•CLARE PYERS•

Integrative TCM Fertility

Poll:

What is your current knowledge and skill level?

Integrative TCM Fertility

01 Getting to know the reproductive system

02 The Problematic Reproductive System

03 Key blood tests for investigating infertility

04 Treatment strategies

05 Next Steps for Further Information/Training on this topic

Getting to know the Reproductive System

01 **Reproduction as a reflection of health**

02 **A medical perspective**

03 **A Chinese medicine perspective**

The Problematic Reproductive System

01 **Anovulation**

02 **Implantation Issues**

03 **Recurrent Miscarriage**

04 **Sperm issues**

05 **Unexplained Infertility**

Key Blood Tests for Investigating Infertility

01 **FSH**

02 **LH**

03 **Estrogen**

04 **Progesterone**

05 **Testosterone**

06 **DHEA**

07 **SHBG**

08 **AMH**

09 **Iron studies**

10 **Full thyroid panel including antibodies**

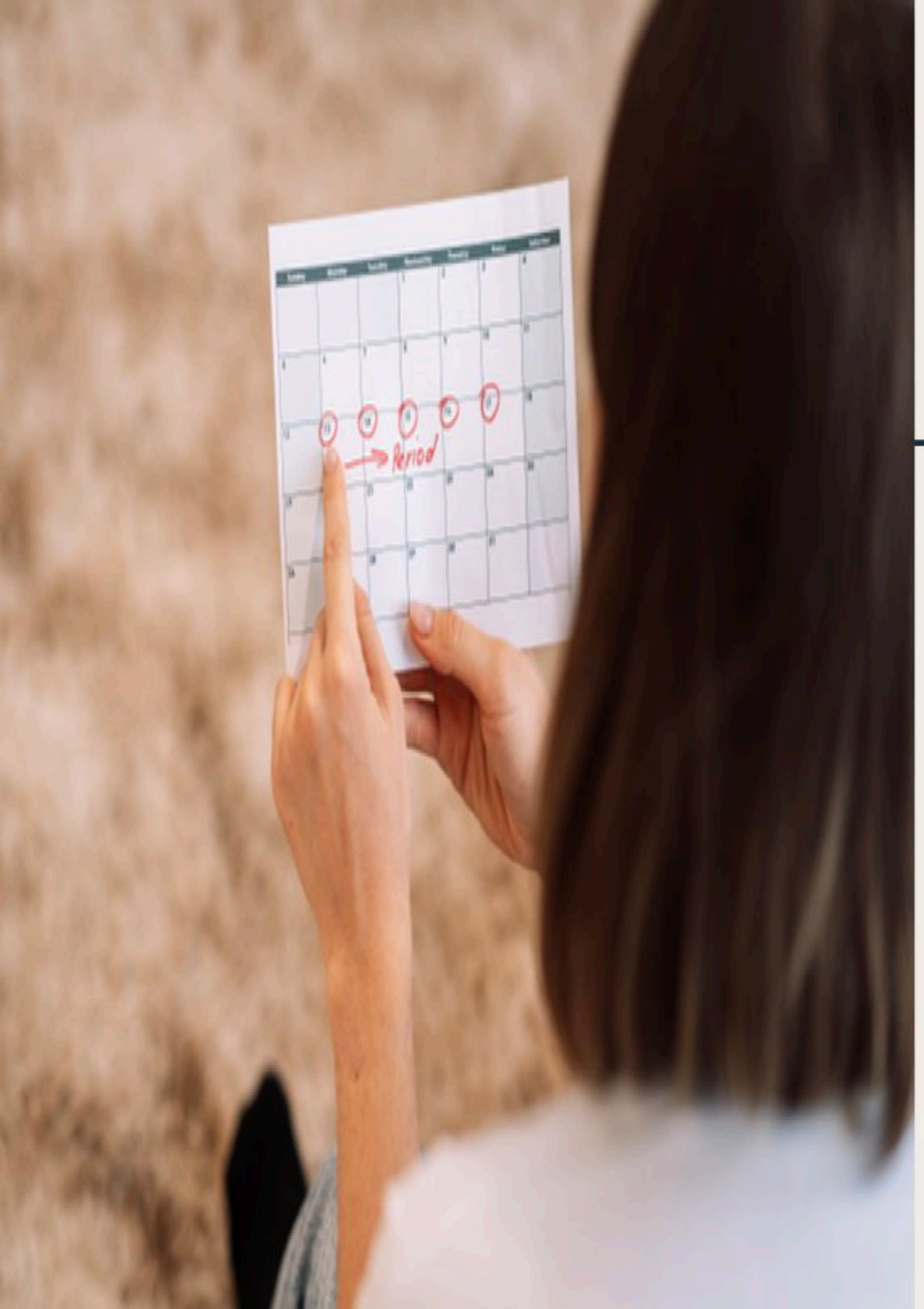
11 **Lipid profile**

12 **Celiac testing**

13 **Antibody profile**

14 **Clotting profile**


REPRODUCTIVE
SYSTEM

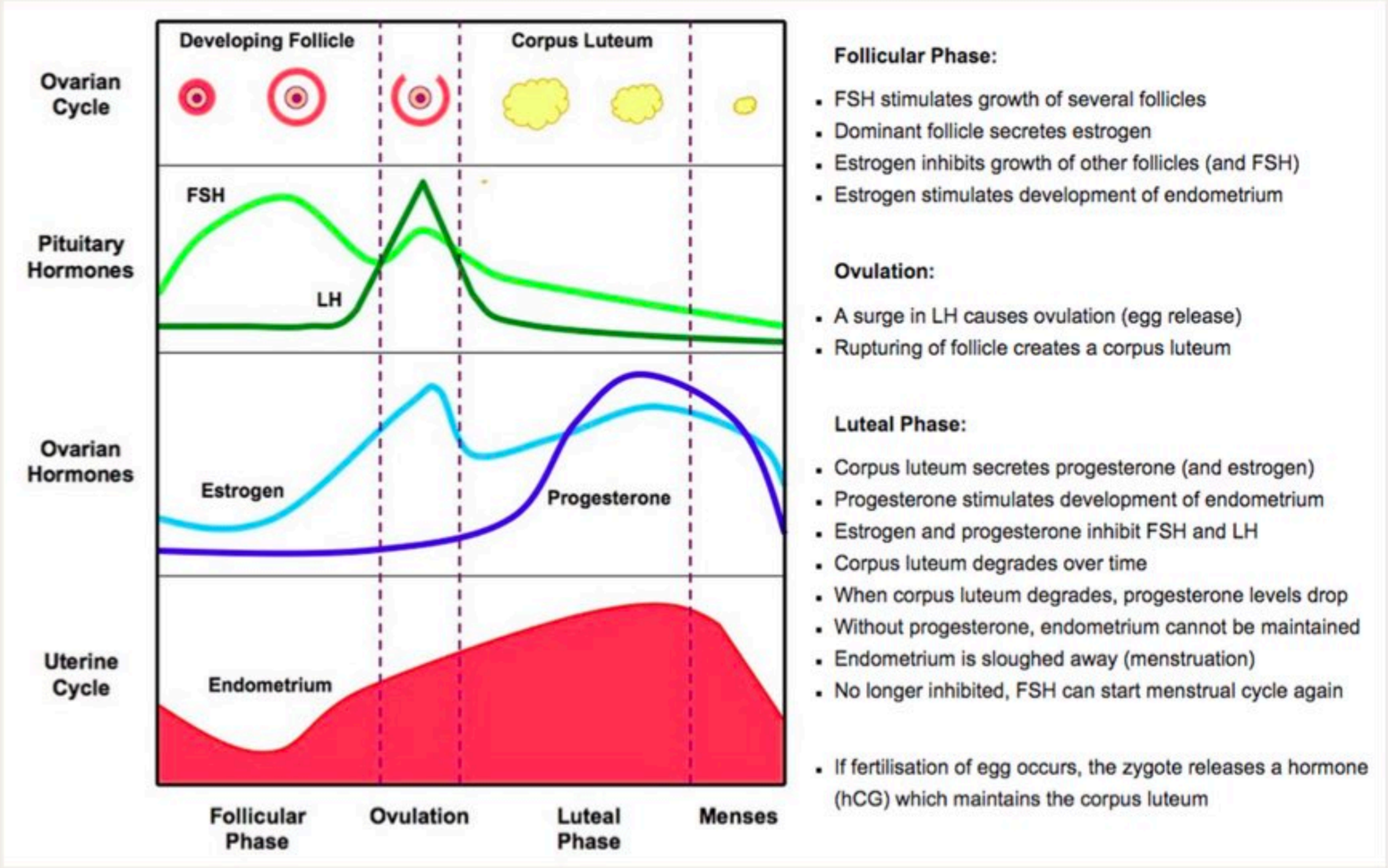


Reproduction as a Reflection of Health

Healthy Menstrual Cycle

- 27-29 days
- Zero pain
- Flow starts straight away. No stop-start bleeding
- 3-4 days of bleeding
- 1-2 days of light bleed and spotting at end
- Colour is deep red, not purple, or brown or bright red
- No clots, stringy bits or mucous
- Not watery, or dry
- No symptoms prior

