



Leticia Bannister

Your test results Well Woman Check

Summary

Congratulations on taking the Well Woman Check which puts you in control of your health data!



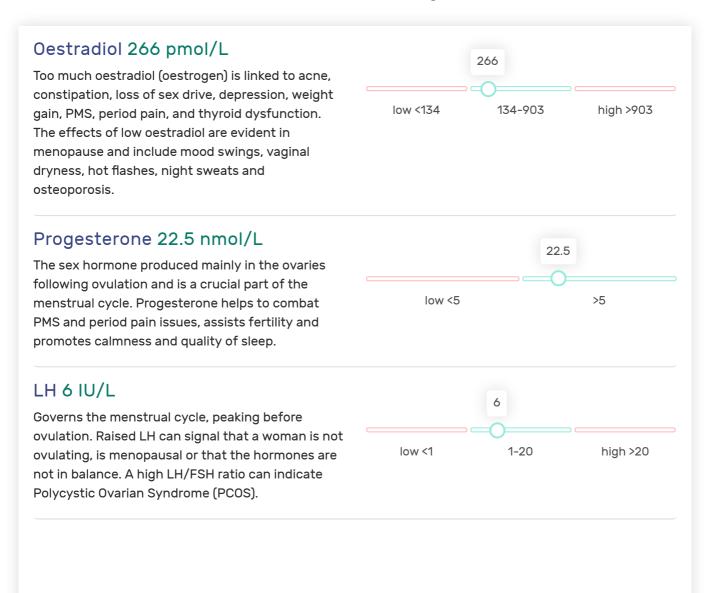
Collection Date: 25 Jul 2021

Female Hormone Panel

For the purposes of interpreting this test result, it is assumed that your sample was collected between 6 to 8 days after you ovulate (about day 21 of a 28 day cycle, or 17 of a 24 day cycle), and that you are not taking the contraceptive pill.

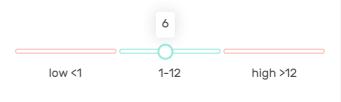
Progesterone levels typically rise following ovulation, peaking five to nine days later. If your progesterone level is elevated within a certain range during the luteal phase of your cycle (typically greater than 30 nmol/L), it means you are ovulating. If your progesterone level is not elevated – as in your situation – it can mean that you are not ovulating, or this may be just a timing issue where you have ovulated slightly earlier or later than expected.

Obesity, insulin resistance, high levels of stress, poor diet and lack of exercise can all contribute to low progesterone levels.



FSH 6 IU/L

Stimulates the ovary to mature an egg. High levels indicate poor ovarian reserves which means the quality and quantity of eggs may be low. This doesn't necessarily mean that pregnancy is impossible, but it may be more difficult to achieve.



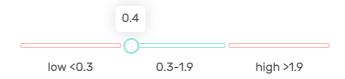
LH to FSH Ratio 1

Normally this ratio is about 1:1 meaning FSH and LH levels in the blood are similar. In women with polycystic ovaries the LH to FSH ratio is often higher e.g. 2:1 or even 3:1



Testosterone 0.4 nmol/L

High levels commonly seen in polycystic ovarian syndrome (PCOS) which can lead to difficulties in conceiving. Symptoms can include irregular periods, loss of hair from the head, excess facial and body hair, unexplained weight gain and acne.



Free Testosterone 7 pmol/L

Most testosterone is strongly bound to sex hormone binding globulin (SHBG). This test measures the proportion of unbound testosterone which is available to the body's tissues.



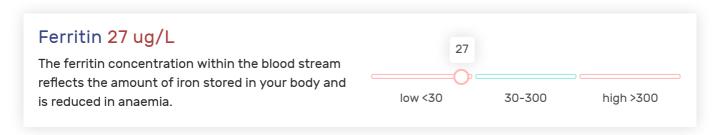
SHBG 37 nmol/L

Sex Hormone Binding Globulin (SHBG) is a protein that binds tightly to testosterone and oestradiol. Changes in SHBG levels can affect the amount of hormone that is available to be used by the body's tissues.



