Home	Newsletters	Bookstore	News	Community	Links	Articles/FAQs	Diet Info
Ctr Top Drs Contact							
HOME > A	RTICLES > ARTICL	E	-				

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Alternative Medicine and Natural Hormone Approaches for Hypothyroidism

Interview with Holistic Doctor David Brownstein, Author of the Miracle of Natural Hormones, Talking About Armour Thyroid and Natural Thyroid Treatments

by Mary Shomon



David Brownstein, M.D. is the author of The Miracle of Natural Hormones, 2nd Edition and in this interview, talks about the use of natural hormones in the treatment of hypothyroidism. David Brownstein, M.D., is a family physician who integrates the best of conventional and alternative therapies in his practice. He serves as the Medical Director for the Center for Holistic Medicine in West Bloomfield, Michigan, Dr. Brownstein is a Clinical Assistant Professor of Medicine at Wayne State University School of Medicine. He is a graduate of the University of Michigan and Wayne State University School of Medicine. Dr. Brownstein is Board Certified by the American Academy of Family Physicians. He is a member of the American Academy of Family Physicians. American Academy of Preventive Medicine, Acupuncture Society of Michigan, American College for the Advancement in Medicine and The American Academy of Medical Acupuncture. He has a website located at www.drbrownstein.com.

Q. David, in your book, "The Miracle of Natural Hormones," you cover a number of natural hormones, including natural progesterone and estrogens, DHEA, melatonin, and many more. Yet your first chapter focuses on natural thyroid hormone. Is there a reason you chose to start with the thyroid?

A. Mary, the reason I put the natural thyroid hormone chapter first is because it is the most important part of the book. Although I feel it is best to use all of the natural hormones in combination to achieve the best results, balancing the thyroid gland is the most important. It is impossible to balance the hormonal system without adequately addressing the thyroid gland. In addition, some of the best results I have seen in medicine have to do with using natural thyroid hormone or Armour Thyroid.

Q. Some doctors are in favor of using both T4 and T3 hormones in thyroid hormone replacement therapy, but refuse to use the natural form of thyroid, i.e., Armour Thyroid. They have expressed concerns regarding antigen responses, due to the fact that the pig thyroid may be perceived as a foreign substance by the human body -- and perhaps more "foreign" than a synthetic hormone meant to mimic the human

version more closely than an animal's hormone. For that reason, they prefer either Thyrolar (synthetic T4/T3) or the use of (Levothyroxine plus T3 as Cytomel or time-released compounded T3.) What are your thoughts regarding these concerns, and how patients can know what's safest and best for them?

A. In my experience, Armour Thyroid provides the best results for the majority of patients. Armour thyroid not only contains T3 and T4, but it contains many other factors that facilitate the conversion of T4 to T3 including calcitonin, T1, T2 and many other chemicals that we have not even identified. If we had a direct human duplicate of all of the chemicals contained and released by our own thyroid gland, I would be the first to promote its use. Armour Thyroid has been around for almost 100 years and has proven to be extremely safe and effective.

Q. Do you feel that this may be why some patients feel better on Armour versus synthetic T4/T3 combinations?

In my experience, people will generally feel better on Armour Thyroid versus the synthetic combinations that you have mentioned. However, one size does not fit everyone. Each therapy needs to be individualized for that particular person.

Q. You feel that a number of factors can contribute to the inability to convert T4 to T3, including:

- 1. Deficiencies of zinc, selenium, iodine and iron
- 2. beta blockers, Dilantin and certain other drugs
- 3. Alcohol and pesticides

Can you explain why and how you feel these factors affect the ability to convert, and how you feel natural thyroid might address these problems?

A. Mary, all of these factors decrease the conversion of the relatively inactive T4 to the more active form of thyroid hormone, T3. All patients with thyroid problems need to be properly evaluated for vitamin and mineral deficiencies. In addition, I look at all of my patients for signs of toxicity, whether it is from drug therapies or chemicals like pesticides and alcohol. It is critically important to treat the whole person, not just part of the person in order to achieve the best results.

Q. Can you explain more about your assertion in the book that low protein/low fat diets can contribute to the inability to convert T4 to T3? Do you feel that the current "low-fat" craze might contribute to increasing borderline thyroid problems in the U.S.?

