

## Hypothyroidism - The Overlooked and Unsuspected Illness

### Essential Considerations for Anyone Working in the Health Field

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Have you been in touch with anyone who is chronically fatigued even after being rested? Anyone who has a continual loss of energy? Anyone always coming down with a cold or flu? Anyone who always has cold hands and feet or who are very sensitive to the cold? Anyone who has UMS (ugly mood swings)? Anyone who is depressed and no amount of psychotherapy or anti-depressants seems to help? Anyone who has excessive menstrual flow, cramps or irregular periods? Anyone who has severe headaches? Anyone who seems to have lost their sexual appetite? Anyone who swings from being a perfectionist to not caring about anything? Anyone who has rapid weight gain or cannot lose weight? Anyone who has excessively dry skin, broken nails because they are too brittle or nails that are too soft, brittle hair or loss of hair, cracked or constantly bleeding heels? Anyone who has poor memory? And all of these complaints are met with the diagnosis that "nothing is organically wrong" and thus a person is seen as a hypochondriac or someone that "doctor shops"? These people may have hypothyroidism. If you see anyone with these complaints, it is essential that hypothyroidism be one of your considerations. Hypothyroidism is simply that the thyroid is subnormal. Broda Barnes, M.D. (ref. 1) emphasizes that a thyroid may be under functioning and not be detected on a thyroid blood panel. David Williams, D.C. discusses the thyroid on an excellent tape (available at Mountain Publishing P.O. Box 829, Ingram, Texas 78025): The thyroid is the body's thermostat. It regulates the metabolism, how you burn energy. If the body is not burning enough energy, everything slows down resulting in a number of conditions, including fatigue and inability to lose weight. Depressed and suicidal people can also have serious hypothyroidism.

The thyroid, like all the other glands in the body, is like a factory, it produces products that are needed in other parts of the body. The body works as a total unit and each part

depends on every other part. The thyroid produces hormones and to do this it needs the proper raw material. In the thyroid's case, the raw material needed is iodine. This is not the type of iodine that is used on cuts which is a poison. It is an iodine that is found in some seafood, vegetables, fruit grown in areas whose soil is high in iodine content, etc. It doesn't take but a little bit of iodine for the body to function but being just a little bit low can cause any of the above conditions. In the extreme, as what happened in the Mid-West in the 1930's, goiter is the result. Goiter is nothing more than an enlarged thyroid. The enlargement of the thyroid is caused by the thyroid searching desperately for iodine. When the thyroid gets too large it may have to be surgically removed.

The thyroid is a little bow tie shape gland that sits under the Adam's apple. It forms sort of a semi circle around the trachea or the windpipe. If it gets depleted in iodine it will enlarge to try to absorb or accumulate more. Most people with thyroid problems do not have goiter. They have enough not to have goiter but not enough to produce the needed hormones. Without the needed raw material to function properly a person will have a lot of symptoms and begin to live life miserably in a chronically fatigued, and/or unhappy, less than optimally functioning manner.

Since the functioning of the thyroid varies from person to person the usual method of checking low thyroid by blood tests is not always indicative of low thyroid functioning. The blood tests show the circulating hormone of the thyroid (T-3 and T-4 tests are different hormones produced by the thyroid and the blood tests will show if these hormones fall within normal limits. The problem is that these hormones will fluctuate throughout the day and may show within normal limits but may be too low for a particular person, i.e. the thyroid may still not be functioning at 100% efficiency.)

There are a number of ways that the thyroid can be easily and simply checked. A few examples will be cited here for your perusal:

1. Dr. Broda Barnes method: Take a temperature reading first thing in the morning (shake thermometer down the night before, leave on bedside because to do this accurately you cannot get out of bed first). Place the thermometer on bare skin in the armpit for 10 minutes. Take the temperature 2-3 days in a row to get an accurate reading. The normal temperature should be between 97.8 and 98.2. Anything below that will usually indicate a hypothyroid condition. Women should begin taking this reading the 2nd or 3rd day after their menstrual flow has started.
2. Dr. Victor Frank's method from the Total Body Modification workshop: Being that there are three functioning lobes of the thyroid the thyroid cartilage can be contacted with all fingers, one finger left (MT), one finger center (MT), one finger right (MT), or any one of the 16 combinations possible.  
(Note: MT = Muscle Test)
3. Gordon Stokes (Three in One Concepts) utilizes the Venous/Arterial Flow tests in Structural Neurology: Use a running motion with your first two fingers to strike the sternal notch a couple times (MT). If the muscle test is weak, continue to stroke the sternal notch until a redness appears. Retest. If redness does not appear within 5-8 strokes hypothyroidism might be considered.

The solution to hypothyroidism may be simple. Dr. David Williams recommends thyroid glandular supplements, available at health food stores, which are desiccated thyroid glands from healthy cattle and are similar to the thyroid hormone. He also recommends Ioaquasoll, a non toxic water soluble ammonium iodide (available from TPCS Distributors, 343 E. Orange Grove Blvd., Pasadena, CA 91104). This form of iodine is easily assimilated and becomes a pure iodine in the body (unlike sodium or potassium iodide). He also recommends kelp that has not been depleted of its normal iodine

content by pollution. He cautions that if you take thyroid supplementation that your body may need to have increased amounts of the B vitamins as well.

Dr. Stephen Langer, M.D. discusses the care and feeding of the thyroid (ref. 4). Walter Schmitt, Jr., D.C. discusses the need to be particularly aware of thyroid deficiencies (ref. 5).

In extreme cases a thyroid hormone may be taken. When a hormone is used, it may replace the natural functioning of the thyroid. The message from the pituitary gland is that enough hormones exists. This false message will make the thyroid lazy and unproductive. What isn't used will be lost! A recent study that appeared in the Journal of the American Medical Association (ref. 3), indicated that there is some evidence that the thyroid hormone levothyroxine may cause decreased bone density and therefore may be a risk for osteoporosis.

There are other things to be aware of when hypothyroidism is a consideration, such as mineral deficiency of iron as well as iodine (ref. 2). But the initial awareness that there is a problem that may be unsuspected, undiagnosed or overlooked and can be corrected is important to all of us.

## References

1. Broda Barnes, M.D., *Hypothyroidism: The Unsuspected Illness*, 1976.
2. Beark JL et al, *Impaired thermoregulation and thyroid function in iron-deficiency anemia*, American Journal of Clinical Nutrition 1990; 52:813-9.
3. Kung AWC, Pun KK, *Bone mineral density in pre-menopausal women receiving long-term physiological dose of levothyroxine-4*, Journal of the American Medical Association, 1991; 265:2688-91).
4. Langer, Stephen , M.D., *Solved: The Riddle of Illness*, (1984)
5. Schmitt, Walter, Jr., D.C., *Compiled Notes on Clinical Nutritional Products* (1990)