Menstrual Cycle: Medical Perspective



Follicular Phase:

- FSH stimulates growth of several follicles
- Dominant follicle secretes estrogen
- Estrogen inhibits growth of other follicles (and FSH)
- Estrogen stimulates development of endometrium

Ovulation:

- A surge in LH causes ovulation (egg release)
- Rupturing of follicle creates a corpus luteum

Luteal Phase:

- Corpus luteum secretes progesterone (and estrogen)
- Progesterone stimulates development of endometrium
- Estrogen and progesterone inhibit FSH and LH
- Corpus luteum degrades over time
- When corpus luteum degrades, progesterone levels drop
- Without progesterone, endometrium cannot be maintained
- Endometrium is sloughed away (menstruation)
- No longer inhibited, FSH can start menstrual cycle again

- If fertilisation of egg occurs, the zygote releases a hormone (hCG) which maintains the corpus luteum

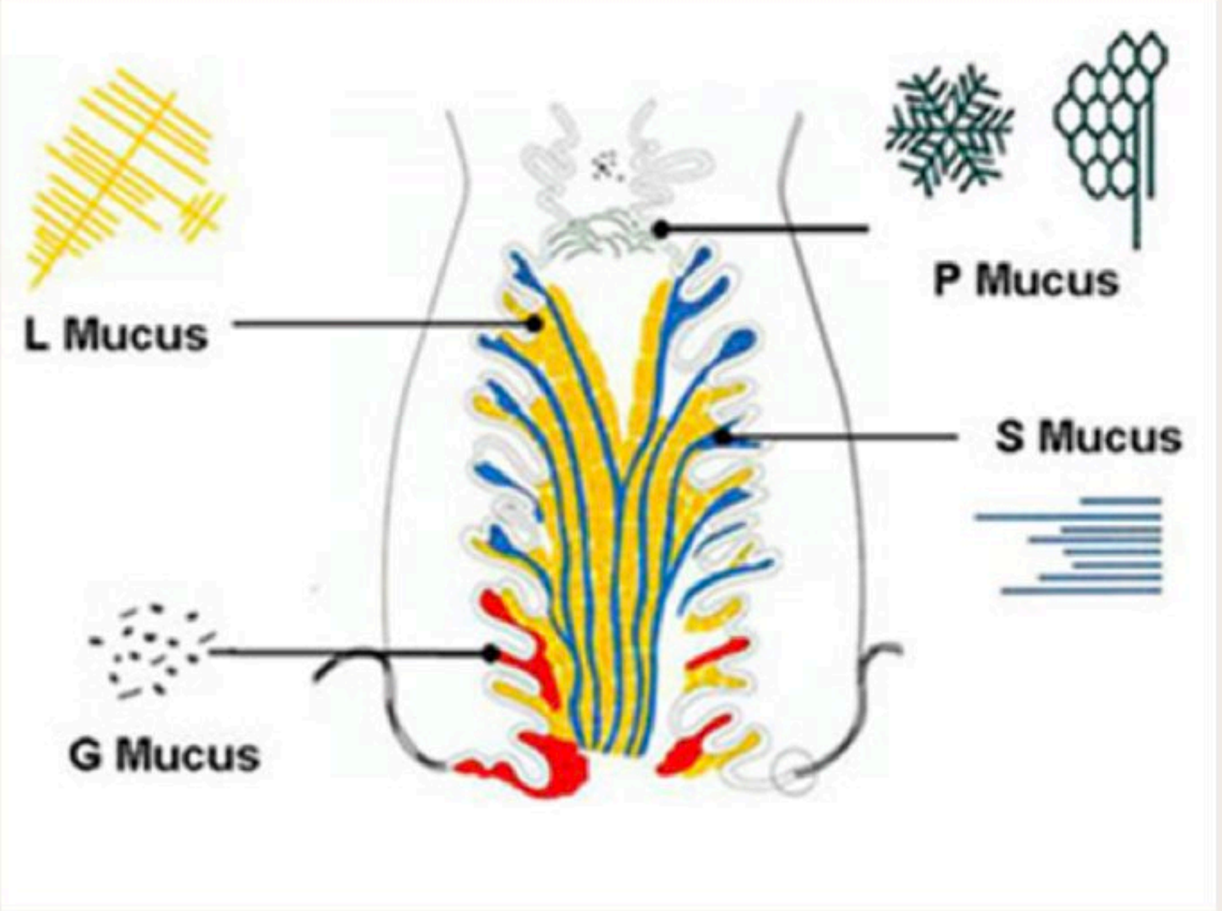
Fertility: Medical Perspective

Menstrual Cycle - Fertile Window

- 3-5 days of obvious slippery mucous
- Last day of fertile mucous is day of ovulation
- Can conceive on a day where mucous is present
- Cervix is open when fertile mucous is present, closed at other times
- Good quality yin is needed for good quality fertile mucous

Fertility: Medical perspective

- G mucous = low down, thick, keeps cervix closed
- L mucous = sticky, attracts and traps/eliminates low quality sperm
- S mucous = upper cervix, nourishes high quality sperm
- P mucous = top of cervix, creates wet feeling at vulva, propels sperm into uterus



