Treating the Problem Thyroid
Does this sound familiar?

- Aching muscles
- Always fatigued or exhausted
- Irritable or impatient
- Cold hands and feet
- Often depressed and anxious
- Dry, coarse and lifeless hair
- Dry skin
- No libido
- Don’t eat any more but gain weight
- Insomnia
- Slow heartbeat
- Listless, forgetful, antisocial
- Losing enthusiasm for life
The Body’s Gas Pedal

Secretes hormones which control
- Energy use
- Protein synthesis
- Body temperature
- other vital functions

The thyroid gland regulates metabolism
Typical Thyroid Problems

- Hyperthyroid (overactive thyroid)
  - Grave’s disease
- Hypothyroid (underactive thyroid)
  - Hashimoto’s disease
  - Inability to convert T4 to active T3
- Goiter – swollen thyroid
  - Overstimulated thyroid gland swells (can be due to lack of iodine)
- Thyroid cancer

Extremely large goiter
How Common are Thyroid Problems?

• Very!
• Thyroid problems are 5 to 10 times more common in women than men
• A woman have a 1 in 5 chance of developing a thyroid issue at some point in their lives
What about the Adrenal Glands?

Outer gland (cortex) secretes cortisol

Inner gland (medula) secretes adrenaline

Impact: Energy production, fluid and electrolyte balance, fat storage, STRESS RESPONSE
Characteristics of Poor Adrenal Function

- Filled with fear and afraid to take risks
- Exhausted by confrontation
- Frequent upper respiratory problems
  - Catch every cold that goes around
  - Unusually exhausted after an illness
- Multiple chemical sensitivities

For more, take the Adrenal Function Quiz on TerryTalksNutrition.com
How do you know if it is an Adrenal or Thyroid Problem?

Low Adrenal
- Sleep: awake at midnight or after
- Crave salt or sugar
- Generally exhausted after exercising
- Intolerant of heat or neutral regarding hot and cold

Low Thyroid
- Sleep, and sleep a long time
- Crave carbohydrates and fat
- Feel better after exercise
- Intolerant to cold
Treat the Adrenals? Or the Thyroid?

• First treat the adrenals
  – B vitamins (p-5-p); l-tyrosine; vitamin C; DHEA; pregnenalone, Adrenal extract
  – Herbal support: licorice and rehmania
• Then treat the thyroid if required
• Why?
• If the thyroid is stimulated before adrenals are treated, increased metabolism puts additional stress on the adrenal glands!

If treat the thyroid and get good results, but then deteriorate again – treat the adrenals!
Measuring Thyroid Function

- TSH (Thyroid Stimulating Hormone) test
  - Inaccurate
  - Misses many cases of low thyroid function
  - Doesn't measure the actual levels of T4 and T3

Many people have symptoms of thyroid problems – even with “normal” TSH levels or AFTER being treated with synthetic thyroid hormones!
Basal Body Temperature

• In the morning upon wakening, without getting out of bed, place a glass thermometer in your armpit and hold arm close to body for 10 minutes
• Read temperature and record
  – since temperature rises with ovulation and stays higher until menses occurs, pre-menopausal women should only monitor their temperature during the first 7 days following the end of their period to get a true reading
• Repeat procedure each day for at least three days, preferably 10 days
• Normal = between 97.8 and 98.2 degrees Fahrenheit
• Anything consistently under 97.8 indicates thyroid dysfunction
Hyper vs. Hypothyroid

Hyperthyroid (overactive)
- Nervous
- Restless
- Weight loss
- Increased appetite
- Increased sweating
- Frequent bowel movements or diarrhea
- Pounding rapid pulse
- Skin blushing

Grave’s Disease

Hypothyroid (underactive)
- Aching muscles
- Fatigue
- Irritable/Impatient
- Cold hands and feet
- Dry, dull hair and skin
- Loss of libido
- Gain weight easily
- Insomnia
- Slow heartbeat
- Listless, forgetful, antisocial

Hashimoto’s Disease
Cure the Thyroid with Iodine

Iodine
+ L-tyrosine

Thyroid Hormones
Why Do We Need Iodine?

• Hormone production (particularly thyroid hormones)
• Immune system function
• Other properties:
  – Antibacterial
  – Anti-cancer
  – Anti-parasitic

Thyroid and Breast tissue have particularly high requirements for Iodine
Iodine deficiency linked to...

- Cancer
- Obesity
- Heart disease
- Fibromyalgia
- ADHD
- Other mental health-related disorders
- Possible links to Alzheimer's and Parkinson's disease, and multiple sclerosis
The Toxic Halogens

• Very similar in structure to iodine
  – Bind to iodine receptors in the cells – lower iodine levels

• Bromide: baked goods, certain medications, fumigant in agriculture

• Fluoride: drinking water

• Chloride: disinfected water, Sucralose (chlorinated table sugar)
  – Perchlorate (rocket fuel): contaminated ground water, leather tanning, fireworks, has been detected in dairy and human milk
Detoxification of the Toxic Halogens

• Minimize exposure
  – Organic foods
  – Pure water (non-fluoridated)

• Increase iodine intake so toxic halogens can be released

One study found that breast cancer patients had double the bromide levels compared to non-cancer patients
Iodophobia

• Fear of Iodine as a medicine
• Prior to World War II, physicians regularly used dosages up to 37 mg daily
• Between 1960 and 1980, one slice of bread contained the current RDA of 0.15 mg
• After WWII, iodine became ignored when thyroid hormone replacements were developed
• Physicians developed fear of iodine
  – Iodine in bread is replaced with bromide
  – Radioactive iodine used as a medical treatment – all forms of iodine (natural and radioactive) seen as dangerous
What is “High Dose” Iodine?

• RDA is 150 micrograms (0.15 mg) daily
  – Enough to prevent goiter but not sufficient to improve health

• Iodine experts recommend 6.25 to 12.5 mg of iodine daily for basic support; 30 mg daily when addressing specific thyroid disorders

Daily dietary iodine intake in Japan is at least 25 times higher than in the United States!
How to Use Iodine for Thyroid Problems

• Thyroid problems
  – Potassium iodide: 30 mg daily, plus L-tyrosine

• Why?
  – Potassium iodide is the form preferred by the thyroid gland
  – L-tyrosine is the other nutrient required for thyroid hormone formation
  – IODINE + L-TYROSINE = THYROID HORMONES

• If need additional support, add in co-factors for iodine absorption
  – Niacin, magnesium, riboflavin, manganese, selenium
Dessicated Thyroid

• Natural thyroid extract – preferred by naturopathic physicians over synthetic T4 hormones (Synthroid)
  – Contains both T4 and T3
  – Required a physician’s prescription

• Have been some concerns about availability but Armour® is currently available
  – Armour Thyroid information line for availability: 1-866-927-3260

Coalition for Better Thyroid Care (find them on Facebook) is a group which supports patient access to natural dessicated thyroid
Caring for the Thyroid Gland

• Therapeutic levels of both iodine and L-tyrosine
  – Add co-factors for iodine absorption if needed: niacin, magnesium, riboflavin, manganese, selenium
• Natural dessicated thyroid extract if prescribed by your physician
• Avoid dairy and gluten products
• Have patience
  – to fully restore the thyroid gland and its metabolic function may take 3-6 months for many people