

Treatment Plan

For: Suzie Short

Date: 16/11/23

Current issues/symptoms:

"Lethargic, mood fluctuations, sometimes quite severe ovulation pain, recurrent mild thrush."

What you hope to achieve by working with me:

"More of a proactive checkup than anything else! Would like an increase in energy but also acknowledge that lack of energy has a lot to do with a few life/work factors. Concerned about going into perimenopause and want to make sure I set myself and my body up for that next phase of life as best as possible."

Summary of key issues suspected or identified (at this stage):

Low energy	5/10
Low mood	5/10
Moderate/high stress	7/10
Libido	4/10

- History of, and query low iron and B12 - to test
- Query Vitamin D level - required for healthy thyroid, mental health/mood/cognition
- Query thyroid function, contributing to various symptoms (?) - to test
- Signs/symptoms of fourchette tears/fissures, and vaginal thrush - see Testing
- Query some degree of nervous system dysregulation (low mood/high stress/work/life factors) and previous burnout period also may contributing to symptoms?
- Query total energy/macros input for your energy output demands (esp on heavy training days). This may also be effecting energy levels/mood
- Query 18:6 fasting is adding a stress to your body, at this time?
- Query adequate amounts of healthy fats/omegas through daily diet (essential for tissue integrity/skin health)
- Query oestrogen levels? As contributor to vulvovaginal symptoms

See your GP (perhaps book a longer appointment)

1. Initial blood testing*

- iron studies with CRP, vit B12, active vit B12, folate, vit D, serum zinc
- complete thyroid function (TSH, T4, T3, Reverse T3, Thyroid Antibodies)
- morning cortisol
- hormones

***Keywords to mention:** tired all the time, history of low iron & B12, work indoors (not a lot of sun), painful ovulation, vulva/vaginal irritation (mentioned here so you can also get your hormones tested, as these symptoms may be linked to low oestrogen (?))

Do not have the blood test. Instead, upload your Pathology referral form to your My Appointments account and I can request those that have been left off. This is likely to be the majority of the thyroid markers and maybe 1-2 others? This often depends on your doctor.

2. Review/swabs/referral

Try and see GP when you're symptomatic with forchette tears/irritation and vaginal thrush. Ask about potential early stage Lichen sclerosis (LS)? They should be able to identify this through visual markers/colour/labial changes. Not always 100% though, particularly if you present as atypical. You may be offered a skin biopsy? LS can masquerade as (and be misdiagnosed as) Candida because of the irritation and inflammation. Biopsy will identify Candida, inflammation and differentiate LS from Lichen planus, and Lichen simplex. If LS, the treatment* is usually a steroid cream.

Ensure GP also does swab for your recurrent/chronic 'vulvovaginal candidiasis symptoms'. This will be a basic culture test and PCR (usually just for Candida albicans) but can help rule in or out as a contributor to LS (if LS is suspected). And may as well get it done while you're there.

Ask for pelvic ultrasound for your painful ovulations and history of ovarian cyst.

* There's much more that can be done to support tissue integrity here (can also be linked to thyroid, hormones, nutrient deficiencies/insufficiencies). More on this to come.

Vaginal Microbiome Profile

I've requested this for you, so you'll receive an email from Nutripath lab asking you to complete payment. You'll then receive the collection kit (with instructions) in the mail in 5-7 days.

This reports on vaginal secretion pH, opportunistic bacteria, STIs, opportunistic fungal pathogens (5 x Candida species), beneficial bacteria (7 x Lactobacillus species) and Bacterial vaginosis (BV).

Look to take the test when you are have the most symptoms, but NOT while on your period or the day after having sex as these will skew the results.

First follow-up consultation

I'll let you know once I have all the results from your tests. I'll have access to the blood test results the GP ordered on my pathology platform, but not the others (eg. swabs) so you'll have to get a copy of these yourself.

We can then book a follow-up consultation to discuss the findings and create a plan of where to begin.
