



BHRT and Vitality

Recapture Your

Energy

Weight Control

Mental Focus

Libido

Physical & Emotional Stability



"After one day on bio identical estrogen (BHRT), I felt the veil lift. After three days, the sky was bluer, my brain was no longer fuzzy, my memory was sharper. I was literally singing and had a skip in my step."

Oprah Winfrey

I Feel Like I Am In Someone Else's Body

*“One pair of pants in the morning . . . And another for the evening. Are you telling me I put on 2 pants sizes during the day! I feel like I am walking around in someone else's body. I want to scream to everyone I see **I'M STILL IN HERE!**”*

What We Can Measure ...we Can Manage!

Who stole your metabolism? Remember when you did not have to do the constant long division problem in your head (*250 calories here . . . 150 here . . . How many grapes did I eat and is that 6 calories for the big grapes or the small grapes . . . Well I did do 3 flights of stairs today so that should help but I want a glass of wine tonight so do I skip lunch and*) That is a lot of energy and focus around one basic thing . . . Your metabolism has decreased and everything that used to work does not work any more. Bad news is **NOTHING WILL WORK WHEN IT IS A HORMONE BALANCE PROBLEM . . . NOTHING**



FACT: *By the age of forty, metabolism naturally slows down by at least 20% of what it was when you were twenty. By age fifty, its down 30%. Gratefully, metabolism can be measured and balanced to optimal.*

I feel Like I am Losing My Mind . . .

Although this statement at first infuriates patients, it is the foundation. We certainly do not mean that you are making it all up . . . rather it is essential that we understand where it all begins.

The brain regulates, translates, and interprets hormonal output from the various other organs of the body. But once you turn 30, the brain becomes less effective in sending messages to the other organs to produce their hormones. This forces the other organs to age, and we start to lose our health in small steps. For example, growth hormone production diminishes at age 30; by 40 women begin to lose estrogen and men testosterone; then we lose DHEA, progesterone, parathyroid hormone, and calcitonin.



The more we age, the more hormones we lose. Our organs get to a point where they can no longer produce a particular hormone on their own. Eventually, that organ will die and drag the others down with it, leading to a cascade of poor health and unnecessary aging.

Worse, without the right levels of hormones, many women, and men as well, find that they just can't lose weight, no matter how hard they try.

So many of our patients have so much on their plate and even more on their mind. They are constantly trying to juggle the lives of those round them and not “forget anything” . . . as a result this is one of the first symptoms they notice of hormone imbalance.

I am *SOOOOO* Tired . . . There HAS to be something wrong!

Your right . Hormone imbalance can cause bouts of fatigue and little to no energy. We have many patients who have been “pushing through” for many years and have now learned to live with it . . . But they have developed **chronic fatigue syndrome**. This is not a disease, it is a condition that can when the underlying cause is treated, the condition goes away.



Many of our patients have persistent, debilitating fatigue that doesn't improve with rest, and may worsen with physical or mental exertion. Women are two to four times more likely to develop this condition, which can persist for years due to underlying hormone changes.

- Sever cases can show a wide range of symptoms including:
- Sore throat
- Painful, mildly enlarged lymph nodes in the neck or armpits
- Unexplained muscle soreness
- Headache of a new type, pattern or severity
- Memory loss or trouble concentrating
- Sleep disturbances
- Extreme exhaustion lasting 24 hours after normal exercise

Hormone imbalance can and will include advanced thyroid assessment. Thyroid levels are as unique as your fingerprint. Over and over again we see patients who had “normal” levels from the labs when in fact they had a hidden thyroid condition.

Balancing thyroid with changing hormones for women is key to consistent for both energy and metabolism.

My Libido Is Gone . . . Is It Ever Coming Back?

Stress as we know can impact hormones at every level . . . Adding the stress of a strained relationship can only compound the problem. The issue of decreased libido is a complex one. It is also one that causes confusion our patients partners and many times the symptoms they want to see resolved. Let's get a better understanding of the main reasons.

Lack of Ovulation Sexual desire often peaks around the time of ovulation, nature's way of increasing the chances of procreation. During perimenopause ovulation does not necessarily occur each month. Anovulatory cycles are those where no ovulation occurs but you still have a regular



period. Because of this, you may not realize that you are not ovulating, even so, without ovulation, your body may not react with desire in the same way as with ovulation.

Decrease in Progesterone Progesterone helps fuel desire. During perimenopause, your progesterone levels slowly begin to decrease causing a decrease in sexual desire.

Lower Estrogen Levels Just as progesterone decreases during perimenopause, so does estrogen levels. With lower estrogen levels, you may not feel the same pleasure from physical touch and intercourse. Estrogen also helps to elevate mood, making you more interested in sex. Lack of estrogen can cause vaginal dryness and thinning of vaginal tissue, making intercourse uncomfortable and even painful for some women. Pain during sex will certainly decrease your desire.

Testosterone Imbalance While we most often think of testosterone as a male hormone, women also have it, just in much lower quantities. During perimenopause, the level of testosterone decreases even more as this hormone is directly related to sexual drive. This hormone also plays a role in vaginal lubrication and, as with estrogen, reduced lubrication can lead to uncomfortable and painful sex.

How Does Stress Affect My Body and Hormones . . .

In stressful situations, our “Flight or Flight” button is hit . . . Or our Adrenal Glands go to work.