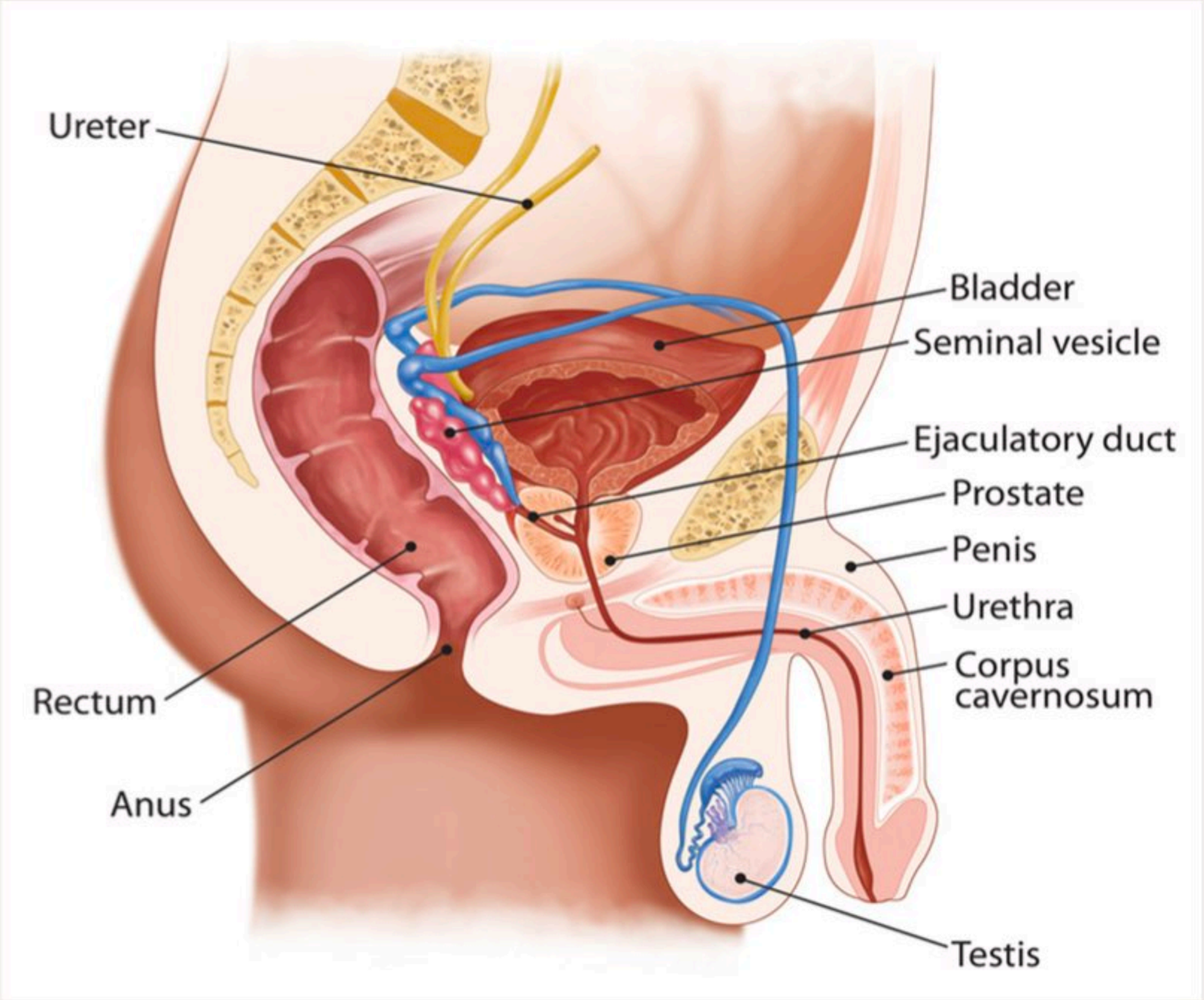
Fertility: Chinese Medicine Perspective

Fertility = Tian Gui 天癸

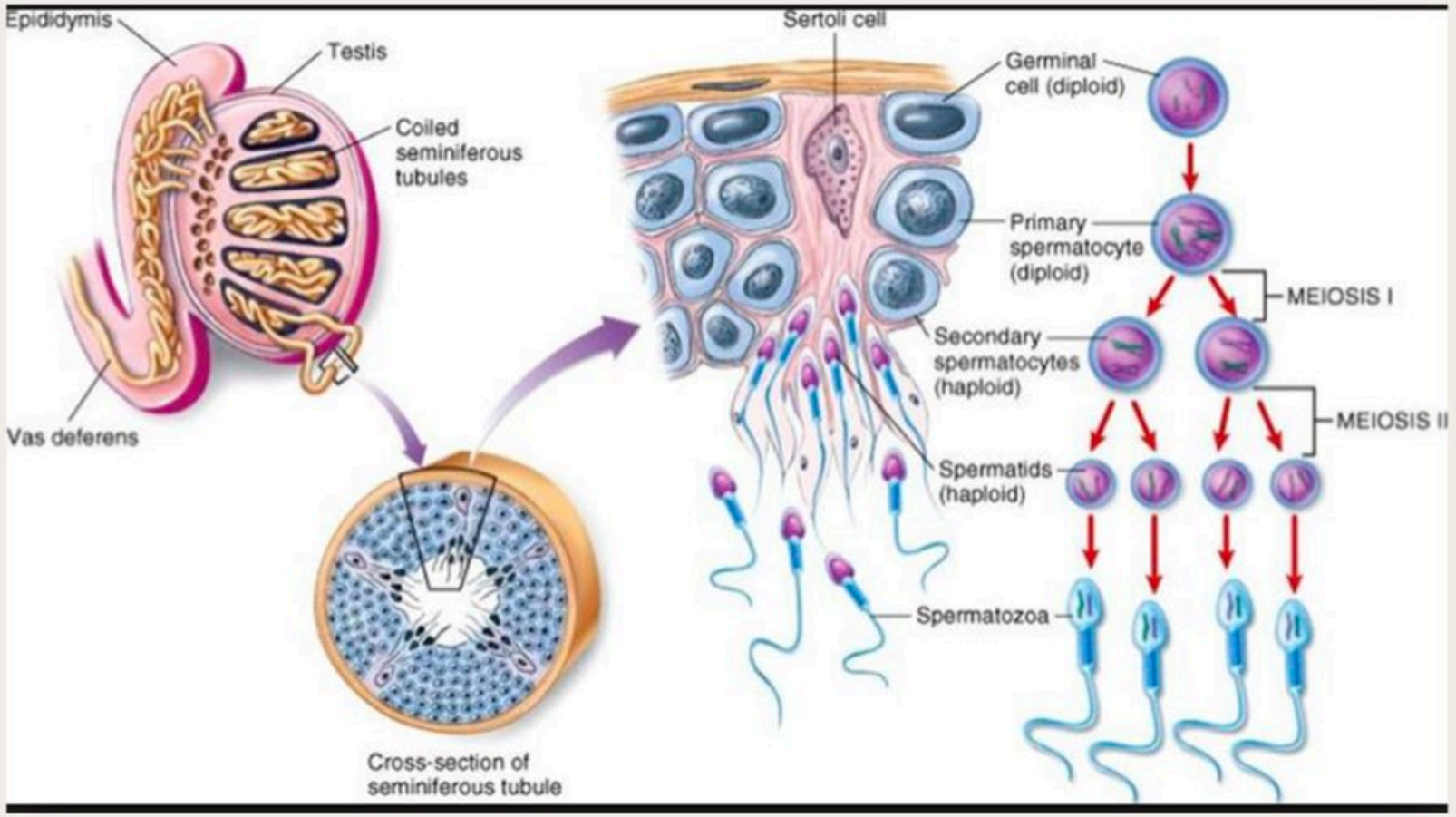
Heavenly Water

- **Females:** At the age of two times seven, or fourteen, Kidney Qi is full, Tian Gui arrives, the Ren Mai courses, and the Chong Mai becomes rich and full. When the menstrual cycle becomes regular, she is fertile.
- At the age of seven times seven, or forty-nine, the Ren Mai is deficient, the Chong Mai dwindles, Tian Gui stops, the body starts to weaken, and fertility comes to an end.
- **Males:** At the age of two times eight, or sixteen, Kidney Qi and reproductive Essence are full and ready to discharge: Tian Gui has arrived. At this point, if the male and the female unite, they can produce a child.
- At the age of eight times eight, or sixty-four, reproductive Essence dwindles, the Kidneys and the body as a whole become weak, teeth and hair fall out, and Tian Gui comes to an end.

Fertility: Medical Perspective



Fertility:
Medical Perspective



Fertility: Medical Perspective

Male Reproductive Health

- Sertoli cells (FSH stimulated) = nourish the maturing sperm, barrier between blood and testes.
- Leydig cells (LH stimulated) = secrete testosterone, drives spermatogenesis
- Spermatogenesis takes approx 100 days
  - Sperm produced in testes
  - Matures in epididymus
  - Activated by fluid in prostate/seminal vesicles
- Semen should have alkaline pH to combat acidity of vagina (pH approx 7.7)

Fertility: Medical Perspective

- Scrotum and testes at a lower temperature than the rest of the body
- Testes will descend and contract in response to changes in temperature of the body and the environment
- Narrow range of temperature for ideal spermatogenesis to occur
- Approx 2-3 degrees C lower than body temperature (34 degrees C)
- Factors increasing scrotal/testicular temperature will have adverse effect on fertility
    - Sitting on heated floors/heated seats in cars
    - Tight fitting underwear
    - Bike riding

