

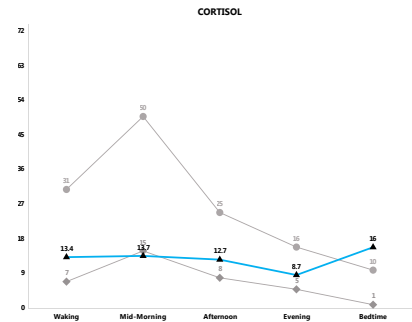
Female Adrenal Profile

Patient Information	Clinician/Order Information	Sample Information
2023 Test Female 1 DOB: 5/3/1993 Age: 30 Gender: Female Phone: +1 877-316-8686 Patient ID: 2f1c9bfb Height: N/A Weight: N/A	Gregg Sargent Phyl Test Facility +1 877-316-8686 Order date: 9/28/2023	Accession# T-0923-0008863 Collected: 9/24/2023 Received: 9/28/2023 Reported: 9/29/2023 10:48:37 AM <u>Collection time:</u> 1st 2nd 3rd 4th 5th 10:48 AM 2:48 PM 6:48 PM 10:48 PM 6:48 AM





1st Day of Last Menses	Days Between Periods	Menstrual Cycles	Hysterectomy	When?	Ovaries Removed	When?	Pregnant?
N/A	N/A	N/A	N/A		N/A		N/A

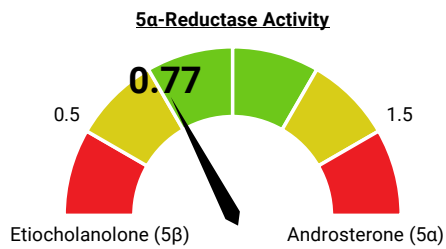
Category	Type	Delivery	Duration of Use
Hormone			

Analyte	Unit	Observation	Results	Reference Range
Waking Cortisol	ng/mg CR		13.38	7 - 31
Waking Cortisone	ng/mg CR		36.22	26 - 75
24-hour Cortisol	ng/mg 24hr CR	High	54.17	19 - 38
24-hour Cortisone	ng/mg 24hr CR	High	141.31	39 - 74
Cortisol/Cortisone 11B-HSD II	Ratio		0.75	0.4 - 1.2
Cortisol: Metabolite Ratio	Ratio	High	2.1	0.5 - 1.5
Free DHEA	ng/mg CR		10.48	6.1 - 17.3
Average DHEA-S	ng/mg CR		104.06	38 - 507
5α-Reductase Activity	Ratio		0.77	0.5 - 1.5
Anabolic/Catabolic Ratio	Ratio	Low	0.4	0.5 - 1.5