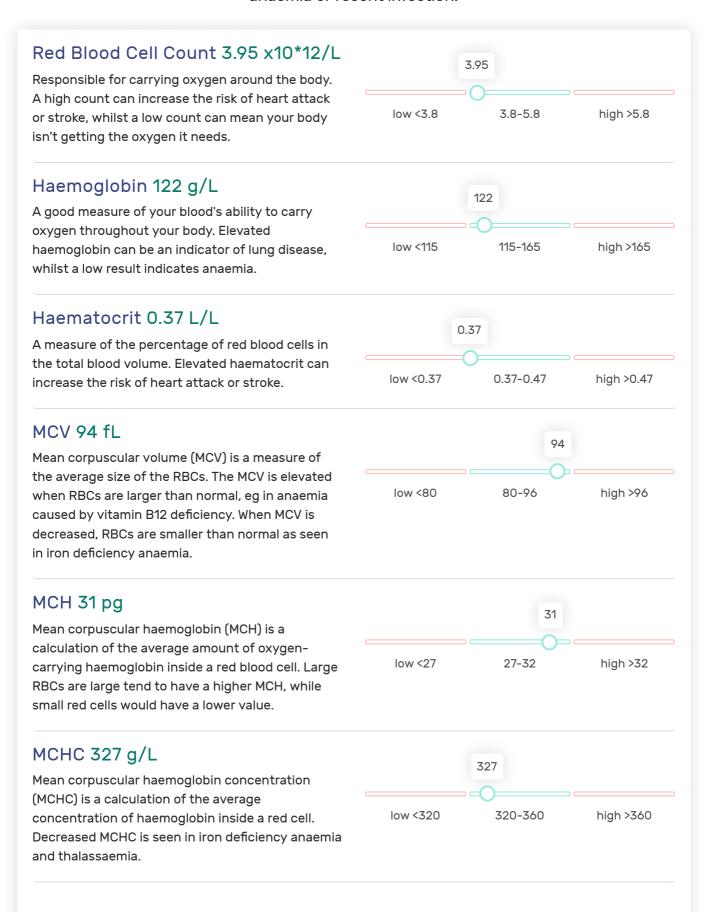
Iron Stores

Your ferritin levels are below the normal range, which may indicate iron deficiency. During reproductive years iron deficiency in women is usually due to heavy menstrual losses, though other possible causes may warrant consideration. I would recommend following up on this result with your GP.



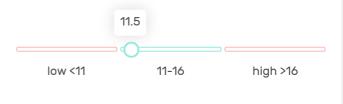
Full blood count with differential

Your blood counts are all within the normal range and don't indicate anaemia or recent infection.



RDW 11.5 %

Red cell distribution width (RDW) is a calculation of the variation in the size of your RBCs. In some anaemias, such as pernicious anaemia (due to vitamin B12 deficiency), the amount of variation in RBC size causes an increase in the RDW.



White Blood Cell Count 6.0 x10*9/L

Responsible for fighting infection. A high count can indicate recent infection and even stress, whilst a low count can result from vitamin deficiencies, liver disease and immune diseases.



Basophils 0.0 x10*9/L

Basophils are a type of white blood cell. Basophils can increase in cases of leukaemia, long-standing inflammation and hypersensitivity to food.



Eosinophils 0.1 x10*9/L

A type of white blood cell. Can increase in response to allergic disorders, inflammation of the skin and parasitic infections. They can also occur in response to some infections or to various bone marrow malignancies.



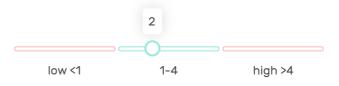
Monocytes 0.4 x10*9/L

A type of white blood cell. Can increase in response to infection as well as inflammatory disorders, and occasionally with some types of leukaemias. Decreased monocyte levels can indicate bone marrow injury or failure and some forms of leukaemia.



