



Accurate Clinic

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Testosterone Therapy – Normal Estradiol, Low Free and Total Testosterone

Diet:

- Cruciferous vegetables: broccoli, cauliflower, turnip, radish, water cress mustard seeds
- Reduce alcohol consumption
- Maintain ideal weight (Aromatase is found in fat, especially abdominal fat)

Diet Supplements:

Inhibit Aromatase activity (the enzyme which converts testosterone to estradiol):

- Zinc 30-90mg (80mg)/day
- Chrysin 1000mg + piperine 10mg /day (SuperMiraForte)
- Indole-3-carbinol 400mg/day enhances estrogen breakdown
- Several other compounds have also been shown to inhibit aromatase and have additional benefits for health, anti-aging, and hair growth. Most notable among these compounds are Green Tea Extract, Grape Seed/Resveratrol Extract, Pomegranate Extract and Melatonin. Definitive studies confirming their clinical effectiveness are lacking however.

Block estrogen receptors

- Saw palmetto super-critical extract 320mg/day

Reduce testosterone binding:

- Nettle methanolic extract 240mg/day (inhibits SHBG)

Prescription Medications

If LH low:

- Chorionic gonadotropin injections 2-3 times a week for one month, recheck

If LH normal:

Initiate testosterone replacement therapy (Do not use testosterone injections or tablets):

- Testosterone patch: (Androderm, Testoderm)
- Testosterone cream
- Testosterone pellet

Before initiating testosterone therapy, confirm normal PSA level. After initiating testosterone therapy and total testosterone levels reach optimal range, monitor PSA, estradiol and free testosterone every 1-2 months for 6 months then every 6 months.