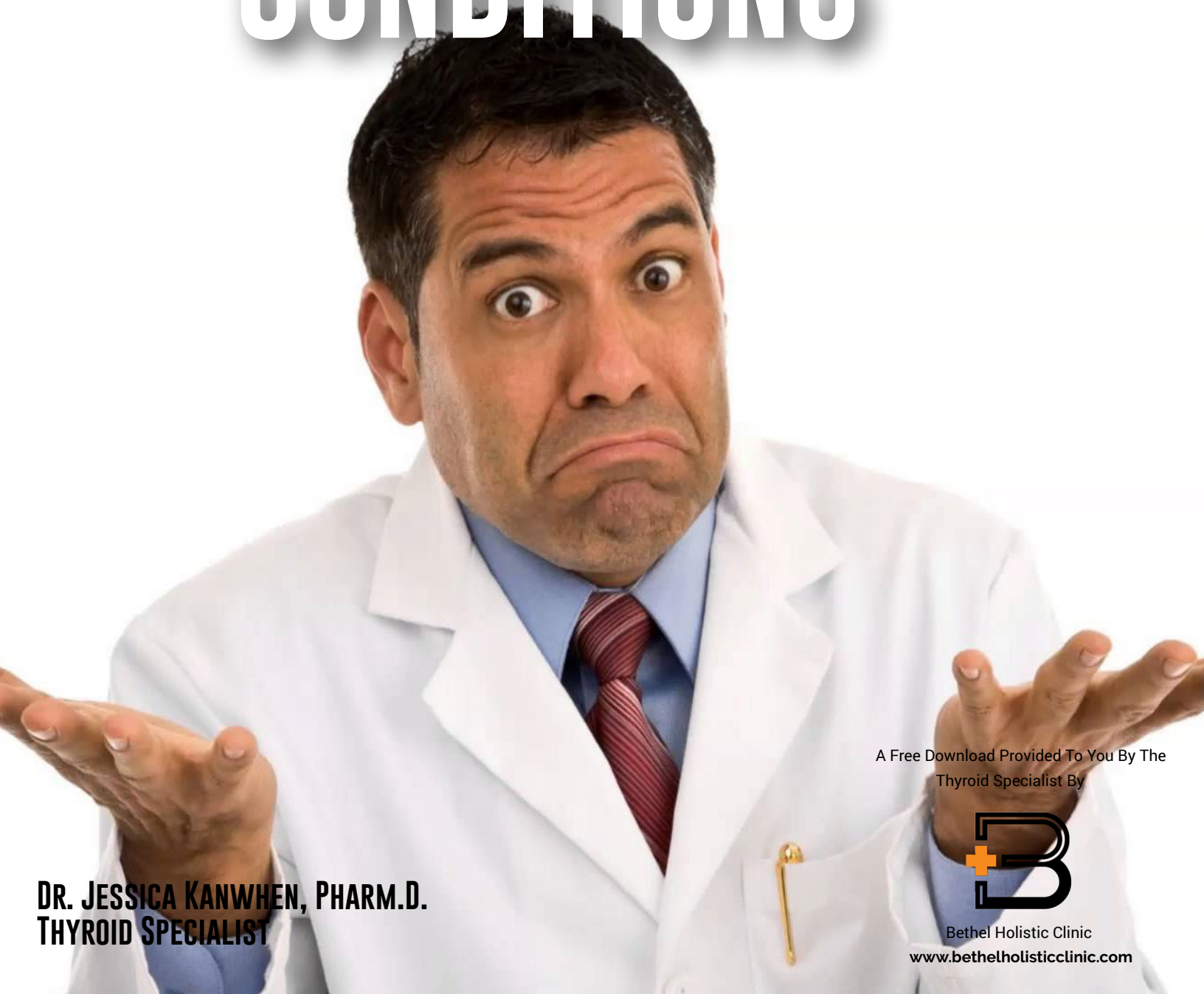


5 MISTAKES COMMONLY MADE BY EVEN GOOD DOCTORS WHEN TRYING TO DIAGNOSE THYROID CONDITIONS



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Hearing that your thyroid tests are normal but you don't feel normal is completely frustrating! You're thinking, "How can my thyroid tests be normal when I feel so awful?!"