Fertility: Chinese Medical Perspective

Erections

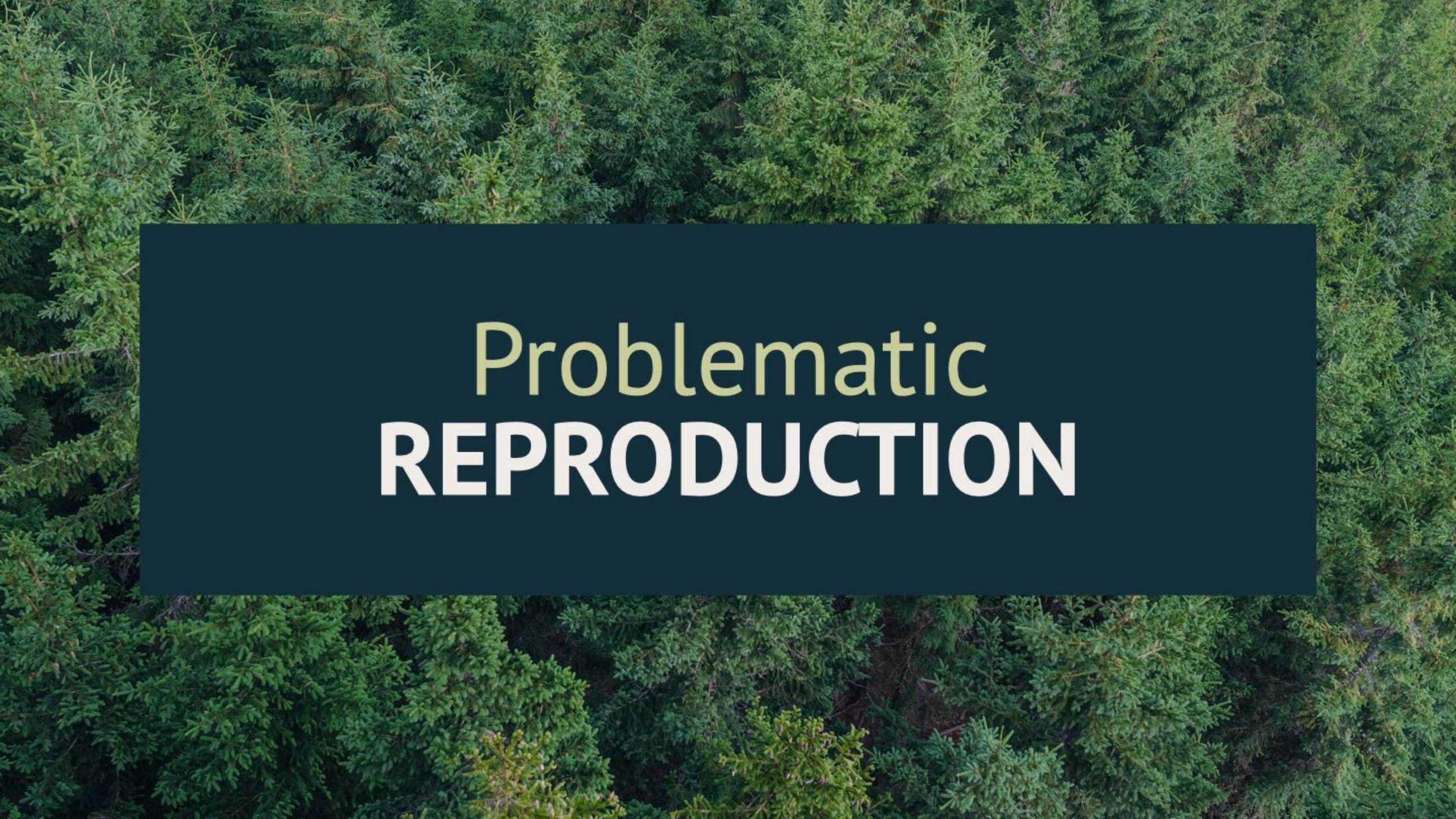
- Parasympathetic impulses from spinal cord to genitals and penis
- Arteries that supply blood to the penis dilate
- Blood fills small venous sinuses (sinusoids) and compresses the veins
- Blood flow from penis is reduced -> erectile tissue becomes enlarged and rigid
- Parasympathic effect causes mucous release from urethra and bulbourethra glands

Fertility: Chinese Medical Perspective

Penis = “ancestral sinew”

Erections

- Parasympathetic = Heart/Kidney communication, Lung Qi descent, Liver Qi, anxiety affecting Heart and Spleen
- Blood flow to penis = Liver Qi, Yang Ming, Heart & Pericardium,
- Increased pressure in penis = Kidney Yang, Ministerial Fire, Spleen


Problematic
REPRODUCTION

Problematic Reproduction

Menstrual Cycle

- Problems with the menstrual cycle
  - Too short: yin xu, yang xu,
  - Too long: blood xu, yang xu, cold
  - Painful: blood stasis
  - Too heavy: spleen qi xu, yang xu, blood stasis
  - Too light: blood xu, yin xu
  - Emotional/Teary/Angry: heart blood xu, qi stagnation, blood stasis,

Problematic Reproduction

Symptom checklist for men

- Lower back pain
- Sweating at night
- Penis cold to touch
- Digestive problems
- Asthma medication
- Fatigue
- Mood problems/depression

Male Fertility and TCM

Erectile dysfunction

- Psychology
- Atherosclerosis
- Diabetes
- Medications (beta blockers, antidepressants, antipsychotics, barbiturates)
- Recreational drugs (alcohol, tobacco, heroin, marijuana)
- Nerve problems
- Low testosterone, or high prolactin

Male Fertility and TCM

Erectile dysfunction

- Liver qi stagnation
- Excessive anxiety damaging Heart and Spleen
- Fear affecting Kidneys
- Kidney Yang Xu, lack of Ministerial Fire
- Kidney Yin and Jing Xu
- Spleen and Lung Qi Xu
- Damp Heat in Liver Channel
- Cold in Liver Channel
- Stasis of Phlegm and Bloo

Male Fertility and TCM

Erectile Dysfunction

- Morning erections?
- Masturbation
  - Can achieve an erection?
  - Can ejaculate?
- Gets hard then loses erection?
- Doesn’t get hard enough
- Libido?
- Wet dreams? Sexual dreams?

EVERYTHING IS FINE

UNTIL IT'S NOT

—

ALWAYS sight the sperm results for yourself

The sperm is important.

Don’t give the guy a free pass.

He needs to be tested

DIAGNOSIS

Yang Problems	Yin Problems	Qi/Blood Insuffiency	Qi/Blood Stagnation
Hypothyroid Vit D Low sodium	Low cholesterol Low potassium	Hypothyroid Low liver function	High platelets
Low ferritin Clotting factors	Autoimmune	Low ferritin	Autoimmune, Clotting factors
Fibroids, Cysts, Endo	Small ovaries Immature follicle Thin lining	Small ovaries Immature follicle Thin lining	Endo, NK cells
Low motility	Low sperm count Poor morphology Sperm antibodies	Low sperm count	Poor morphology Sperm antibodies

Problematic Reproduction

Female factors

- Not ovulating: cysts, PCOS, low oestrogen, other hormone problems
- Tubes: blocked, scarred, removed
- Problem with lining/implantation: endometriosis, fibroids, polyps, lining too thin, NK cells
- Structural problems with uterus: bicornate, septate, adhesions
- Miscarriage: low progesterone, immune factors, clotting factors, DNA problems

Problematic Reproduction

Male factors

- Abnormal forms
- Triple factor male sub fertility (Sperm reference ranges have plummeted in past 15 years. Total Number of Viable sperm has decreased 99% since 2000)
- Fertilisation problems
- Antibodies
- DNA problems
- Structural problems


FERTILITY
TESTING

Integrative TCM Fertility - TESTING

Conventional Blood Tests

- **Both partners:** - TSH, Vitamin D, Ferritin, U&E, Liver function, CBC, Cholesterol
- Female blood hormone profile (FSH, LH, DHEA etc), AMH
- Semen analysis, male blood hormone profile, sperm antibodies
- Clotting factors (including MTHFR for **BOTH PARTNERS**), Immune Factors, Genetic testing

Conventional Investigations

- **Ultrasound**
- **Laparoscopy**
- **Hysteroscopy/Uterine biopsy**

Functional Tests

- **Saliva hormone profile, Stool test, Pyroluria,**
- **Zinc/Copper/Caeruloplasm, Homocysteine, SAM:SAH**

Hormone Testing

Hormone Testing

- Oestrogens & Progesterone
- Testosterone, DHEA, Cortisol
- Hormone metabolites
- Thyroid
- Insulin
- SHBG
- Cholesterol

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Blood vs Saliva vs Urine

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Blood vs Saliva vs Urine Hormone

- **Blood:** total serum values. Calculated free hormone levels (SHBG, albumin). E1 and E3 not routinely performed. General hormonal overview inc thyroid, pancreas, pituitary.
- **Saliva:** steroid hormones (E1, E2, E3, Progesterone, testosterone, cortisol) Melatonin. Monitor diurnal patterns and free hormone levels
- **Urine:** Metabolite analysis. Pathway analysis. Assess detoxification, cancer risk. 24hr urine equivalent to dried spot urine. (1)

(1) Newman, M., Pratt, S.M., Curran, D.A. et al. Evaluating urinary estrogen and progesterone metabolites using dried filter paper samples and gas chromatography with tandem mass spectrometry (GC–MS/MS). BMC Chemistry 13, 20 (2019).

