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Treatment Plan

For: Mackenzy Burnett Date: 04/04/2024

Current issues/symptoms:

- 5 weeks pregnant; seeking naturopathic and nutritional guidance and support
- Long-standing digestive/bowel issues: upper and lower digestive discomfort, bloating, sluggish bowel movements (~4 x week) with mucus, food sensitivities (gluten and dairy?)
- Chronic acne issues
- PCOS diagnosis (~2021) with associated symptoms and continued metabolic effects
- History of low-normal levels of B12, iron and vitamin D levels in past

Summary of key issues suspected or identified: (at this stage)

Previous blood results (2022) show:

- Incomplete testing for PCOS
- Low normal ferritin (iron stores) levels but no CRP tested to rule out any inflammatory influence (false positive) on this ferritin level
- Low-normal B12 level (316)
- Low-normal Active B12
- Low folate (13.9)
- Low Vitamin D (75)
- Thyroid function: only TSH tested. No T4, T3 or thyroid antibodies ever tested
- Comprehensive, current blood tests required (see over)
- Influence of work roster: on circadian rhythm (which influences hormones), food choices + digestion function?
- Constipation, mucus with stool, bloating, food sensitivities: query suboptimal digestive processes, imbalances in gut microbiome, some inflammation within digestive tract and malabsorption issues?

Having optimal bowel clearance (1-3x daily) is essential for detoxification, skin health, hormone health, immune system regulation and overall wellbeing.

- More diet/food focus to come

Next steps:

As discussed, the first step is to do some up-to-date and thorough blood tests to assess your <u>nutritional</u> and <u>metabolic</u> state of health for pregnancy, and rule in/rule out potential key drivers behind your symptoms.

Once we have these, we can streamline your treatment plan specifically for you.

I would normally test some hormone panels in your situation but they won't be relevant given you're pregnant.

1. BLOOD TESTS

- Full thyroid panel: TSH, T4, T3, Reverse T3, Thyroid antibodies
- Iron studies
- CRP
- Vitamin B12 + Active B12
- Folate
- Vitamin D
- Serum Zinc
- Fasting insulin, fasting blood glucose, HBA1C

As mentioned, you may get some resistance in getting all of these requested (particular the <u>full</u> thyroid panel) but what they don't request, I can instead. This will be an out of pocket expense, ie. not covered by Medicare as I'm a private provider.

Other basic tests like Full Blood Count, Liver & Kidney Function, Lipid Studies (hopefully) are likely to be ordered, which are all useful too.

Keywords to mention to GP to help get these tests requested:

"Had low B12, Iron & Vitamin D in past - want to know whether I need to supplement again and want to get nutrition on track ASAP whilst pregnant.

Personal and family history of PCOS (and type 2 diabetes) so I'm concerned for my blood sugar/insulin control especially now I'm pregnant, due to increased risk of pregnancy complications (like gestational diabetes).

Never had my full thyroid panel tested with <u>all markers</u>, and know their is a link with PCOS and thyroid issues, and more relevant now that I'm pregnant."

Once you have the pathology request form - please do not have the blood test.

Instead, upload your request form to your My Appointments account for me (or email) so I can cross check and request those tests that have been left off. I'll email this request form to you, along with instructions and my Blood

Test Rules. I'll be able to view all the blood results results (those requested by GP and myself) so once they're all through usually in 1-2 weeks.

Next time

Once all your test results are through, I'll be in touch to let you know. We'll then have our First Follow-Up Consultation to go through the results. We'll cover what they all mean, how they're contributing to what's happening for you and how you're feeling, and most importantly what we can do about them.

I'll then create your customised Treatment Plan for your specific needs.

If you have any questions, please let me know.