A. I often see people on a low fat/low protein diet that have hypothyroid symptoms. Often, just by correcting the dietary insufficiencies, their thyroid symptoms will improve. It is well known that adequate protein and fat is necessary to convert T4 to T3. Dr. Barnes (a pioneer in the treatment of thyroid problems) wrote 40 years ago about how the thyroid will underfunction if there is a lack of protein and fat in the diet.

Q. In your book, in addition to a variety of supplements, including Vitamin A, B Vitamins, C, E, and others, you suggest people get sufficient foods with iodine. There's been a great deal of controversy among holistic and complementary practitioners regarding whether to supplement with iodine or iodine-containing foods and herbs (such as seaweed, kelp, bladderwrack, etc.). A number of practitioners I've spoken feel that iodine can actually aggravate autoimmune thyroid disease. Personally, I've found this to be the case with me, and have heard from so many people who have had major "crashes" (in terms of fatigue, low energy, neck

irritation/tenderness) when they either eat iodine-rich food, or begin iodine supplementation. What do you feel the situation is with iodine, and what are these reactions all about?

A. I agree that iodine can aggravate autoimmune thyroid conditions. Iodine supplementation in those that have an autoimmune thyroid problem can be akin to pouring gas over a fire. However, with hypothyroid conditions that are not autoimmune in nature, iodine-containing foods can actually help the thyroid function better.

Q. You mention the importance of stress reduction in your book. Can you explain what you feel the relationship is between stress and thyroid disease, and how reducing stress can help?

A. Mary, there is no doubt in my mind that stress reduction improves the entire hormonal system, including the thyroid gland. Stress exacerbates all thyroid problems, particularly those with an autoimmune component (i.e., Hashimoto's or Graves).

Q. In your book, you mention that for many thyroid patients, weight loss depends on the proper thyroid supplement, plus a diet that limits the high-glycemic (high-sugar) carbohydrates. You mention Barry Sears' "The Zone" as a diet that might help. I think these are excellent starting points for thyroid patients who are trying to lose weight. However, I've spoken with numerous people who are on Armour or T4/T3 supplementation who are still having trouble losing weight. What other approaches would you suggest these people look into to aid in their weight loss efforts?

A. In order to achieve the best results, I feel it is necessary to balance out the entire hormonal system. This can include the use of the adrenal hormones (i.e., DHEA, and pregnenolone), ovarian hormones (i.e., using natural progesterone and natural estrogens and natural testosterone), growth hormone, melatonin and others. I find using small amounts of each of these hormones in combination much more effective than using one hormones individually. Sometimes, one needs a combination of treatments to help them achieve their optimum health.

Q. You have chapters in your book for other hormones, such as DHEA, Natural Progesterone, Natural Estrogens, Natural Testosterone, Growth Hormone, Natural Hydrocortisone, Melatonin and Pregnenolone. What one hormone relates most to the thyroid gland?

A. Mary, all of the hormones relate to the thyroid gland. However, there is definitely a relationship between thyroid problems and DHEA and Natural Progesterone. I usually find patients with thyroid problems will do much better when DHEA and Progesterone levels are appropriately investigated. IF there is a problem with these hormones, supplementation with natural versions of DHEA and Progesterone are extremely helpful to balance out thyroid problems.

Q. Did you have any other information or advice you think is important for people with hypothyroidism?

A. I recommend to my patients to do their own reading and make their own decisions about their health care. A more informed patient will get the best results. Don't rely on one test to tell you whether your thyroid is functioning appropriately. Take into account the whole picture, from the blood tests to the physical exam signs and symptoms and the basal temperatures. This is truly a holistic way to treat someone, and this is what I describe in my book.

Q. How can people get your book?

A. You can call toll free: 1-888-647-5616 or order on-line at: www.drbrownstein.com.

Q. If people want to have a consultation with you, how do they get in touch with you? Do they come to see you in person, how can they contact you?

A. My office phone number is: 1-248-851-1600. I do not do phone consultations. I work with two other practitioners who share my philosophy about treating the whole person as naturally as possible.