Estrogen

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Estrogen

High oestrogen (<200pmol/L on day 2, >400 nmol/L in luteal phase)

- Increased synthesis
- Reduced clearance (detox, elimination)

Signs of high oestrogen

- Elevated ESR (>15) in the absence of inflammation or autoimmunity
- High-normal platelets (>250)
- Elevated copper (>20) without elevated CRP due to mobilisation of copper from liver in high oestrogen state
- Low FSH (<3IU/mL) on day 2
- Raised homocysteine (>8)

Estrogen

Low oestrogen

- Decreased synthesis
- Increased clearance (detox, elimination)

Signs of low oestrogen

- Recurrent UTI (1)

(1) Wang C, Symington JW, Ma E, Cao B, Mysorekar IU. Estrogenic modulation of uropathogenic Escherichia coli infection pathogenesis in a murine menopause model. Infect Immun. 2013 Mar;81(3):733-9.

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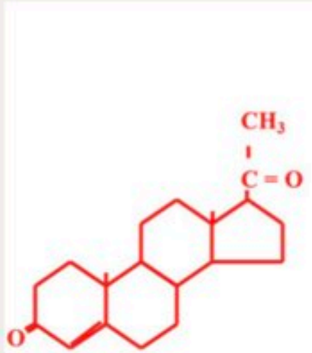
Progesterone

Progesterone

- Produced in corpus luteum
- Small amounts produced in adrenal gland (zona glomerulosa)
- Counterbalances oestrogen
- Supports pregnancy, (endocrine + immunomodulatory roles)

Low progesterone (7dpo/“day 21” <30nmol/L)

- PMS
- Miscarriage risk
- Breast cancer risk
- Uterine fibroids
- Dysfunctional uterine bleeding



Progesterone

Progesterone is a key to:
Reproduction
Birth control
Female and male secondary sexual characteristics
Salt and water balance, regulation of blood pressure
Stress adaptation
Thermoregulation
Protection against tumors
Neurogenesis and neuroprotection

Nagy B, Szekeres-Barthó J, Kovács GL, Sulyok E, Farkas B, Várnagy Á, Vértes V, Kovács K, Bódis J. Key to Life: Physiological Role and Clinical Implications of Progesterone. Int J Mol Sci. 2021 Oct 13;22(20):11039.

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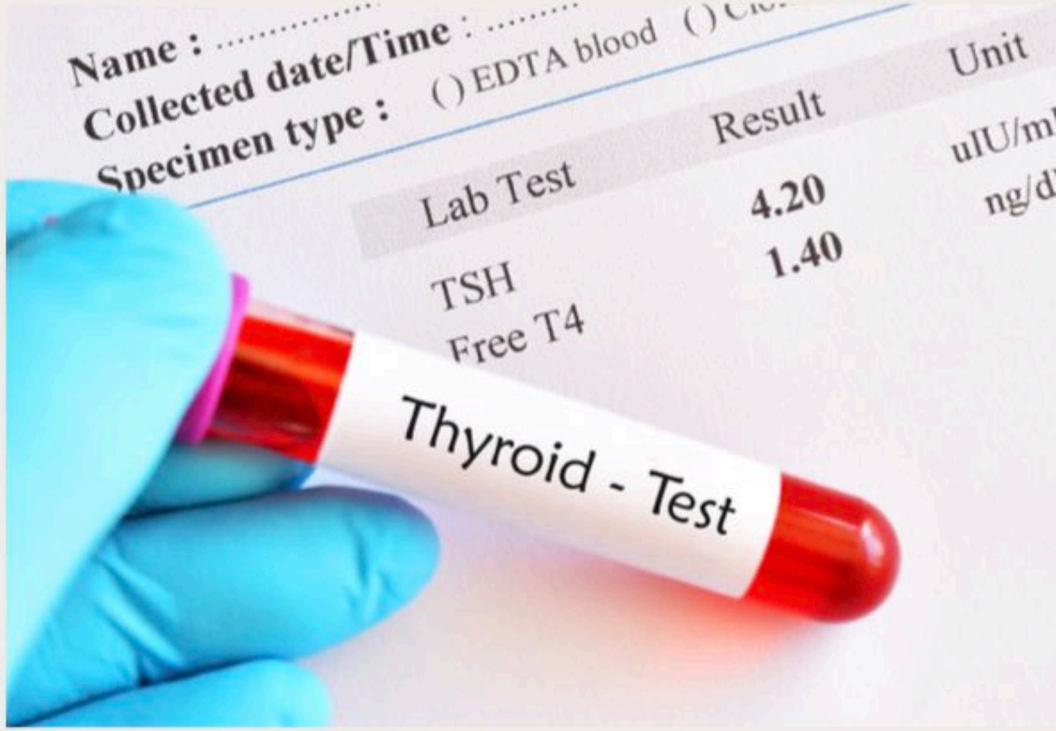
Thyroid

Thyroid

Ideal Reference Range: **TSH: 0.5-2.0 mU/L**
fT4: 15-20 mmol/L
fT3: 4.5-6.0 mmol/L



- Low fT3/low-normal fT3 - carbohydrate restriction, calorie restriction, previous anorexia nervosa.
- Look for low-normal sodium, or overt hyponatremia (1)
- Subclinical hypothyroid higher risk for hypercholesterolemia (2), hypertension (3), insulin resistance (4), depression (3)
- 34% PCOS have elevated anti-TPO (5)
- Increased risk NAFLD, not corrected by thyroid hormone therapy (6)
- Estrogen increases thyroxine binding globulin

Thyroid

(1) Nagata T, Nakajima S, Fujiya A, Sobajima H, Yamaguchi M. Prevalence of hypothyroidism in patients with hyponatremia: A retrospective cross-sectional study. PLoS One. 2018 Oct 11;13(10):e0205687.

(2) Rahbar AR, Kalantarhormozi M, Izadi F, Arkia E, Rashidi M, Pourbehi F, Daneshifard F, Rahbar A. Relationship between Body Mass Index, Waist-to-Hip Ratio, and Serum Lipid Concentrations and Thyroid-Stimulating Hormone in the Euthyroid Adult Population. Iran J Med Sci. 2017 May;42(3):301-305.

(3) Peterson SJ, McAninch EA, Bianco AC. Is a Normal TSH Synonymous With "Euthyroidism" in Levothyroxine Monotherapy? J Clin Endocrinol Metab. 2016 Dec;101(12):4964-4973.

(4) Gawron IM, Baran R, Derbisz K, Jach R. Association of Subclinical Hypothyroidism with Present and Absent Anti-Thyroid Antibodies with PCOS Phenotypes and Metabolic Profile. J Clin Med. 2022 Mar 11;11(6):1547

(5) Sharma M, Modi A, Goyal M, Sharma P, Purohit P. Anti-thyroid antibodies and the gonadotrophin profile (LH/FSH) in euthyroid polycystic ovarian syndrome women. Acta Endocrinol (Buchar). 2022 Jan-Mar;18(1):79-85.

(6) Almomani A, Hitawala AA, Kumar P, Alqaisi S, Alshaikh D, Alkhayyat M, Asaad I. Prevalence of hypothyroidism and effect of thyroid hormone replacement therapy in patients with non-alcoholic fatty liver disease: A population-based study. World J Hepatol. 2022 Mar 27;14(3):551-558.

