

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

-.KAITLYN TOMLINSON OMNE WELLNESS 1/34 MURWILLUMBAH STREET MURWILLUMBAH NSW 2484

# ASHA CLARKE 01-Jul-1978 Female

20 CRINUM CRESCENT SOUTHPORT QLD 4215

LAB ID : 3902967 UR NO. : 6201648 Collection Date : 04-Jul-2023 Received Date: 05-Jul-2023



3902967

ENDOCRINOLOGY SALIVA							
SALIVA	Result	Range	Units				
Female Hormone Profile-Extensive							
Progesterone (P4)	<i>154.0</i> *L	276.0 - 1725.0	pmol/L				
DHEAS.	14.9	2.5 - 27.0	nmol/L				
Androstenedione	0.68	0.50 - 3.40	nmol/L				
Testosterone.	93.3	46.0 - 173.0	pmol/L				
Estradiol (E2)	4.7	3.7 - 18.0	pmol/L	•			
Estrone (E1)	10.1	9.5 - 71.0	pmol/L				
Estriol (E3)	15.1	7.7 - 49.0	pmol/L				
E3/[E2+E1]	1.02	> 1.00	RATIO	•			
P4/E2 Ratio (Saliva)	32.7	4.0 - 108.0	RATIO				
Androstenedione/E1 Ratio	0.07	0.04 - 1.10	RATIO	•			



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#### **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   Follicular   Mid-Cycle	90-390   90-480   85-590	1		  -  -	3.1-13 3.1-17 5.0-22	   	9.5-71 9.5-71 9.5-71	     	7.7-49 7.7-49 7.7-49
Luteal   Post Menop.   Premenopausal,   Premenopausal,		i	1.8-18.5 2.5-27.0 2.0-8.0	     	3.7-18 3.7-16	•	9.5-71 9.0-65	     	7.7-49 9.0-62
   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	e   Testosterone	E2	 	E1	 	E3
Oral	320-1998		7-7:	3		1	69-139
Patch	-		4-1	8	_	- 1	-
Cream/Gel	3180-15000	F: 277-867	37-1	84	-	1	L040-1734
	1	M: 347-1734	- 1	1		- 1	

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.

SALIVA E1 is within range.

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

### LOW NORMAL E2 LEVEL:

Saliva E2 level is low normal and suggestive of the need for supplementation with 0.5 mg of E2 or 1 mg Biest.

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

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SALIVA The Progesterone level is within range, IF the specimen was collected through the follicular phase; otherwise it is low. Aim for a ratio of E2:Prog of 1:50 - 1:80 (50 to 80 parts Progesterone to 1 part estradiol) during this phase (Luteal) of the cycle.

If confirmed that the specimen was collected during the Luteal phase, then the level is relatively low, suggest 200 mg Oral Progesterone supplementation at nights or 2% transdermal cream 1g daily.

SALIVA DHEAs level is adequate and within range.

#### ANDROSTENEDIONE COMMENT:

Androstenedione is secreted by the adrenal cortex, testis and ovary and is a synthesised precursor of testosterone and oestradiol. It is a weak androgen, with anabolic activity about 10-20~% that of testosterone.

SALIVA FREE TESTOSTERONE level is within range and adequate.

Tests ordered: 1006P,GOG247

(\*) Result outside normal reference range