

CASE STUDY: Anti-Aging (Adrenals/BHRT)

Indications/Patient Presentation

- 36 years of age - female mother of (3) children
- Mother died a year ago
- Diagnosed as depressed– tried Zoloft©, now prescribed Lexapro©
- Tired all of the time
- Low Sex Drive
- Hair thinning and falling out
- Problems thermo-regulating: cold hands and feet
- 15# weight gain
- Feels best from 9pm to Midnight– has energy for housework
- Sleeps from 12mid – 6:30am, drink 4 cups of coffee in am
- No cyclic symptoms

Objective Findings:

Physical exam shown to be non-contributory

Test Results

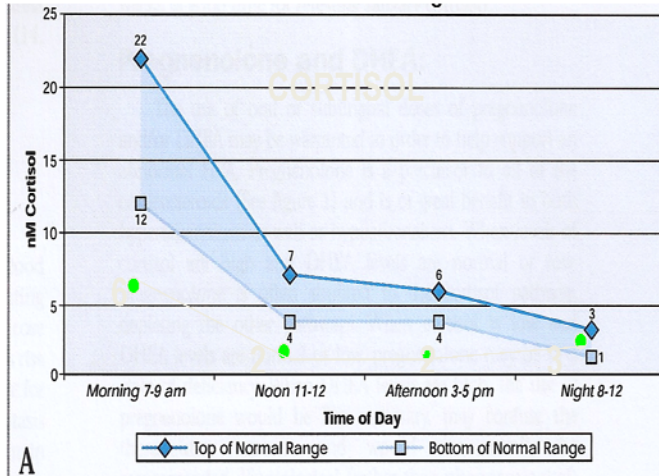
Saliva Test (Cycle Day 23)

- Estradiol 14 pg/ml (8-20)
- Progesterone 190 pg/ml (100-500)
- Testosterone 15 pg/ml (8-20)
- DHEA 2 ng/ml (3-10)

Thyroid Panel

- TSH 2.135 (.35-3,0)
- FT4 0.93 (0.7-1.9)

- FT3 2.4 (2.3-4.2)
- TPO Neg.



Diagnoses

- Adrenal Fatigue with evening surge
- Borderline Low Thyroid
- Borderline Low Progesterone

Treatment

- Hydrocortisone 5mg at wakeup and 2.5mg at noon.
- Phosphorylated Serine and/or Melatonin if sleep problems
- Adrenal support vitamin; Thyroid support vitamin
- Exercise
- Recommend 7-8 hours sleep
- Eat healthy and cut back drastically on caffeine

Follow-up (1) month later

- Much more energy
- Less Irritability

- Down to one cup of coffee per day
- Feels like she can taper her Lexapro now
- Gained 3 pounds
- Advised her to taper her noon cortisol dose to 2.5mg and then d/c it and see how she does.

Follow-up (2) months later

- Only on the 5mg Cortisol in the mornings
- Repeat testing done
- Off the Lexapro and doing well
- Now has energy to exercise
 - Recommend Low Glycemic Diet & begin exercise
- Going to bed an hour earlier and sleeping better

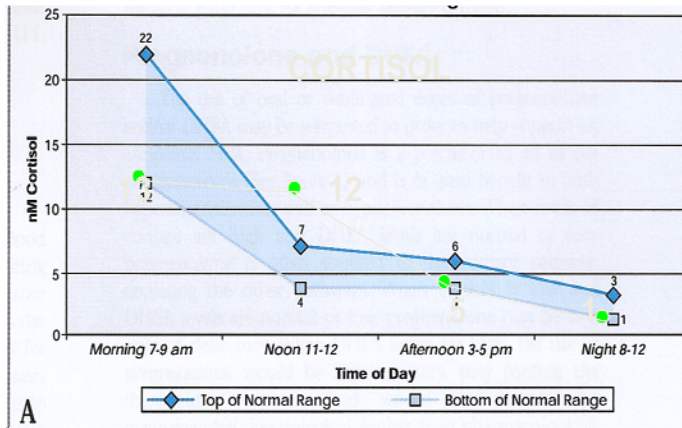
Test Results

Saliva Test (Cycle Day 21)

- Estradiol 13 pg/ml (8-20)
- Progesterone 312 pg/ml (100-300)
- Testosterone 17 pg/ml (8-20)
- DHEA 3 ng/ml (3-10)

Thyroid Panel

- TSH 1.878 (.35-3.0)
- FT4 1.16 (0.7-1.9)
- FT3 2.6 (2.3-4.2)
- TPO Neg.



Follow-up Treatment

- No Progesterone or Thyroid supplementation needed
- Decrease morning hydrocortisone dose to 2.5mg and try to d/c over the next 2-3 months
- Continue vitamin support
- Follow-up in 3 months
- Continue Glycemic Diet and Exercise
- Continue good sleep habits