Insulin

Insulin

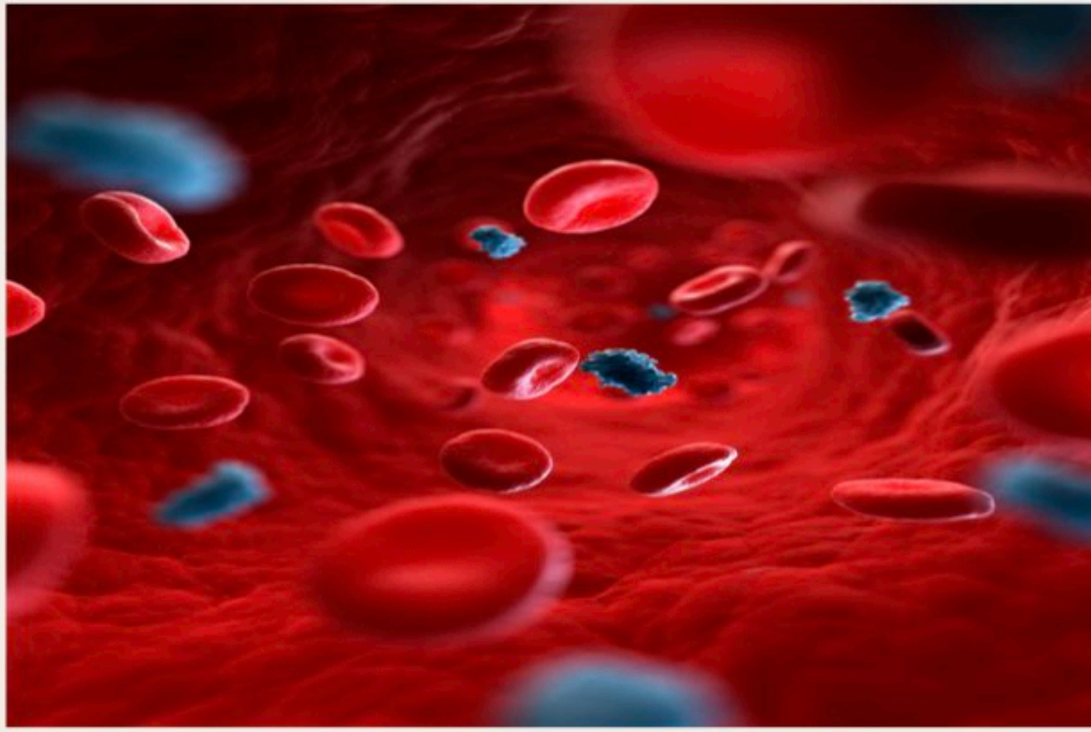
Ideal Insulin (fasting) <10 mU/L

HOMA-IR <2 (Ideal <1)

HOmeostatic **M**odel **A**ssessment for **I**nsulin **R**esistance

Insulin resistance linked with:

- PCOS
- Hypothyroidism (esp low fT3)
- Cardiovascular disease
- Elevated triglycerides (ideal <1.0 mmol/L)



(1) De Paoli M, Zakharia A, Werstuck GH. The Role of Estrogen in Insulin Resistance: A Review of Clinical and Preclinical Data. Am J Pathol. 2021 Sep;191(9):1490-1498

SHBG

SHBG

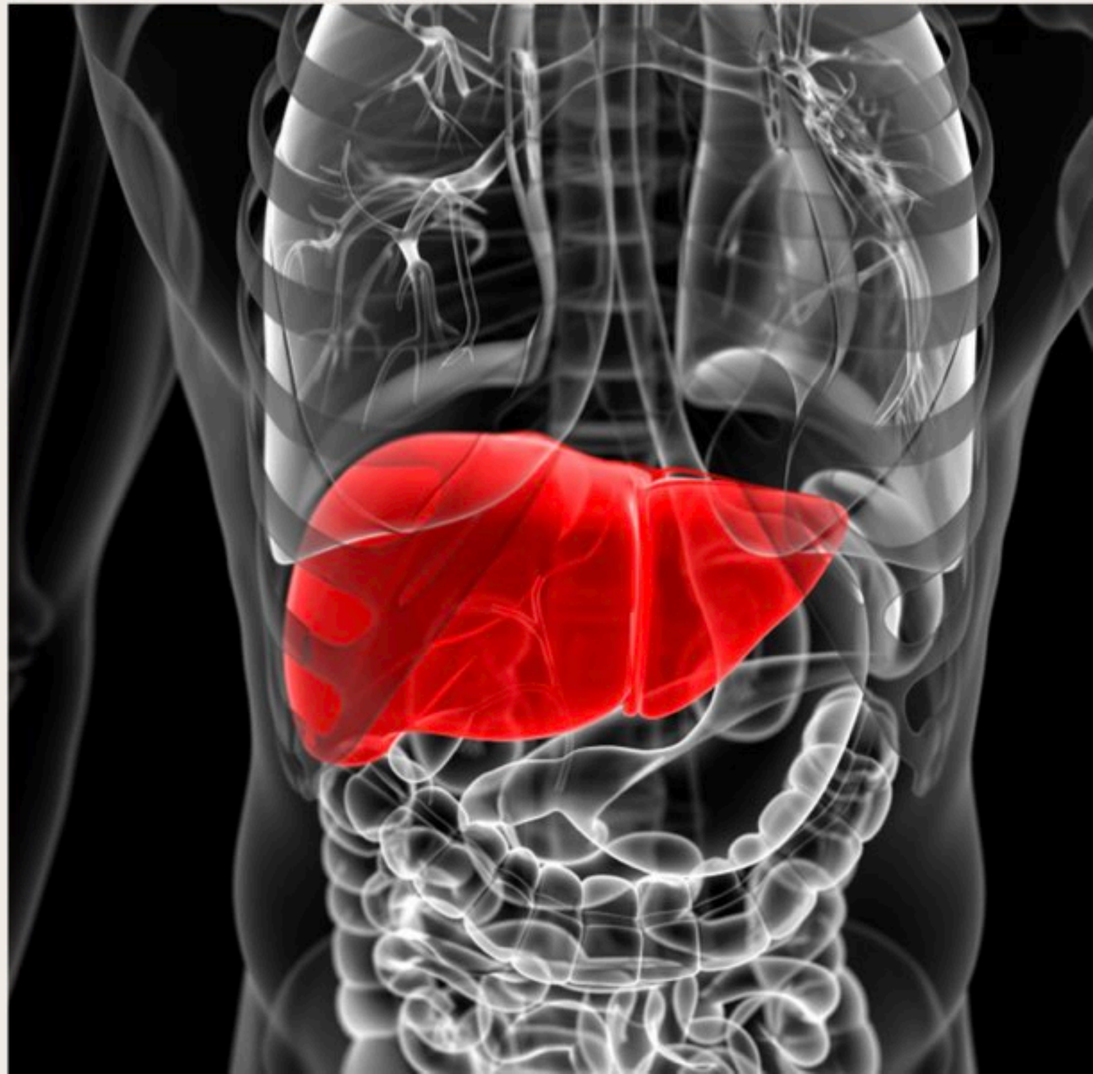
Protein produced in the liver

Not as sensitive to hormonal fluctuations throughout the cycle

Ideal 55-85 mmol/L in women

Higher at menopause

Calculated Free Testosterone
Free Androgen Index



SHBG

Estrogen is prime driver of SHBG levels in pre-menopausal women

- OCP
- Pregnancy
- High oestrogen conditions
- Visceral adipose tissue
- Age 70+

Other drivers of SHBG levels:

- Thyroid
- Iron overload/high ferritin
- Low calorie diets
- High fibre diet
- Testosterone

SHBG

Causes of low SHBG:

- PCOS
- Hypothyroid
- Visceral Adipose Tissue
- Carbohydrates
- Insulin resistance
- Inflammation
- Saturated fat
- Alcohol

SHBG

Low SHBG associated with:

- 5x higher risk of Gestational Diabetes if SHBG < 64.5 mmol/L (1)
- gestational diabetes
- PCOS
- Breast cancer

High SHBG (relative androgen deficiency):

- Hair loss

(1) Hedderson, M et al. 2014. Prepregnancy SHBG concentrations and risk for subsequently developing gestational diabetes mellitus. Diabetes Care. 2014;37(5):1296-303.

Hormonal “Signposts”

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CHOLESTEROL

What does CHOLESTEROL do?

