



CARLY PIZZUTO
07-Jul-2003 **Female**

P: 1300 688 522
E: info@nutripath.com.au

36 LOMANDRA DRIVE
CANNING VALE WA 6155

-.KIRSTY LAKSTINS-ADAMS
KIRSTY LAKSTINS-ADAMS
28 GEOGRAPHE WAY
THORNLIE WA 6108

LAB ID : 3889461
UR NO. : 6188291
Collection Date : 07-May-2023
Received Date: 10-May-2023



3889461

ENDOCRINOLOGY SALIVA

SALIVA	Result	Range	Units	
Cortisol Morning	39.10	12.00 - 48.00	nmol/L	
Progesterone (P4)	505.4	276.0 - 1725.0	pmol/L	
Testosterone.	110.4	60.0 - 191.0	pmol/L	
Salivary Estrogens				
Estradiol (E2)	8.7	3.7 - 18.0	pmol/L	
Estrone (E1)	8.0 *L	9.5 - 71.0	pmol/L	
Estriol (E3)	22.7	7.7 - 49.0	pmol/L	
E3/[E2+E1]	1.36	> 1.00	RATIO	
P4/E2 Ratio (Saliva)	58.1	4.0 - 108.0	RATIO	

(*) Result outside normal reference range

(L) Result is below lower limit of reference range



3889461

Saliva Hormone Comments

** PLEASE NOTE NEW REFERENCE RANGES AS OF 20.08.2021 **

TABLE 1: SALIVARY HORMONE REFERENCE RANGES: (NOT ON HRT - BASELINE)

FEMALE	Progesterone	DHEAS	E2	E1	E3
Pre/menarcheal	90-390		3.1-13	9.5-71	7.7-49
Follicular	90-480		3.1-17	9.5-71	7.7-49
Mid-Cycle	85-590		5.0-22	9.5-71	7.7-49
Luteal	276-1725		3.7-18	9.5-71	7.7-49
Post Menop.	80-820	1.8-18.5	3.7-16	9.0-65	9.0-62
Premenopausal, No OC's		2.5-27.0			
Premenopausal, with OC's		2.0-8.0			
MALE	<230	5.0-32.0	2.7-11	7.7-50	6.6-38

TABLE 2: TARGET REFERENCE RANGES: (ON HRT - 24 to 48 hr post last dose)

	Progesterone	Testosterone	E2	E1	E3
Oral	320-1998		7-73		69-139
Patch	-		4-18	-	-
Cream/Gel	3180-15000	F: 277-867 M: 347-1734	37-184	-	1040-1734

SALIVA ESTRONE (E1) is produced primarily from androstenedione originating from the gonads or the adrenal cortex. In premenopausal women, more than 50% of the E1 is secreted by the ovaries. In prepubertal children, men and non-supplemented postmenopausal women, the major portion of E1 is derived from peripheral tissue conversion of androstenedione. Interconversion of E1 and E2 also occurs in peripheral tissue. Bioassay data indicate that the estrogenic action is much less than E2. E1 is a primary estrogenic component of several pharmaceutical preparations, including those containing conjugated and esterified estrogens. In premenopausal women E1 levels generally parallel those of E2. After menopause E1 levels increase, possibly due to increased conversion of androstenedione to E1.

LOW ESTRONE (E1) LEVEL:

Saliva E1 level is below reference range. E1 result should be interpreted relative to the total estrogens. A low E1 is preferable.

SALIVA E2 levels for a non-menopausal female should be assessed relative to the day of cycle that the specimen was collected.

SALIVA E2 level is adequate and within range.

Saliva E3 level is within range and adequate.

The Estrogen Quotient is within range. Suggestive of a normal estrogen metabolism.

(*) Result outside normal reference range

(L) Result is below lower limit of reference range



P: 1300 688 522
E: info@nutripath.com.au

-.KIRSTY LAKSTINS-ADAMS
KIRSTY LAKSTINS-ADAMS
28 GEOGRAPHE WAY
THORNLIE WA 6108

CARLY PIZZUTO
07-Jul-2003 **Female**

36 LOMANDRA DRIVE
CANNING VALE WA 6155

LAB ID : 3889461
UR NO. : 6188291
Collection Date : 07-May-2023
Received Date: 10-May-2023



3889461

SALIVA The Progesterone level is within range and suggestive of luteal phase. Aim for a ratio of E2:Prog of 1:200 (200 parts Progesterone to 1 part Estradiol) during this phase of cycle.

MORNING SALIVA LEVEL WITHIN RANGE:

Saliva morning cortisol level is adequate and within range.

SALIVA FREE TESTOSTERONE level is within range and adequate.