



## Natural thyroid vindicated!



After over three decades of “breaking with the pack” and recommending natural thyroid to my patients, this fall ushers in a stunning vindication of this often-shunned practice.

In a study published in the September edition of *Annals of Family Medicine*, researchers compared synthetic thyroid medication (e.g. Synthroid, levo-thyroxine, Levothroid) to natural desiccated thyroid (e.g. Armour Thyroid, Naturethroid, NDT).

For background, the main knock against natural thyroid—frequently cited by conventional endocrinologists—is that it is “unreliable”, producing inconsistent dosing in recipients of thyroid replacement. This is said to be dangerous, especially for older patients. In fact, Medicare denies coverage for natural thyroid meds, leaving patients to foot the bill if they refuse to switch to reimbursed brands of synthetic thyroid.

Some doctors disparage natural thyroid as “piggie thyroid.” It’s considered old-fashioned, superseded by more efficient, modern formulations.

This new study reveals that these knocks against natural thyroid are shibboleths; after three years of therapy with either of the two types of thyroid, TSH results were *identical*. Natural thyroid *did not* produce a higher rate of under or overdosing

than did synthetic thyroid preparations.

TSH—thyroid stimulating hormone—is produced by the pituitary gland in response to circulating levels of thyroid hormone. When it's high, it indicates not enough thyroid production (hypothyroidism) or replacement; when it's low, it indicates over-production (hyperthyroidism) or over-replacement.

In response to the *Annals* study, the journal editors penned an editorial entitled “Returning to a Patient-Centered Approach in the Management of Hypothyroidism”. They note that the shift to synthetic thyroid medication, which occurred in the 70's, thought to be more scientific, led to discouragement of the use of natural thyroid. “This one-size-fits-all approach,” they admit, “does not work for all patients. Emerging evidence shows that for many patients symptoms persist despite normal TSH values.”

With surprising candor, the editorialists concede that this undermines patient confidence in their doctors. Patients are endlessly reassured that their tests are in normal range, but still feel unwell, and “reported feeling that their physicians were not willing to look further into why their symptoms were persisting.”

The result is that patients are left “feeling invalidated and without answers.” They're sometimes persuaded that “it's all in their heads” and end up with referrals to psychiatrists for unnecessary antidepressant treatment.

But there's a reason that many patients don't respond well to synthetic thyroid medication. A little basic physiology is in order here.

The normal thyroid produces mostly T4 with only a little bit of T3. T4, which is inactive, is converted to T3 in the peripheral tissues. So the idea with synthetic T4 preparations is: why bother with T3 when you can just introduce T4, which will be converted to T3 wherever the body needs it?

Besides, endocrinologists claim, T4 has a nice, slow time-release effect, without the potentially hyper-caffeinating effects of rapid-acting T3. What could possibly go wrong?!

Turns out, a lot. Much recent research is demonstrating that many people—especially those with chronic medical conditions—have inefficient conversion of T4 to T3 in peripheral tissues. Environmental toxins and nutritional deficiencies may impair that bio-transformation.

So, when TSH levels appear “normal,” the brain, heart, muscles, skin and stubborn fat cells may not be getting optimal amounts of T3. Natural thyroid medications deliver a balanced blend of T4 and T3.

The solution is not to hew so slavishly to TSH levels, but rather to test for T3, free T3, and sometimes reverse T3 to get a better handle on thyroid status. Additionally, we doctors need to pay more attention to patients' *subjective* experiences. The *Annals* article reassures us about the *safety* of natural thyroid alternatives, but doesn't speak to its *efficacy*. Previous studies do.

In a 2020 article entitled “Patient Experiences and Perceptions Associated with the Use of Desiccated Thyroid Extract” the researchers pose the question: “Why is it that so many patients prefer natural thyroid?”

58% of the patients surveyed cited “lack of improvement in hypothyroidism-related

symptoms” as their rationale for switching; 22% had side effects with conventional thyroid meds.” Moreover, 81% of patients described natural thyroid as “moderately to majorly effective” and “more effective than previous therapy” (77%). The most frequently described benefits associated with natural thyroid were “an improvement in symptoms” (56%) and “a change in overall well-being” (34%).

The authors note: “Lack of individualized treatment and a feeling of not being listened to were recurrent themes” among people who eventually switched to natural thyroid.

And, in a landmark study in 2018, conventionally-treated hypothyroid patients had “a significant decrease in health-related quality-of-life and all domains (fatigue, vitality, cognition, anxiety, depressivity, emotional susceptibility, social life, daily life), as compared to controls.”

The authors state: “Many patients (78.5%) reported having complaints despite taking thyroid medication and reported not feeling well (77.8%) while their blood values were within range.” Frequent complaints were fatigue, reduced daily functioning, coldness, muscle pain/cramps and being overweight.

When compared to users of synthetic thyroid medication, users of natural thyroid preparations had significantly higher quality-of-life scores.

Caution must be exercised with natural thyroid medications. They’re trickier to prescribe than synthetic thyroid. Some overzealous prescribers of natural thyroid dose their patients without regard to blood tests, relying instead entirely on patients’ subjective reports. Some individuals may get hooked on the stimulating effects of thyroid; others misuse it as a weight loss panacea.

Unfortunately, I’ve inherited some patients whose excessive use of thyroid medication for many years has damaged their hearts or thinned their bones. It’s sometimes harder for them to lose weight when their metabolisms down-regulate in response to too much over-activation. After gradual weaning, we’ve discovered that they were taking two or three times more thyroid than they needed. Finding a doctor who’s open to natural thyroid and is experienced in its application—but is a prudent prescriber—can be a challenge.

Hopefully, studies like these will jolt risk-averse health practitioners into taking less of a cookie-cutter approach to thyroid replacement. Natural thyroid medication has been a boon to countless patients that I’ve treated over the years. It would be a shame if unscientific bias were to deprive the millions of Americans with thyroid problems of more nuanced options tailored to their individual needs.