

The ABCs of hypothyroidism

Diagnosis and treatment

Karen Jensen, ND



Thyroid hormones affect every cell in the body. In hypothyroidism, the amount of hormone secreted by the thyroid gland does not meet the body's demands.

Some causes of hypothyroidism include lack of iodine, autoimmune disease, viral or bacterial infections, radioactive iodine, neck injury or surgery, problems with the pituitary in the production of thyroid stimulating hormone (TSH), or radiation therapy.

Additional causes of hypothyroidism, seen more by naturopathic physicians, include low DHEA (dehydroepiandrosterone) levels or tyrosine and selenium deficiencies. Many women develop

thyroid problems after stressful physiological conditions such as pregnancy or traumas that increase the production of adrenal stress hormones.

Get it diagnosed

If you are experiencing any symptoms of hypothyroidism (see sidebar) have your thyroid checked. The conventional approach to diagnosing and treating hypothyroidism has benefited millions of patients; however, there

are people whose condition may be undetected by conventional laboratory thyroid-function tests.

Laboratory tests measure the level of TSH. The pituitary gland releases TSH to stimulate the thyroid, which, in turn, produces the thyroid hormones T4 (free thyroxine) and T3 (triiodothyronine). The accepted normal range for TSH is 0.38 to 5.5 IU/mL (International Units per millilitre). Hypothyroidism is not suspected unless the lab values are

Symptoms of hypothyroidism

- fatigue/lethargy
- constipation
- weight gain
- edema (water retention)
- headaches
- decreased libido
- depression
- memory loss and poor concentration
- dry skin
- thinning hair or loss of hair
- insomnia
- hoarseness/feeling of lump in the throat
- sensitivity to cold
- infertility
- severe menopausal symptoms.

Natural treatments for hypothyroidism

- **Iodine** is required to make thyroid hormones. Bladderwrack, kelp, and dulse are rich natural sources of iodine. Dosage: 300 to 400 mcg of iodine/day.
- **L-Tyrosine** is an amino acid required to make thyroid hormones. Dosage: 500 mg/day.
- **Ashwagandha** (*Withania somnifera*) has been proven helpful for low thyroid conditions. Dosage: (standardized to contain 1.5% withanolides) 150 mg/day.
- **Selenium** works as a cofactor for the enzyme that converts T4 to T3. Dosage: 100 to 200 mcg/day.
- **Homeopathic remedies** *Fucus vesiculosus* or *thyroidinum*. Dosage: 6X to 30X, 3 pellets, two to three times/day.

Make sure to avoid soy products as they may block the absorption of thyroid hormone.

greater than 5.5 IU/mL. However, some labs are now indicating that numbers within the range of 3.0 to 5.5 IU/mL indicate what's known as "preclinical hypothyroidism."

Is it forever?

People who take thyroid hormone are led to believe that once on thyroid hormone, always on thyroid hormone. However, this is not always the case. There is a delicate balance between the adrenal and thyroid glands. Studies show that elevated levels of adrenocorticotropic hormone, an adrenal hormone that stimulates the adrenal cortex to secrete cortisol (stress hormone), causes a decreased response of TSH. Studies also show that plasma concentrations of DHEA, an adrenal hormone, are significantly decreased in women with primary hypothyroidism.

If the adrenal and thyroid glands are treated with herbal or nutritional support at the same time as the thyroid hormone is taken, it is possible to restore balance to these organs and eventually wean off the thyroid medication.

Do not attempt to go off of your prescription thyroid medication on your

own. Seek the expertise of an alternative health practitioner who can implement a nutritional program to restore balance to the adrenal and thyroid glands.

Treating hypothyroidism

Severe clinical hypothyroidism usually requires the use of thyroid hormone available only by prescription. Most patients are treated with T4 (Synthroid®), while many patients respond more favourably to desiccated thyroid hormone containing both T4 and T3. Other patients, who do not respond to these therapies, are helped with T3 (Cytomel®).

For those people who have preclinical hypothyroidism with TSH values lower than 3.5 IU/mL, I would suggest treating your thyroid with natural remedies first. Those with TSH levels over 3.5 may require thyroid hormone treatment. ☐

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