

Case Histories

Case History – 5 Stone Weight Loss in 366 Days

Gender, Age, Occupation, Nationality, height and weight.	Mrs. N.P. is 52 years old & has been very overweight for 50 years. She was 17 st 10 lbs (248 lbs, 110.2 kg) and 5 ft 6 tall (169 cm) when we met a year ago.
Presenting Complaint & History	Mrs N.P. presented with two major complaints, excess weight and fatigue.
Any Investigations	<p>Over the years, doctors had tested Mrs. N.P.'s thyroid by assessing her TSH and total T4 levels but no out of the range results were recorded, so she was told 'nothing was wrong' with her thyroid. T3 and the free fraction of thyroid hormones, antibodies and reverse T3 had not been tested. No other investigations were made by her GP, with the assumption that the cause of the excess weight must be excessive caloric intake (i.e she was eating too much food).</p> <p>In 2008, a nutritionist recommended an Adrenal Stress Profile Test which showed a low cortisol of 16 in the range of 21-41, but the recommendations to support her adrenals had not changed her weight or energy. This level of cortisol also did not explain a 50 year history of obesity.</p> <p>Mrs. N.P.s existing diet consisted of about 800 kcals a day, comprising protein foods and non-starchy vegetables.</p>
Strategy	<p>Given the frequent lack of association with thyroid test results and a patient's need for thyroid support found in clinical practice, combined with the evident slow metabolism and family history of obesity, it was recommended that Mrs. N.P. follow a short experiment of supporting her thyroid hormone output and metabolism for one month to identify its impact on her weight and energy as opposed to re-doing thyroid tests. Should there be no change then we would commence a series of lab tests to identify specific imbalances, including comprehensive thyroid screening.</p> <p>The recommendations consisted of an INCREASE in carbohydrate calories because the thyroid hormone conversion from T4 to T3 is an energetic process and too low an intake of carbohydrates can slow this process. This means that the daily intake for the 30 day trial would be 1,200 kcals, with 400 additional calories of carbohydrates being added to her existing diet.</p> <p>In spite of her weight, Mrs. N.P. was exercising 4-5 X a week, cycling or cross-training. It was recommended she drastically reduce the CV work and concentrate on muscle toning exercise instead, still 4-5 X a week, but for 20 mins at a time. This is because the CV exercise could be 'taxing her adrenals' and diminishing whatever energy she did have, resulting in a catabolic effect on her lean muscle mass.</p>
Diet & Supplements:	<ul style="list-style-type: none">• Increased CHO intake• Biotics Research - GTA Forte II (thyroid glandular)- 1 at breakfast & lunch

<p>name and dose</p>	<ul style="list-style-type: none"> • Biotics Research - Liquid Iodine Forte - 5 drops on tongue, twice daily • Allergy Research - L-Tyrosine - 2 at 11 am, 2 at 3 pm. • Biotics Research - Cytozyme AD (adrenal glandular) - 2 at breakfast, 1 at lunch <ul style="list-style-type: none"> • After 30 days, the GTA Forte II was replaced with: • Biotics Research – Thyrostim – 2 at breakfast, 1 at lunch
<p>Duration</p>	<p>This patient’s initial trial was 30 days to determine if specific thyroid support could make a difference to her weight and energy. If successful, the programme was to be continued, with minor variations as needed.</p> <p>The programme was very successful and with about 10 follow up visits, Mrs N.P. has followed the recommendations for over one year.</p>
<p>Outcome</p>	<p>In the first 30 days, Mrs. N.P. lost 15 lbs of weight, by taking the thyroid support supplement programme, eating 400 more calories per day and by reducing her CV exercise and increasing her muscle toning exercise. Her energy was also markedly improved.</p> <p>It was agreed that there was no immediate need to conduct tests, and she continued with her programme with a single supplement change (Thyrostim replaced GTA Forte II – often with hormonal imbalances I have noted a benefit from a rotation of glandular-type supplements).</p> <p>After 7 weeks on the programme Mrs N.P. had lost 26 lbs.</p> <p>With a rotation of the thyroid (GTA Forte II & Thyrostim) and adrenal glandulars (Adrenal Cortex by Allergy Research as well as Cytozyme AD and Adrenal Rebuilder by Dr Wilson) Mrs. N.P. continued to lose weight over the 12 months from her first appointment.</p> <p>Whilst she plateaued for 2 of the 12 months, Mrs., N.P. reported a 5 stone weight loss after 366 days, weighing 12 st 10 lbs.</p>
<p>Comments</p>	<p>This is a case of missed diagnosis. It is frustrating that someone so heavy as Mrs N.P. could slip through the assessment process including no test for insulin resistance. Rather, it was assumed she was over-eating, and it was not believed that she could be eating so little and still be so overweight.</p> <p>Mrs N.P., in hindsight, had an underactive thyroid hormone for most of her life. She has never over-eaten, and for many years actually under-ate. Nutritional therapists cannot make any diagnoses, but we can provide functional medicine assessments and provide therapeutic nutritional recommendations.</p> <p>The use of very effective nutritional supplements also makes the task of improving patients’ health a more straightforward one.</p> <p>Whilst there are no lab tests to confirm Mrs N.P.’s under-active level, the loss of 5 stone with an increased intake of food, and improved energy leaves little doubt about the nature of the imbalance that she has lived with for half a century.</p> <p>Mrs. N.P. is taking time to adjust to her new weight and metabolism. She cannot conceive of being 11 ½ stone but I am confident that in the coming months she will</p>

achieve this milestone.

There maybe many other overweight women, in particular, who are struggling to lose weight who have a sub-clinical hypothyroid state and simply do not know how to manage it effectively.

Practitioner

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