermore, your hormonal balance also depends on several other factors, such as inflammation, vitamin and mineral deficiencies, gut and liver health. I’m therefore a big proponent of starting your baseline tests with the below list. I created it to give you a sense of appreciation for how much your hormones depend on many other bodily systems.

What	Markers	Impact on Hormones
Inflammation	<ul style="list-style-type: none"> • hs-CRP • Homocysteine 	Profound impact on the whole body and chronic diseases. Also affects how hormones are produced and metabolized. Estrogen metabolism gets compromised. Inflammation also desensitizes hormone receptors.
Metabolism/Blood Sugar Balance	<ul style="list-style-type: none"> • Fasting glucose • Hemoglobin A1c • Fasting insulin 	Drive up inflammation, interfere with the thyroid hormones, elevate testosterone and estrogen, worsen hot flashes.
Nutrients	<ul style="list-style-type: none"> • Balanced endocrine system • Healthy bones and teeth • Strong immune, brain, and nervous system health • Blood sugar balance • Cardiovascular health 	The endocrine system (the glands that produce hormones) is dependent on sufficient vitamins and minerals to function properly. You need to give your hormones the “raw materials” for them to be able to work. Deficiencies in any of these can throw off your hormones.
Core Tests	<ul style="list-style-type: none"> • CMP (liver and kidney function, electrolytes, and protein stores) • CBC (complete blood count) 	Inexpensive tests that show the health of the kidneys, liver and the immune system. They each have a direct and indirect impact on the hormones.

Which hormones need testing?

Steroid (aka sex) hormones such as DHEA, testosterone, estrogen, progesterone and cortisol show most accurate values when measured by urine or saliva. When I was in private practice, my clients would bring their hormone lab tests measured in serum (blood) that looked “perfect.” These clients felt anything but perfect. Their hormones were raging and they were at wits’ end. Blood testing is the testing standard in conventional medicine and most physicians haven’t caught up with more accurate testing methods, especially when it comes to steroid hormones.

Why testing steroid hormones with serum isn’t accurate

There are a few reasons. Blood tests draw no distinction between bound and free hormones. The body is only able to use the free hormones and blood tests show total values (that consist of bound and free). This may lead to mis-leading results - a person’s lab tests may appear to be normal or even high because of the bound hormone. However, if the free

hormone level is low, the patient can be highly symptomatic even with a normal total hormone level.

Another challenge is that serum testing does not show the metabolites of steroid hormones, which we now know can tell an important story of a patient. How we break down hormones matters. I talk about it in *Overcoming Estrogen Dominance*, referring to estrogen metabolites as “clean” and “dirty.”

Which hormones can be tested using serum (blood)

Peptide hormones can be tested using blood, with great accuracy. These hormones include the thyroid hormones (T3, T4), TSH (thyroid stimulating hormone), FSH (follicle stimulating hormone), LH (luteinizing hormone), insulin and prolactin.

Summary of testing methods

Here is a complete list of hormone markers and the recommended form of testing:

Hormone	Testing Method
<ul style="list-style-type: none"> • Thyroid hormones (T3, T4) • TSH (thyroid stimulating hormone) • FSH (follicle stimulating hormone) • LH (luteinizing hormone) • Insulin • Prolactin 	Blood
<ul style="list-style-type: none"> • DHEA • Testosterone • Cortisol • Estrogens (estone, estradiol, estriol) 	Urine
Progesterone	Saliva



A word on thyroid testing

The focus of my latest book is on estrogen dominance, but I feel like it's an incomplete story if I don't mention thyroid testing in this document. Why? Because millions of women are getting under-, mis- and undiagnosed when it comes to thyroid health. The reason is outdated and incomplete test markers for the thyroid ordered by most physicians.

If you show symptoms of hypothyroidism, which include deep fatigue, sudden and unexplained weight gain, hair and eyebrow loss, dry skin, depression, anxiety, feeling cold and experiencing chronic constipation, I highly recommend to either insist on getting the below tests or ordering them yourself (read further in this document for advice on how to do it).

Complete thyroid tests cover:

- TSH (thyroid stimulating hormone)
- Free T3 (note: not Total)
- Free T4 (note: not Total)
- TPO antibodies (for Hashimoto's)
- TG antibodies (for Hashimoto's)



Where to order testing

Blood (serum) testing

For hormone foundational tests (that cover inflammation, metabolism/blood sugar balance, nutrients and core tests-covered on page TK), you can either work with your functional health provider or order the tests on your own.

We partnered up with Your Lab Work that allows you to self-order your labs. Once you order them online, you just have to visit one of the Quest locations for a blood draw. At the time of writing this document, this service isn't available in NY, NJ, MD, RI and AZ due to state regulations. But, do check their website because these regulations change.

We have asked Your Lab Work to offer our community special discounts. You can order your labs and see the discounts here: www.yourlabwork.com/hormonesbalance.

Urine testing

I recommend the DUTCH test, which has become the gold standard for functional practitioners. This is a perfect test to see the levels of your steroid hormones but also their metabolites - which tell a more in-depth story of the health of your liver (which breaks down these hormones), nutritional deficiencies, stress, sleep and lots more.