- Structural component of cell membranes
- Precursor to vitamin D
- Precursor to hormones - esp steroid hormones
- Recycled by liver > bile acids > 90%+ reabsorbed in intestines

CHOLESTEROL

Blood Test Results

LIPIDS (serum/plasma)			
Cholesterol	4.4	mmol/L	<5.5
Triglycer.	1.1	mmol/L	<1.7
HDLC	1.60	mmol/L	>1.00
LDLC	2.3	mmol/L	<3.5
LDLC/HDLC	1.4	Ratio	<3.5
Chol/HDLC	2.8	Ratio	<4.5

CHOLESTEROL

Blood Test Results

Test Name	Result	Units	Reference Interval
S Cholesterol:	5.3	mmol/L	3.5 - 5.5
S Triglycerides:	0.5	mmol/L	<1.5
S HDL-Cholesterol:	2.33	mmol/L	>1.20
S LDL-Cholesterol:	2.7	mmol/L	<3.5
Chol/HDLC	2.3		<4.5
Non HDL Cholesterol	3.0	mmol/L	<3.9

Comments

TARGET LEVELS:
The National Vascular Disease Prevention Alliance (NVDPA) treatment target levels for high risk people (known coronary heart and other arterial disease, diabetes, chronic renal failure, Aboriginal and Torres Strait Islander peoples) are:

Total Cholesterol	<4.0 mmol/L
HDL-Cholesterol	>=1.00 mmol/L
Fasting Triglycerides	<2.0 mmol/L
Non-HDL Cholesterol	<2.5 mmol/L

Increased non-HDL Cholesterol is a significant marker for subclinical atherosclerosis (ref: Cardiology Today 2013; 3(2) : pp25-27).

HORMONAL SIGNPOSTS: CHINESE MEDICINE

Where to find evidence of cold

- Low sodium <140 mmol/L
- Low chloride <100 mmol/L
- High TSH >2.0 mU/L
- Low fT4 <15.0 pmol/L
- Low fT3 <4.5 pmol/L
- High rT3 >450 pg/L
- Low FSH <2.8 IU/mL
- Low lymphocytes <30%
- Low transferrin TRF <2.0 g/L

HORMONAL SIGNPOSTS: CHINESE MEDICINE

Where to find evidence of infection

- WBC elevated >6.5 x10^9/L
- Elevated monocytes >5% WBC
- Presence of eosinophils
- Elevated lymphocytes >40%
- Elevated neutrophils >65%
- Low globulin <30 g/L
- High globulin >35 g/L
- High protein >74 g/L
- High urea >6.1 mmol/L
- Low platelets <150 x10^9/L

HORMONAL SIGNPOSTS: CHINESE MEDICINE

Where to find evidence of LJ inflammation

- ESR
- CRP
- Ferritin
- ANA
- Presence of basophils and/or eosinophils
- FSH > 9 IU/mL
- Urea > 6.1 mmol/L
- eGFR <80
- Low potassium <4.3 mmol/L
- High anion gap >16
- Low magnesium <0.95 mmol/L

HORMONAL SIGNPOSTS: FUNCTIONAL MEDICINE

Where to find evidence of Hormonal Imbalance

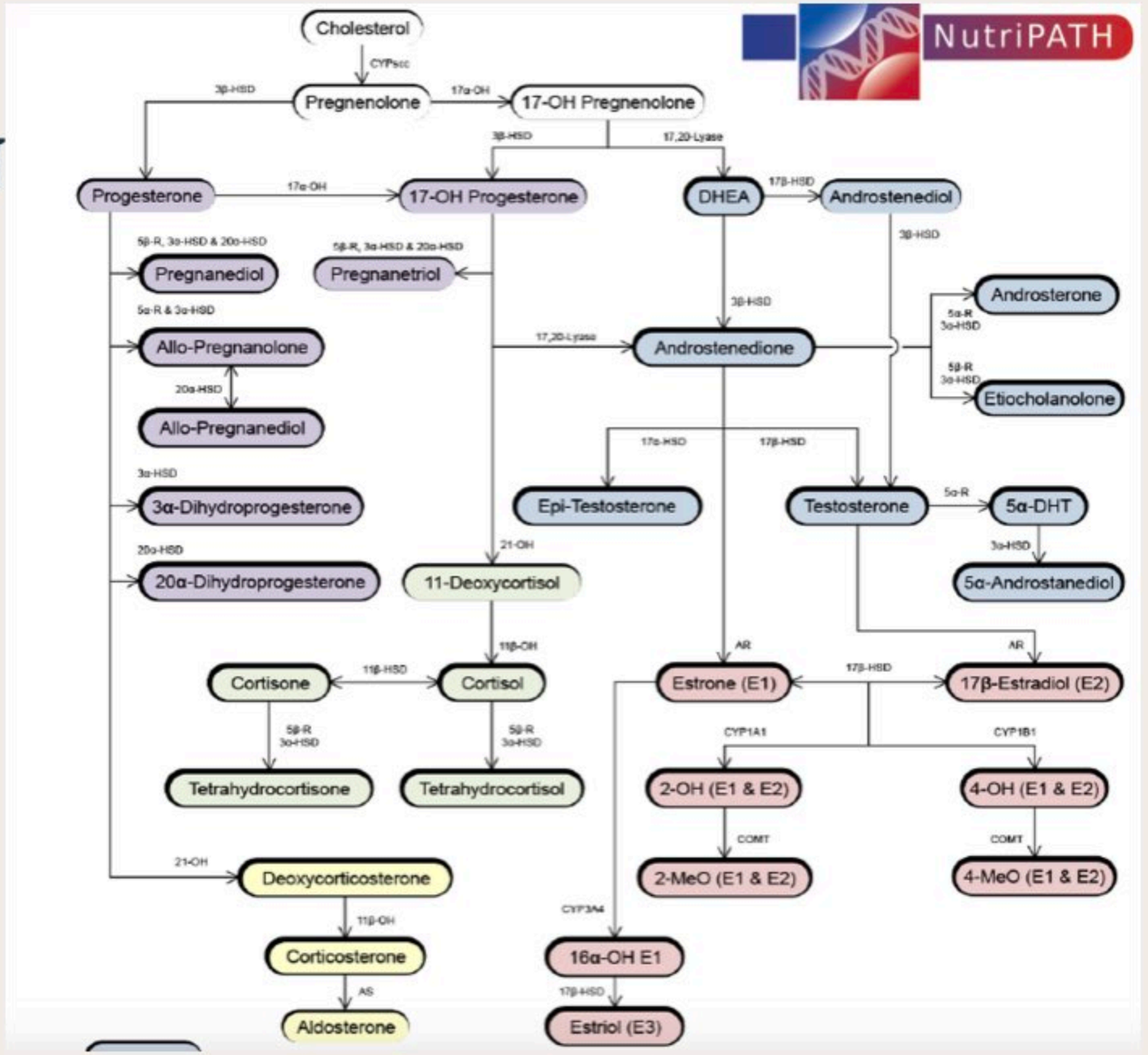
- Reproductive hormones (DHEA, FSH, LH, Prolactin, Progesterone, Oestrogen, Testosterone, SHBG)
- Thyroid hormones (TSH, fT4, fT3)
- High homocysteine >8.0
- Low homocysteine <6.0
- Fasting glucose >4.9 mmol/L
- HbA1C >5.7%
- Fasting Insulin >4 mIU/L
- Low cholesterol <4.5 mmol/L
- High cholesterol >6.0 mmol/L
- Low sodium <140 mmol/L

HORMONAL SIGNPOSTS: FUNCTIONAL MEDICINE

Where to find evidence of Hormonal Imbalance

- Antibodies (thyroid, ANA)
- NK cells (uterine biopsy) - esp if any signs or family history of autoimmune or recurrent miscarriage
- Stool test
- Urinary indians test
- Saliva Hormone profile
- Zinc deficiency (plasma zinc)
- Excess copper (test caeruloplasm and serum copper)

HORMONE PRODUCTION



SEMEN ANALYSIS

Specimen:		SEMEN FOR FERTILITY ANALYSIS		
Time of collection :		0910		
Time of examination:		1128		
Appearance:		Normal		
Volume:		3 ml	(>1.5)	
Motility:		59 %	(>40)	
Sperm concentration:	L	14 X10^6/ml	(>15)	
Forward progression:		62 %	(>32)	
Morphology (%Normal):	L	4 %	(>4)	

SEMEN ANALYSIS

Abstinence	7	(2 - 7)	days
Volume	11.8	(> 1.4)	mL
pH	8.1	(> 7.2)	
Concentration	88.2	(> 14.9)	x10 ^6 /ml
Sperm / Ejac.	1040.8	(> 39.9)	x10 ^6
Motility			
Progressive	58	(> 32)	%
Total Motile	64	(> 40)	%
Motile Count	666.1		x10 ^6
Morphology			
Normal Forms	15	(> 4)	%
Vitality	80	(> 58)	%
WBC	0	(< 10)	x10 ^5 /ml

Sperm Antibodies

MAR (Direct) **DETECTED**

Binding levels: IgG 83% Areas: Head, Tailtip

Binding levels: IgA 8% Areas: Tailtip

IgA antibodies result not clinically significant.

