Finding Optimal Dose of Ovarian Hormones by Working with Symptoms of Deficiency and Excess

Estrogens

Warm rushes Hot flashes Night sweats Temperature Swings
Mental fogginess and forgetfulness Headaches and migraines
Dry vagina, eyes & skin with loss of glow Pain on intercourse
Sleep Disturbance Racing mind at night Fatigue and reduced stamina
Diminished sense of sensuality & sexuality Sense of intestinal bloating
Weight gain, especially thighs, hips and buttocks Back and joint pain
Episodes of rapid heartbeat and palpitations Sense of intestinal bloating
Sense of normalcy only during second week of cycle

Breast tenderness, especially nipple area Increase in breast size Water retention, swollen fingers & legs Impatient but clear of mind Pelvic cramps, with or without bleeding General & significant malaise Caution when using estrogens. It is possible to be taking a overdose and not realize it. When in any doubt, consult with your medical practitioner.

Progesterone

Direct symptoms of progesterone deficency
Sleep problems Water retention Decreased Libido
Emotional mood problems, sometimes severe
Period irregularities if you are still menstruating

Symptoms of estrogen dominance resulting from progesteronedeficency

PMS Fibroids Endometriosis
Breast tenderness and pain Breast lumps, cysts & more

Drowsiness Depressed feeling Slight dizziness
Waking up groggy or edgy Sense of physical instability
Feeling of being drunk or spinning Heaviness of the extremities
Increased water retention Decreased Libido

Improved sleep Reduced breast tenderness
Feeling more relaxed, in better mood
Decreased water retention Increased Libido
A more regular period if you are still menstruating

Antsy, anxious, can't sleep & water retention (cortisol & deoxycorticosterone are related to cause) Hot flashes, or depression (overload of estrogen receptors)

Increased appetite + weight gain (unclear cause possible increased incidence of Candida Albicans)

Testosterone

Diminished libido Loss of sense of security
Diminished energy and stamina Hair loss of body hair
Flabbiness & Muscular weakness esp upper arms, cheeks

Hyper aggressiveness Pimples, Acne Excessive oiliness of skin Hair growth in unwanted places e.g. face, and where hormone is applied

Hormone Application

if using oils, shake bottle vigorously. If using 'pour bottle,' tilt after shaking and drops will come out. If using dropper, after shaking, squeeze out 'old' oil from dropper and squeeze in 'new'

Estrogens & Progesterone

Apply estrogen before bedtime and in the morning: do not try to consolidate total dosage of estrogen into one application per day Some women will need to apply estrogen in the late afternoon or evening as they find estrogen stimulating and interfering with falling asleep when applied too late in the evening.

One application of progesterone at sleeptime may be all that is needed. However some women will want or need an additional application of progesterone in the morning.

In the beginning of treatment when symptom alleviation is paramount the areas of the soft inner forearms and arms, and inner thighs can facilitate more rapid absorption. Take care to not rub arms against bare breasts when choosing upper arms. Other areas to apply these 2 hormones include outer forearms, arms, buttocks & thighs. Avoid the area of buttocks & thighs that touches the toilet seat if you share that toilet seat. Rub the hormones into the skin as thoroughly and over as large an area as possible.

Rotate application sites: rotate, rotate, rotate!

There are some women that benefit from vaginal application: this is of a non-carbopol preparation applied to the labia. Exceptions:

Do not apply estrogens to the front of your torso

(neck to pubic area, and between your shoulders)

Do not rub all of your dose into the chosen area: save a little residue on your hands for application every time to your face, neck & back of hands for the daily benefit to these areas of sensitive skin, then return to the area of application to rub the hormone vigorously into your skin.

As you feel better, you may occasionally want to do a total body application, starting from soles of feet and moving up, day by day...though again, no estrogen to front of torso: these hormones can be very good for the skin.

Testosterone & DHEA

Apply testosterone one time per day usually in the morning, though an optional time can be 1/2 hour before intercourse applied to clitoris (may enhance orgasm) Apply to the area of the pubic hair, around the vagina, and the perineum (the space between vagina and anus) caution: give it time to absorb into these regions...or your partner could absorb extra hormone. Avoid applying testosterone to face, front of torso, or any area that you would not care to see hair grow.

Testosterone is also available in a non-hydroalcoholic skin gel, preferred if the

Testosterone is also available in a non-hydroalcoholic skin gel, preferred if the hydroalcoholic gel stings in this region. Estriol &/or testosterone vaginal gels are available if indicated [available in the non-hydroalcoholic gel] and both can be excellent in assisting return of vaginal health

Excess Deficiency

Deficiency

Deficiency

Excess

Adequate