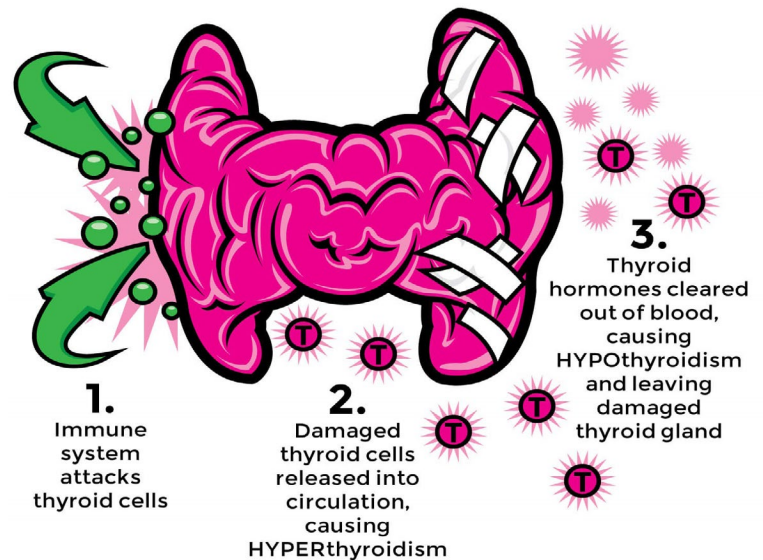
The Thyroid is a gland that is misunderstood by many traditional medical doctors. Unfortunately, their lack of knowledge is causing many people pain and suffering. People are experiencing symptoms such as inability to lose weight, extreme fatigue, cold intolerance or sensitivity to cold, hair loss, allergies, forgetfulness, muscle cramps, stiffness, constipation, diarrhea, acid reflux, bloating, rashes, food sensitivities, joint pain, loss of ambition, dry skin, depression, menstrual irregularities, infertility, weakness, involuntary mood swings (emotional lability)....

The thyroid gland produces thyroid hormones that almost every organ in your body needs to function. "Thyroid hormones help regulate heart rate, breathing, metabolism, blood pressure, the menstrual cycle, body temperature, and much more. In fact, there's not a single cell in the body that doesn't depend on thyroid hormones in some way"²

As you can see, it is very important to have your thyroid checked in order to make sure that it is working properly. I know a lot of you are thinking, "I had my thyroid checked and my doctor said it was normal". Most of my clients have been told this exact same thing! And after I test their thyroid function, I often times find that in fact, their thyroid is **not** working properly which explains so many of their symptoms.

I've put together this free report so that you don't have to be a victim to your doctor's lack of knowledge about thyroid.

Hashimoto's: When The Thyroid Gland is Under Attack



Here are the 5 mistakes commonly made by even good doctors when trying to diagnosis thyroid conditions:

MISTAKE #1: ONLY ORDER TSH.

Thyroid-stimulating hormone (TSH) is typically the only thyroid screening test that doctors order when looking for a thyroid condition. When TSH is elevated, it means that there are low levels of circulating thyroid hormones in the blood (hypothyroidism—low thyroid function) so the body must be “stimulated” in order to produce more thyroid hormones. In the case of hyperthyroidism, TSH is very low.

There are a few problems with only measuring TSH to determine normal thyroid function:

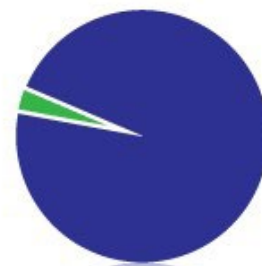
1. TSH is an excellent method for picking up *long-standing* thyroid defects. TSH may not show as abnormal until there is an extensive amount of damage to the thyroid gland and the body can no longer compensate. As a result, you can have a normal TSH for 5 years or even 20 years and be experiencing *severe* symptoms of thyroid dysfunction. Most of my thyroid patients have a normal TSH. Normal TSH does not equate to normal thyroid function.
2. The range that most doctors use for TSH is too wide. Most labs use 0.5-5.0 $\mu\text{IU/mL}$. So if your TSH falls anywhere in this range, then most doctors will tell you that your thyroid is normal. An optimal reference range for TSH is actually 1-2 $\mu\text{IU/mL}$. A healthy person who is not taking thyroid medications would be in this range.

I encourage you to always ask your doctor for a copy of your lab results so that you can check your lab results yourself.

Hypothyroidism in the US



1 in 5 Americans have hypothyroidism.
Only HALF of them even know it.



97% of hypothyroidism cases
are Hashimoto's thyroiditis.

■ - Hashimoto's thyroiditis

MISTAKE #2: DON'T ORDER FREE T3 AND FREE T4.



*Contrary
to popular
belief*

TSH is *not* the only thyroid value that can be measured. Yes, there are more 😊. The thyroid gland produces a variety of hormones. The 2 main thyroid hormones are T4 (thyroxine) and T3 (triiodothyronine). *T3 is the most biologically active form of thyroid hormone.* I like to call the T3 hormone the “money maker” thyroid hormone because people tend to feel better when they have a sufficient amount of T3 hormone. When it comes to our body’s metabolism, this “money maker” thyroid hormone gets the job done.

T4 is the next most active form of thyroid hormone. T4 is known as a prohormone which means that T4 must convert into another hormone in order to be active in the body. T4 converts into T3. *T4 is 300% less biologically active than T3*³. So you can see the significance of measuring *both* T4 and T3.

Allow me to take it one step further. The free forms of T4 and T3 should be ordered in a blood test when a medical professional is trying to evaluate thyroid function. The free forms are active and circulating and it is these free forms of the hormones that get the job done (or produce a result) in the body.