Androgen Markers

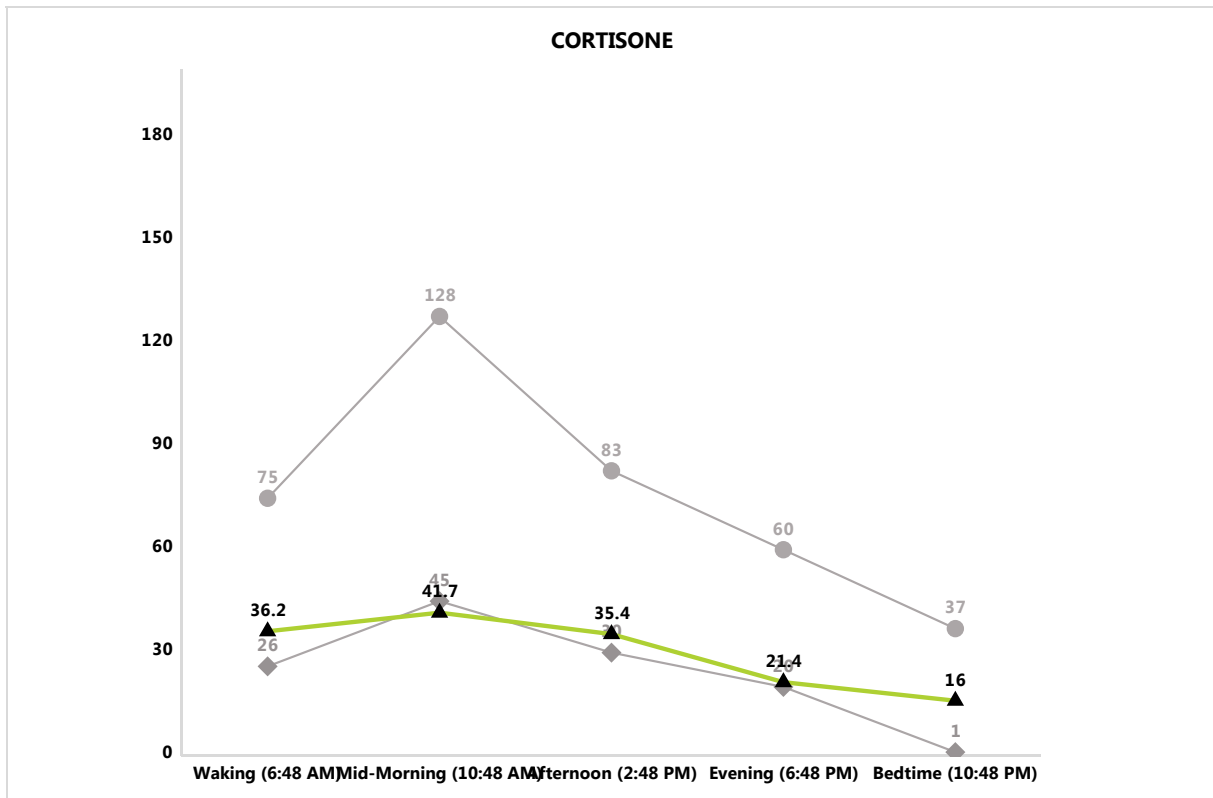
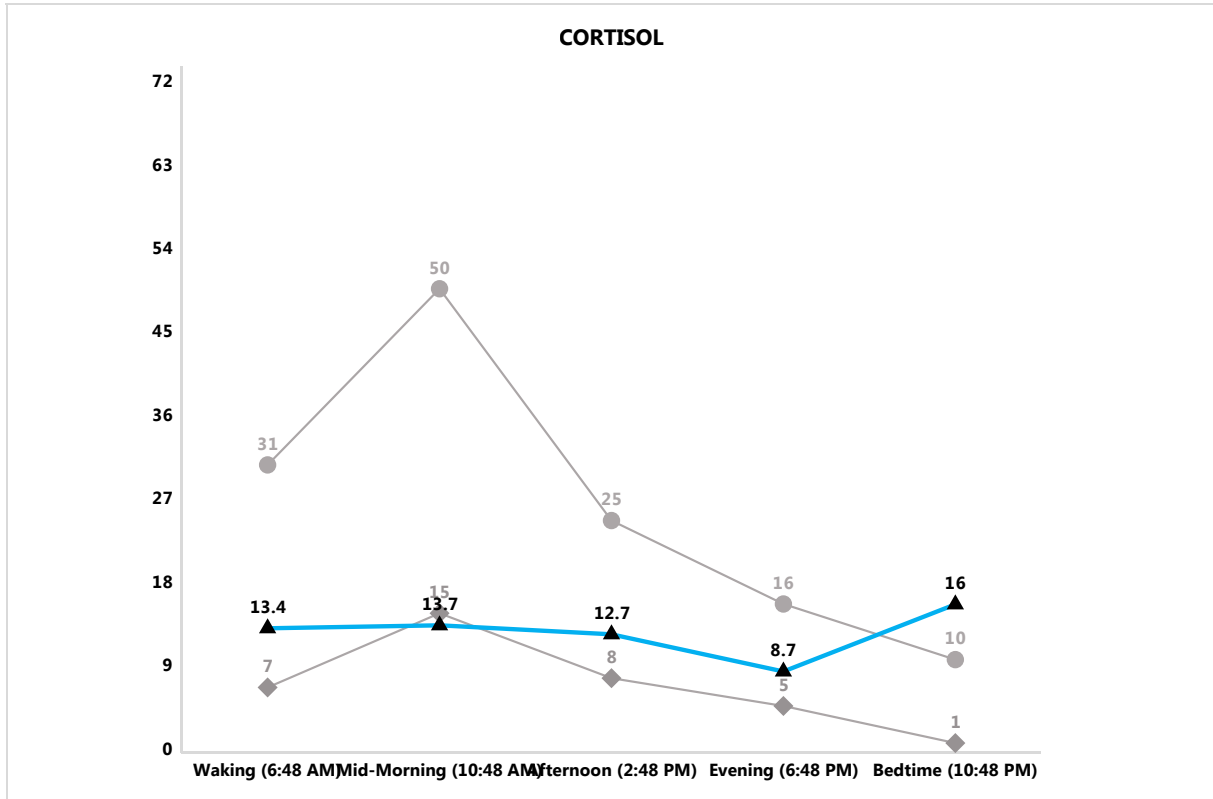
	Units	Observation	Target Ranges
Average DHEA-S	ng/mg CR		<div style="display: flex; justify-content: space-between; align-items: center;"> 38 507 </div> 
Free DHEA	ng/mg CR		<div style="display: flex; justify-content: space-between; align-items: center;"> 6.1 17.3 </div> 
Etiocholanolone	ng/mg CR	Low	<div style="display: flex; justify-content: space-between; align-items: center;"> 120 421 </div> 
Androsterone	ng/mg CR	Low	<div style="display: flex; justify-content: space-between; align-items: center;"> 147 593 </div> 