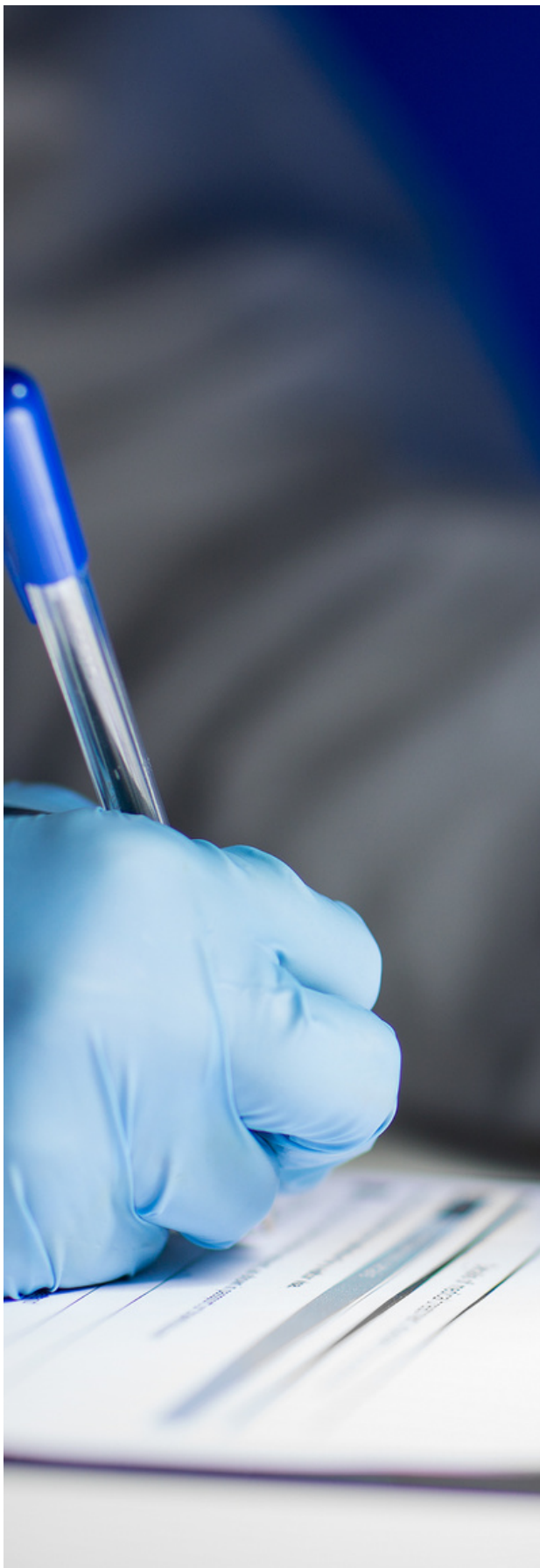
You can order the DUTCH kit here: www.yourlabwork.com/hormonesbalance.

Saliva testing

I recommend saliva testing to check your progesterone levels. Progesterone cannot be measured in urine (DUTCH will only show you an approximation). Saliva is a great medium to understand your progesterone levels. Unfortunately, saliva testing won't show estrogen metabolites. At the time of writing this document, there is no provider offering both urine and saliva screening in one test. You can self-order saliva testing on www.CanaryClub.org, the Basic Saliva Hormone includes progesterone.

Test checklist

What to test	Method	Where to order
<p>Start here:</p> <p>Inflammation</p> <ul style="list-style-type: none"> • hs-CRP • Homocysteine <p>Metabolism/Blood Sugar Balance</p> <ul style="list-style-type: none"> • Fasting Glucose • Hemoglobin A1c • Fasting Insulin <p>Nutrients</p> <ul style="list-style-type: none"> • Vitamin D3 • Vitamin B12 • Serum ferritin • Magnesium • Zinc • Iron • Total Iron Binding Capacity (TIBC) <p>Liver, kidney and immune system</p> <ul style="list-style-type: none"> • CMP (liver and kidney function, electrolytes, and protein stores) • CBC (complete blood count) 	Blood	Your functional provider or www.yourlabwork.com/hormonesbalance
<p>Estrogen Dominance</p> <ul style="list-style-type: none"> • Estrogens • Estrogen metabolites • DHEA • Testosterone • Cortisol • Melatonin 	Urine	Your functional provider or www.yourlabwork.com/hormonesbalance
<p>Estrogen Dominance</p> <ul style="list-style-type: none"> • Progesterone 	Saliva	Your functional provider or www.canaryclub.org
<p>Thyroid health</p> <ul style="list-style-type: none"> • TSH • Free T4 • Free T3 • TPO antibodies (for Hashimoto's) • TG antibodies (for Hashimoto's) 	Blood	Your functional provider or www.yourlabwork.com/hormonesbalance



Getting your results interpreted

Understanding lab results can be overwhelming and you may be thinking “What am i supposed to do now?”

I’ve written [this article](#) that may help you find a practitioner through various resources and functional medicine directories. If you still need help, please email my team at support@hormonesbalance.com and we can refer you to practitioners I respect and trust.

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