Lymphocytes 2.0 x10*9/L

A type of white blood cell. Can increase with bacterial or viral infection, leukaemia, lymphoma, radiation therapy or acute illness. Decreased lymphocyte levels are common in later life but can also indicate steroid medication, stress, lupus and HIV infection.



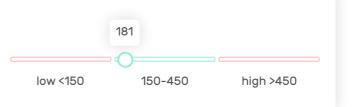
Neutrophils 3.5 x10*9/L

A type of white blood cell. Can increase in response to bacterial infection, inflammatory disease, steroid medication, or more rarely leukaemia. Decreased neutrophil levels may be the result of severe infection or other conditions.



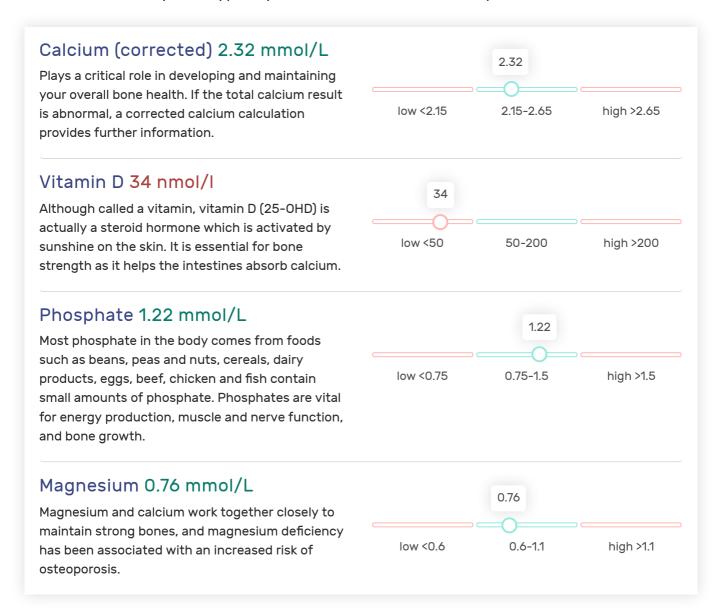
Platelet Count 181 x10*9/L

Responsible for blood clotting and healing. A high count can indicate a risk of thrombosis, whilst a low count can lead to easy bruising.



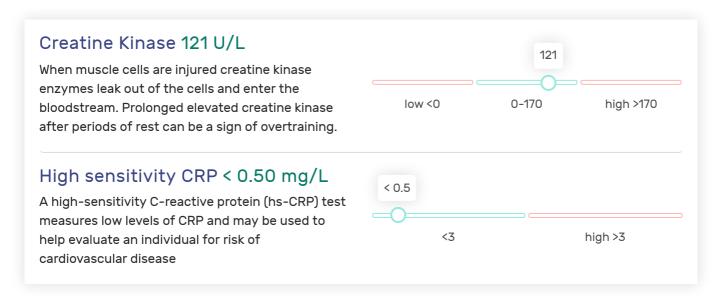
Bone Health

Your vitamin D levels are below normal range which may indicate a deficiency - we typically like to see vitamin D levels up above 75 nmol/L.