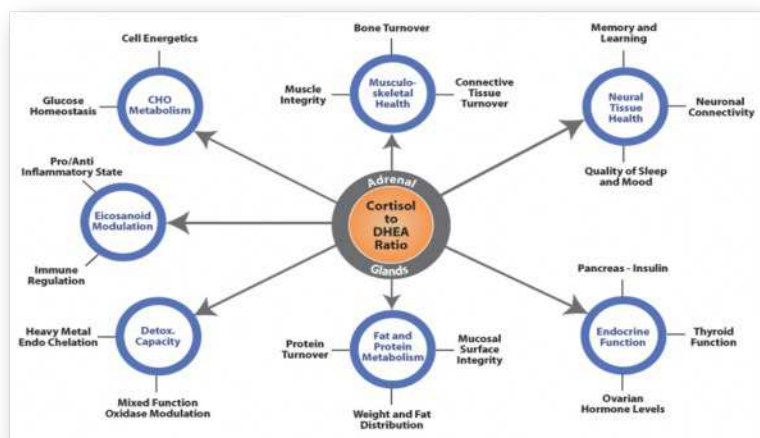
The adrenal glands are the body’s primary shock-absorbers. These small organs that sit right above your kidneys make hormones like cortisol, DHEA and nor epinephrine, which help your body negotiate the metabolic requirements of keeping a body healthy, energetic, and safe. These are your stress glands.

What Do These Adrenal Hormones Do?

Our bodies are super smart in that they’re designed to help us in times of stress. Back when we were cave people, running away from cave bears, we needed highly tuned systems in place to activate our “fight or flight” mechanisms. Hormones like nor epinephrine (which converts to epinephrine, aka “adrenaline”) and the adrenal hormone cortisol were critical hormones that meant the difference between life and death.

The problem is that most of us are no longer high-tailing it away from cave bears. Instead, we stress about finding a job, our divorce settlement, problems with our teenagers, marital problems, meeting the right guy, getting promoted, and a whole host of other “stressors” that have nothing to do with living or dying. As a result, our bodies live in “fight or flight,” spitting out nor epinephrine and cortisol as if the cave bear is right on our heels. The effect is systemic and complex:

Adrenal Fatigue and elevated cortisol levels have a system affect on the system. Chronic stress can cause an almost permanent damage to metabolism, mental focus, and hormone balance:



Can BHRT Fix All These Symptoms . . . NO

There is no magic pill that will wipe **all** these symptoms away. There just isn't. You **can** treat each condition separately, like our parents did. Now the average number of medications our parents are on are eleven, we have seen as many as eighteen. A different medication for a different symptom.

There must be a better way.

Each and every one of the symptoms we covered are a result of your body getting out of sync, systems begin failing, and a body off balance. There is one thing . . . and only one thing . . . that will treat each and all these symptoms and that is your body being in balance.

When working with your doctor on optimization, make sure you ask the her *"Is this treating the symptoms or is this supporting my body to fix it?"*

Trust Your Body . . . It Knows What It Is Doing . . .



Restoring the hormone levels of your 20's and 30's to your customized levels can optimize your body and your physiology. We believe that an optimized body can and will overcome most all . . . if not all . . . of these symptoms.



5 Red Flags To Not Start BHRT . . .

Selecting a doctor or clinic is vital. We wanted to give you three things to ask that can keep you safe and successful:

1. Do you do a physical and diagnostic work-up before treating me?
 - Physical exam and diagnostics like: blood lab, UA, physical exam, diagnostic ultrasound, and EKG are just a few tests that they should have readily available to perform.
2. Do your treatments go outside “safe” lab result levels?
 - Each hormone has a “normal” level which has been established and accepted by physicians as safe zones. These “normal” are wide ranges in many cases. If your doctor wants to take any of your hormones outside that “normal range” . . . It should be a sign to ask more questions. Some cases warrant slightly elevating a hormone, but we have seen people that have been prescribed 2 and 3 times the normal level of a hormone and as a result have had complications. The more they want to drive it outside the normal . . . the faster you should run out of there!
3. How do you monitor my progress?
 - Will they use labs: blood, saliva, and/or urine? How often should each be monitored and how will you both communicate changes to each other.

(Continued on next page . . .)

5 Red Flags To Not Start BHRT . . . continued

4. Will you work with my current doctor?

- *“If you like your doctor you can keep your doctor”* Not only can you but you should. Not only are two sets of eyes better than one, but your doctor who has known you for many years can give guidance to you as well as your hormone therapy doctor. If you come to an office for hormone therapy and they won't send reports to or call your doctor . . . You may want to consider an alternative.

5. Do you accept insurance?

- If they do not accept insurance does not mean they are not great at what they do. To submit to insurance carriers, doctors and clinics must follow quality and established guidelines. It does not mean that the care is better or more affective, but it does mean that they have someone looking over their shoulder to make sure that guidelines are followed.

Few other interesting facts that may be helpful:

- are there doctors on staff or mid-levels (nurse practitioners or physicians assistants)
- Are the doctors board certified
- Do they have a doctor of pharmacy (PharmD) you can call
- What other services do they offer
- Are they affiliated with any hospitals or imaging centers
- Do they have cash pay plans for high deductible or no insurance services

Again, selecting a doctor and clinic is an important choice. Safety is most important.



We hope that this e-book can be a resource to help you. Our office specializes in hormone optimization and are always happy to be a resource for you for treatment or information.

If you would like a consultation with one of our board certified physicians, please feel free to reach out and we would be happy to schedule your initial consultation.

We are providers for most major medical insurance carriers and many times treatment is covered by insurance.

Our staff is able to answer any specific questions you may have regarding your condition or treatment in our office. Call us at 402-875-5510 or log onto our website for a live chat with one of our qualified staff member, 24 hours a day at www.liverevital.com.