TSH can be in a normal lab range of 0.5-5.0 $\mu\text{IU}/\text{mL}$ (which we know is not an optimal range) and a person can have low levels of Free T4 and Free T3! Imagine being told by your well-intentioned doctor that your thyroid function is normal, when your 2 main thyroid hormones could actually be low? If you are symptomatic of thyroid dysfunction and have been told your thyroid is normal but you’ve only had your TSH checked, Mistake #2 may have been made.

MISTAKE #3: DON'T ORDER REVERSE T3.

Under certain circumstances, T4 can convert into Reverse T3 (RT3) in the body. Not only do we need to look to see if you're making enough Free T3, but we also need to check to see if you're making RT3.

High amounts of RT3 will block the effects of T3, which we don't want. We never want our money-maker thyroid hormone to be blocked from doing its job. RT3 is known as a metabolic brake because high amounts of this molecule can cause someone to be hypothyroid (a low metabolic state).

RT3 is so powerful at blocking the effects of T3. RT3 was found to be 100 times more potent than PTU (Propylthiouracil)¹. PTU is a medication that is used in the treatment of overactive thyroid (hyperthyroidism). RT3 being 100 times more potent at blocking thyroid function than PTU, demonstrates the significance of measuring this value in a blood test. Someone can have optimal levels of TSH, Free T4, and Free T3 **AND** they can have high amounts of RT3.

Remember, the free hormones tell us the amount of hormone that are circulating in the blood. So you can have a high amount of circulating Free T3 and it be blocked from producing an affect in the body because you have a high amount of RT3. I have seen this in my patient population and the clients with a high amount of RT3 are very symptomatic of low thyroid function.



MISTAKE #4: DON'T CHECK FOR THYROID ANTIBODIES.

In some individuals, the cause of their thyroid dysfunction is due to an autoimmune process that is taking place against their thyroid gland. During this autoimmune process, the body is attacking the thyroid gland and is causing damage to the thyroid. An easy way to check for an autoimmune response to the thyroid gland is to test for the presence of thyroid antibodies.

Many people with Hashimoto's Thyroiditis will have an elevation of one or both of the following antibodies:

- Thyroid peroxidase antibodies (TPO antibodies)
- Thyroglobulin antibodies (TG antibodies)

Hashimoto's is an autoimmune disease in which a person's immune system recognizes the thyroid gland as a foreign invader. Once the body views the thyroid gland as foreign, the body sends antibodies to attack the thyroid. Elevated antibodies fuel tissue deterioration. No one wants their thyroid gland, which produces hormones that are critical for our health, to be deteriorating. The deterioration of your thyroid gland can cause a dramatic decline in your health.



While the word Hashimoto's may sound foreign and rare, more than 35 million Americans currently have Hashimoto's². In America, more people have Hashimoto's than cancer and heart disease (28.4 million)⁴. The number of adults who have **ever been diagnosed** with cancer in America is 21.1 million⁵. Our medical system has made cancer and heart disease out to be the "big scary health monsters" but I submit to you that there is an even bigger monster— Hashimoto's Thyroiditis.

An additional note: The CDC reports that heart disease is the number one cause of death in America⁶. Hashimoto's increases the risk for heart disease. Since we know heart disease is the number 1 killer in the United States and we know that a significant number of the population (35 million) have Hashimoto's that increases the risk for heart disease, doctors should be screening regularly for this illness. Sadly, doctors are not ordering these simple blood tests.



MISTAKE #5: DON'T TAKE THE PATIENT'S SYMPTOMS SERIOUSLY.

This mistake is what leads most of my clients to me. They go to their doctor(s) and communicate their symptoms such as weight gain or inability to lose weight, extreme fatigue, memory loss, etc. Their doctor runs a few tests and comes back and tells them that “everything is fine”. But this person, my standard client, does not feel fine so they keep searching for a solution.

Well-intentioned doctors make this Mistake #5 so often. They run the “standard tests” and if the test results are within range, then the patient is perceived as normal. However, knowing the appropriate tests to order is determined by listening to the patient’s symptoms. Furthermore, symptoms that are so common such as weight gain and fatigue are not taken as serious body cues that something is



wrong, because weight gain and fatigue are perceived to be normal in today’s society. Doesn’t everybody have extra pounds that they can’t lose and a need for caffeine to stay awake? So these critical symptoms get overlooked and the appropriate tests don’t get ordered because the patient is perceived to be “fine”. In conclusion, if you’ve been told that your thyroid is normal but any of these 5 mistakes have been made, then you will want to have a more thorough evaluation done. 1 in 5 Americans have low thyroid function but only half of them know

it. And 90-97% of people with low thyroid function have Hashimoto's Thyroiditis (an autoimmune thyroid disease)7.

The symptoms of thyroid dysfunction can be debilitating! I am here to save you from years of misdiagnosis by doctors and misinformation from experts. I am here to guide you to a path out of thyroid illness and hormonal imbalance.



If you are REALLY ready and need and want more guidance – like someone to take you through the entire journey – then my Root Cause Analysis Case Review is the first step you need to take. Click here (<https://www.bethelholisticclinic.com/get-1-on-1-help>) to schedule your consultation with me, The Thyroid Specialist.

IT'S TIME TO GET YOUR LIFE BACK!



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