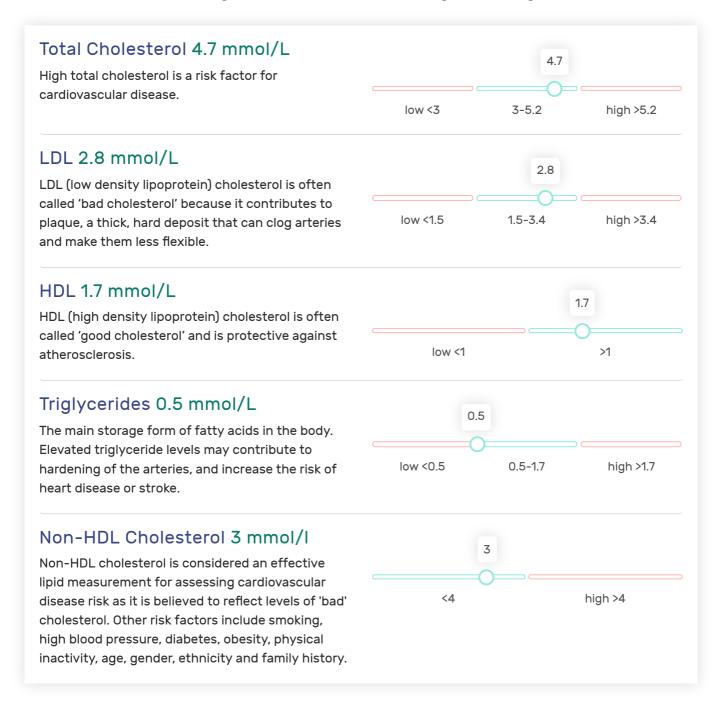
Inflammation

Your CRP and creatine kinase levels are within normal range - these are indicators of inflammation and muscle breakdown respectively.



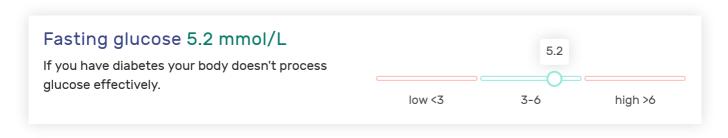
Cholesterol

Your lipid profile is within the normal range. Your LDL "bad" and non-HDL cholesterol levels are within the normal range, whilst your HDL "protective" cholesterol and triglyceride levels are also normal. This typically indicates you are at relatively low risk of developing cardiovascular disease (assuming you are not already in the high risk category).



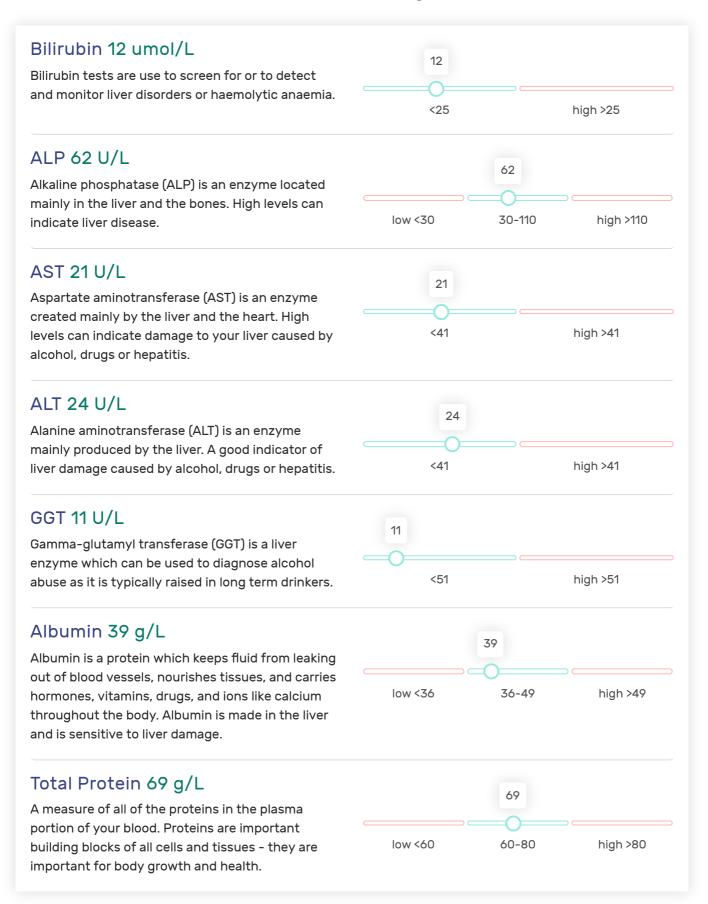
Blood Glucose

Your fasting glucose is within the normal range and doesn't indicate increased risk of diabetes.