5-alpha-reductase (5aR) activity appears normal but may not be clinically relevant if other 5a levels are much higher, or lower, than 5b levels. Confirm this value by comparing 5a-pregnanediol to 5b-pregnanediol, testosterone to 5a-DHT, and cortisol to a-THFs in this report. 5-alpha-reductase also plays a role in aromatase activity. Optimal balance exists when the ratio is nearest 1 (center). If the patient is at the high or low end of normal (yellow zone), they are approaching an imbalance.



HPA-Axis Graphs



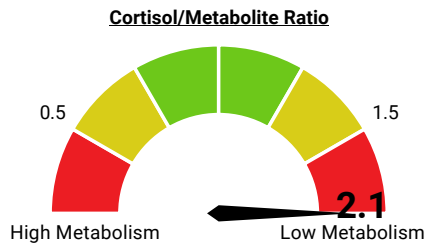
Performed by Physicians Lab
4850 T-Rex Ave, Suite 150, Boca Raton, FL 33431
CLIA Lic. # 10D2147002



Disclaimer: This report does not serve as a substitute for any consultation, diagnosis and/or medical treatment from a qualified physician or healthcare provider. The performance specifications of all assays have been established and verified by Physicians Lab, Inc. and as such, are considered Lab Developed Tests, which are not FDA approved.

HPA-Axis Markers

	Units	Observation	Target Ranges
24-hour Cortisol	ng/mg 24hr CR	High	19 - 38 54.17
24-hour Cortisone	ng/mg 24hr CR	High	39 - 74 141.31
Cortisol Metabolites	ng/mg CR		1160 - 2183 1374.83
Total 17-Hydroxysteroids	ng/mg CR		1492 - 2637 1590.61
Free DHEA	ng/mg CR		6.1 - 17.3 10.48
Total 17-Ketosteroids	ng/mg CR	Low	730 - 1522 348.74

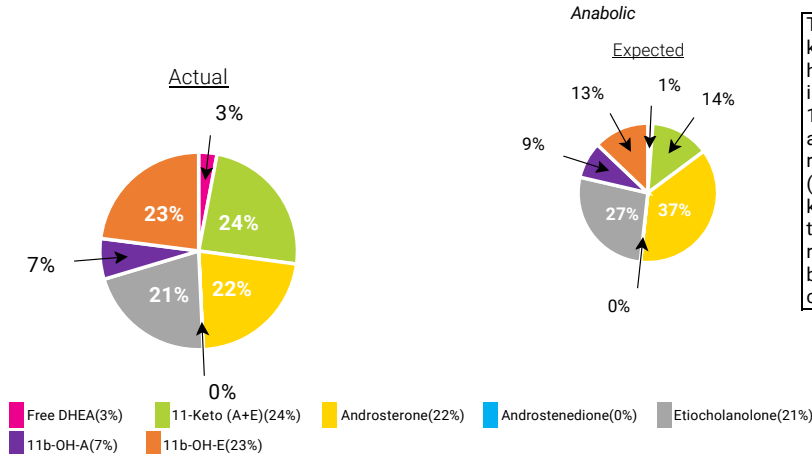


The Cortisol:Metabolite Ratio is elevated. This indicates that metabolism of cortisol is decreased; resulting in a pooling effect of free-cortisol levels that can make free-cortisol appear higher. Decreased metabolism of cortisol is often caused by hypothyroidism and certain inflammatory responses. Certain 17-Hydroxysteroids are also cortisol metabolites, and as such, should be in balance with 17-Ketosteroids for optimal function (see Anabolic/Catabolic ratio)



