

Patient:

Date:

Tuesday 25th December 2018

Comments:

- You came to see me to obtain my advice regarding your thyroid hormonal treatment, which you have started years ago in . A local doctor prescribed it, but it was your “*own decision*” and was given “*at my insistence*”. It consisted in 100 mcg of L-thyroxine, but you stopped one month before our meeting to resume just two days ago. I have asked you to stop again in order to test properly later.
- That is what we did. TSH level comes back above 4 mU/L, which is indeed compatible with low thyroid function, keeping in mind your main health concerns: being overweight and depressed. You suffer from almost constant thrush. You noticed that a small surgical wound on the toe struggled to heal as you had already stopped taking T4. I feel that we have enough elements to start a gentle T4 therapeutical trial.
- Considering these results, I have already advised you to take only 50 mcg of L-thyroxine, given that we do not have the grounds for giving more according biology. We will need to discuss when we share your results and adapt according how you feel. Anyhow, I will request that you change your diet as a priority.
- Biological evidence shows increased intestinal permeability, especially huge LPS-BP increase reflecting the presence of endotoxins. Lipopolysaccharide (LPS) uncovers severely disrupted microbiota and it has been associated with obesity. Berberine intake (BBTPY 6 capsules/day) can help addressing both issues.
- Our intestinal treatment also addresses thrush with specific probiotics (WOMOB), plus different natural ingredients to contribute healing the leaky gut (GIPE). Massive dietary changes represent compulsory complement to my treatment. Priority here as well goes to gut healing by removing all that upsets its lining: **gluten grains** eradication and significant drop in consumption of **grains, wine, hot & spicy foods**.
- To help you manage such changes, I suggest you see my nutritionist who will provide a nice eating-plan.
- You have suffered from intense stress that has exhausted your adrenal function, as reflected by lack of two main prohormones, DHEA and pregnenolone. The latter represents the direct precursor to relaxing progesterone, and I am far from certain that synthetic progestin in your coil delivers the same benefits.
- I therefore prescribe daily compound capsules providing those two natural molecules seen in the US as food supplements, but not here in Europe. I am not enthusiast about your HRT system: to be discussed!

Georges MOUTON MD