Liver Function (LFTs)

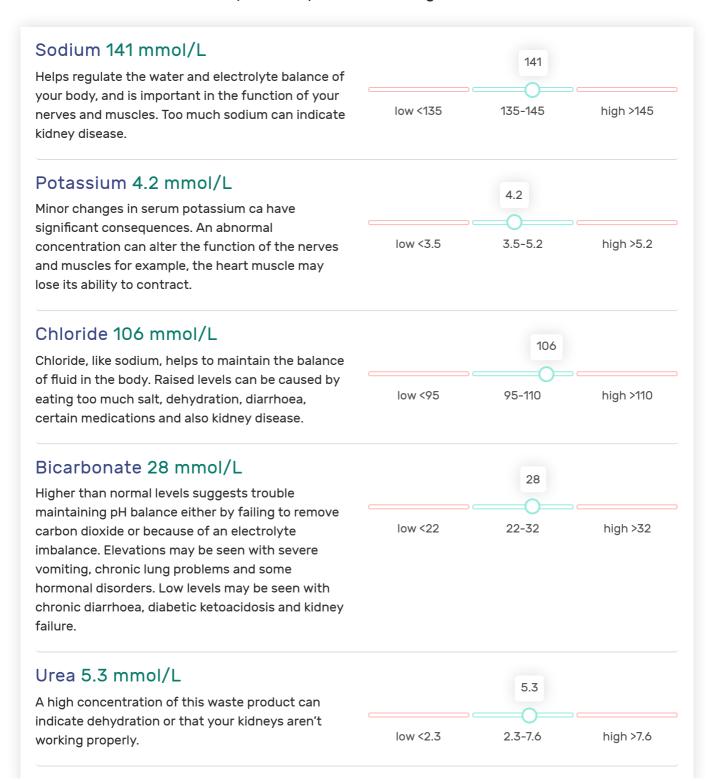
Your liver function results are within normal range which is a good indication that your liver is working as it should be.



Kidney Function

Your kidney function tests are all within normal range and don't show signs of kidney disease.

*Note that testing for kidney disease usually also involves a urine sample - refer to our Kidney Check https://www.i-screen.com.au/tests/kidney-function-test for more information. If you have specific concerns it is recommended that you check in with your GP for a discussion and potentially further investigation.



kidney function.

Recommendations

Take your blood pressure



Blood pressure is an important cardiovascular disease risk factor, and I recommend taking your blood pressure regularly. High blood pressure puts extra strain on your arteries and heart which over time can cause the arteries to become thicker and less flexible (making them more likely to become clogged up), or to become weaker. This can lead to a heart attack, a stroke, kidney disease or dementia.

Optimise your iron



Your ferritin levels may indicate an iron deficiency. Some signs that your body is low in iron include feelings of weakness, tiredness and dizziness. Iron deficiency can result in a drop in haemoglobin levels (the protein in your blood that carries oxygen). Consider increasing the amount of iron rich food in your diet. Iron-rich food sources include meats, eggs, green leafy vegetables, (such as spinach, collard greens and kale), wheat germ, whole grain breads, cereals and raisins. I would recommend following up on this result with your GP in the first instance.

Optimise your vitamin D levels



You may benefit from vitamin D supplementation and increasing your exposure to the sun to approx. 10 minutes per day in the mornings. Calcium and vitamin D deficiencies can result in accelerated bone loss and increased risk of osteoporosis. You may also be interested in our blog on seasonal affective disorder, and the link to vitamin D deficiency.

Check in with your GP



As always, please visit your GP to discuss your results. Laboratory investigations are an important aspect of healthcare, however they must be viewed in the wider context of your medical history, current health and concerns, physical examination findings and other investigations. These results do not replace the need for face to face medical consultation or regular visits to your local GP. Please contact us if you would like a copy of your lab report.