HPA-Axis Markers Continued

Total 17-Ketosteroids



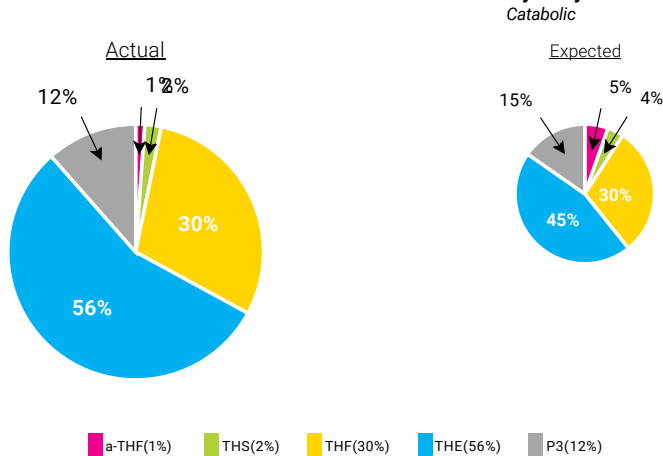
This patient's 17-ketosteroids are low. Decreases in 17-ketosteroids can be the result of low DHEA levels, hyperthyroidism, depressed adrenal function, kidney issues, hypopituitarism or decreased testicular function. 17-ketosteroids are formed during metabolism of androgenic sex hormones (specifically DHEA) and are released by the adrenal glands (M/F) and the testes (M). To examine the balance between the 17-ketosteroids, compare the "actual" chart on the left to the "expected" chart on the right representing the relative ratios of each. 17-ketosteroids should also be in balance with 17-hydroxysteroids to achieve optimal clinical results (see anabolic/catabolic ratio).

Anabolic/Catabolic Ratio



The proper balance between anabolic hormones and catabolic hormones is essential in creating a bio-environment for cell proliferations and tissue health to perform at optimal levels while still allowing for detoxification and responses to stress. The results shown indicate higher catabolic metabolites. This can be due to elevated cortisol and cortisol metabolites (causing elevated 17-Hydroxysteroids) or low DHEA and DHEA metabolites (causing decreased 17-Ketosteroids). Possible causes include chronic stress, obesity, metabolic syndrome, excessive wear and tear or poor recovery from illness or injury.

Total 17-Hydroxysteroids



The results indicate a normal level of catabolic (17-hydroxysteroid) metabolites. The proper balance between anabolic and catabolic metabolites is important; please review this balance by examining the anabolic/catabolic ratio.



Patient Result History

Analyte	Unit	9/29/2023 (T-0923-0008863)		
		Observation	Results	Reference Range
Creatinine	mg/dL		100.0	30 - 300
Estrogen and Progesterone Markers				
Androgen Markers				
Androsterone	ng/mg CR	Low	77.26	147 - 593
Etiocholanolone	ng/mg CR	Low	73.58	120 - 421
Free DHEA	ng/mg CR		10.48	6.1 - 17.3
Average DHEA-S	ng/mg CR		104.06	38 - 507
5α-Reductase Activity	Ratio		0.77	0.5 - 1.5
Androstenedione	ng/mg CR	Below Detection Limit	-	0 - 1.2
HPA - Axis Markers				
Waking Cortisol	ng/mg CR		13.38	7 - 31
Mid-morning Cortisol	ng/mg CR	Low	13.7	15 - 50
Afternoon Cortisol	ng/mg CR		12.73	8 - 25
Evening Cortisol	ng/mg CR		8.72	5 - 16
Bedtime Cortisol	ng/mg CR	High	15.96	1 - 10
Waking Cortisone	ng/mg CR		36.22	26 - 75
Mid-morning Cortisone	ng/mg CR	Low	41.65	45 - 128
Afternoon Cortisone	ng/mg CR		35.4	30 - 83
Evening Cortisone	ng/mg CR		21.39	20 - 60
Bedtime Cortisone	ng/mg CR		15.98	1 - 37
24-hour Cortisol	ng/mg 24hr CR	High	54.17	19 - 38
24-hour Cortisone	ng/mg 24hr CR	High	141.31	39 - 74
Pregnanetriol	ng/mg CR		182.98	170 - 423
Allo-Tetrahydrocortisol	ng/mg CR	Low	18.4	53 - 155
Tetrahydrodeoxycortisol	ng/mg CR	Low	32.8	46 - 106
Tetrahydrocortisone	ng/mg CR		883.48	564 - 1194
Tetrahydrocortisol	ng/mg CR		472.95	369 - 795
11-Keto (Androsterone + Etiocholanolone)	ng/mg CR		84.11	62 - 213
11b-Hydroxyandrosterone	ng/mg CR	Low	23.23	36 - 134
11b-Hydroxyetiocholanolone	ng/mg CR		80.08	57 - 202
Cortisol Metabolites	ng/mg CR		1374.83	1160 - 2183
Cortisol: Metabolite Ratio	Ratio	High	2.1	0.5 - 1.5
Total 17-Ketosteroids	ng/mg CR	Low	348.74	730 - 1522
Total 17-Hydroxysteroids	ng/mg CR		1590.61	1492 - 2637
Anabolic/Catabolic Ratio	Ratio	Low	0.4	0.5 - 1.5
Cortisol/Cortisone 11B-HSD II	Ratio		0.75	0.4 - 1.2