IgG antibodies result highly clinically significant

Classification

6352978 Semen parameter(s) within normal range(s).

SEMEN ANALYSIS

1. Semen Analysis	Results	Reference
Days of abstinence	5	2 - 5
Viscosity (cm)	0	< 2
Agglutination (1-4 degree)	0	<2
Volume of semen (ml)	4.1	>1.5
Sperm concentration (million/ml)	131	>15
Total sperm motility (%)	54	>40
Forward progression (%)	42	>32
Normal sperm morphology (%)	5	>4

SEMEN ANALYSIS

Specimen:	SEMEN FOR FERTILITY ANALYSIS		
Time of collection :	0935		
Time of examination:	1100		
Appearance:	Normal		
Volume:	3	ml	(>1.5)
Motility:	76	%	(>40)
Sperm concentration:	203	X10^6/ml	(>15)
Forward progression:	81	%	(>32)
Morphology (%Normal):	26	%	(>4)

Lower reference limits as per WHO Guidelines 5th Ed 2011.

Semen samples for fertility assessment should be examined within two hours.

TEST RESULTS:
Chinese Medicine Perspective

Testing: How to interpret results

Female blood hormone profile

- FSH - high FSH - Heat due to Blood Xu or Yin Xu
- LH - high LH - Qi stagnation, Damp, Phlegm
- Estrogen
  - low = Blood or Yin Xu
  - high = Blood Stagnation, Qi Stagnation
- Progesterone - low - Yang Xu, Blood Xu
  - >30 on day 7 after ovulation
- DHEA
  - low DHEA = Kidney Yang or Jing Xu
  - high DHEA = Yin Xu Heat, Qi Stagnation.
- AMH
  - Low AMH = Kidney Jing lacks “vigour”
  - High AMH = Dampness, Qi Stagnation

TEST RESULTS:
Functional Medicine Perspective

Testing: How to interpret results

- Ultrasound
  - Free Fluid in the Pouch of Douglas (endo, PCOS)
  - Follicles in ovary
- Saliva hormone profile
  - Same implications for blood hormones. Levels are more relevant for what is happening at tissue level. DHEA should always be tested in blood, saliva is a guide only
- Stool test
  - Especially useful for investigating autoimmune and recurrent miscarriage.
- Pyroluria
  - Zinc deficiency, has big impact on egg quality, sperm quality, hormonal balance, immune function
- Zinc/Copper/Caeruloplasm
  - Excess copper, copper imbalance can cause oestrogen dominance
- Homocysteine
  - Indication of inflammation, potentially not enough folate or choline, risk of down syndrome or other DNA/chromosome problems
- SAM:SAH
  - Shows problems with methylation, risk of down syndrome or DNA/chromosome problems

Integrative TCM Fertility - TESTING

Testing: How to turn those insights into treatment

- General rule: nutrient deficiency best addressed with giving that nutrient + address Spleen or Kidney deficiency
- Everything else start with Chinese medicine first
- Becomes obvious very quickly what/if anything else remains to be addressed

Treatment

Treatment Strategies

My general approach:

- See both him and her
- Go over all tests. Find if anything has been missed
- Start with a very comprehensive Chinese med assessment and diagnosis
- BBT charting for both him and her
- Chinese herbs and acupuncture for both him and her
- Nutrition changes for both. Basics of water, regular meals, bedtime etc
- Identify and optimise nutrient deficiencies and imbalances
- Identify and treat any infections/overgrowth
- Get as close to a “perfect period” as possible.

Treatment Strategies

- Natural medicine in general still has a mostly female focused approach
- Fertility issues in my clinic is now at least 50/50 male and female factor.
- Male factors generally under tested, under diagnosed, and under treated. Misclassified as “unexplained infertility”. Or worse still - diagnosed as “old eggs” or some other female condition.
- Women generally have had lots of testing (not necessarily all the right ones).
- Many women in my clinic have often previously self prescribed natural medicines (wrong herbs/supps or wrong dose)

Treatment Strategies

Female factors

- Blood deficiency
- Yin deficiency
- Blood stagnation
- Cold in uterus
- Damp (+/- heat or cold) in LJ
- Yang deficiency
- Gu syndrome
- Jing deficiency
- Heart-Uterus (Bad mai) not connected

Treatment Strategies

- Acupuncture 1-2 times per week for both partners until 12 weeks pregnant
- Sometimes more during critical phases of treatment (eg PMS, period pain, ovulation)
- It's critical not to under-treat your patients
- Treatment timeframes can sometimes be extended with the use of supplements and herbal medicines

Treatment Strategies

Natural Fertility Treatment: What you need to know

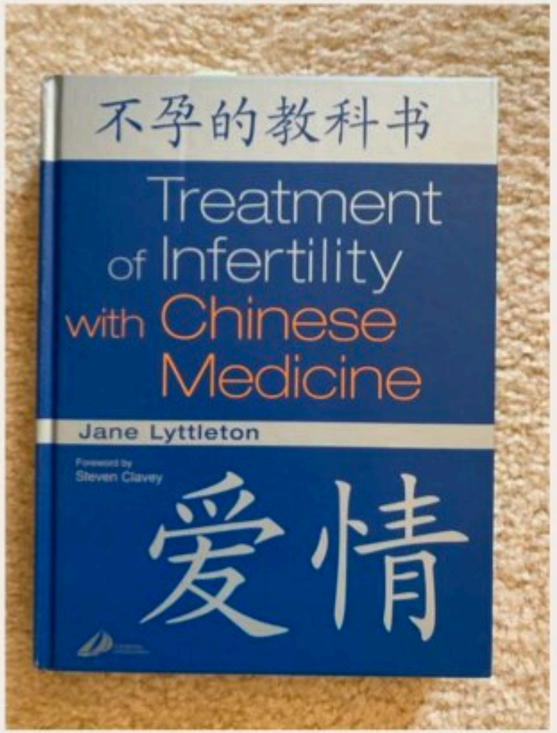
- Women - establish a good pattern with cycle
  - Good thick lining with no clots
  - Minimal or zero period pain
  - Minimal PMS symptoms
  - No symptoms mid-cycle
  - 3-5 days of obvious fertile mucous leading up to ovulation
  - No digestive symptoms
  - Biphasic BBT chart with stable temps in both follicular and luteal phase
  - BBT temperature comes down fully on day 1 to follicular phase baseline temp

Treatment Strategies

Natural Fertility Treatment: What you need to know

- Men - establish a good foundation of health
  - Morning erections
  - Semen volume 5ml+
  - No digestive symptoms
  - Stable BBT at least 36.5
  - Feeling invigorated and youthful
  - Regular turnover of sperm to help with morphology
  - At least 100 days following “the program”

Treatment Strategies



Natural Fertility Treatment: Timing herbs and supplements

- Jane Lyttleton's book is a good foundation for general fertility protocol for women. Tao hong si wu tang during period. Gui shao di huang during follicular. You gui wan or Yu lin zhu during luteal phase.
- During period: Clear out any stagnation, best time for clearing blood stasis.
- Follicular: support yin and blood for good lining and egg ripening. Also supporting future eggs.
- Ovulation: need enough Yang and free flow of Qi to ovulate. Tonify deficiency first before trying to "force" ovulation
- Luteal: support Yang and holding. Calm shen. **Assume pregnancy.**

Treatment Strategies

“Old Eggs”

- Overall strategy is to improve mitochondrial function of oocytes and ovaries, and delivery of oxygen and nutrients to ovaries.
- Improving blood flow to uterus, reducing inflammation and increasing overall nutrition and health will improve egg quality.
- CoQ10
- VitC
- VitD
- VitE
- Alpha Lipoic Acid
- NAC
- Myo-Inositol

Treatment Strategies

“Old Eggs”

- Randine Lewis video on youtube with femoral artery massage
- Tonify qi and blood
- Invigorate qi and blood in pelvis/LJ to clear any stasis
- Clear damp (esp if signs of insulin resistance)
- Clear toxins (esp if infection is present)
- Acupuncture and herbal medicine strategies that treat presenting patterns are most appropriate

Treatment Strategies

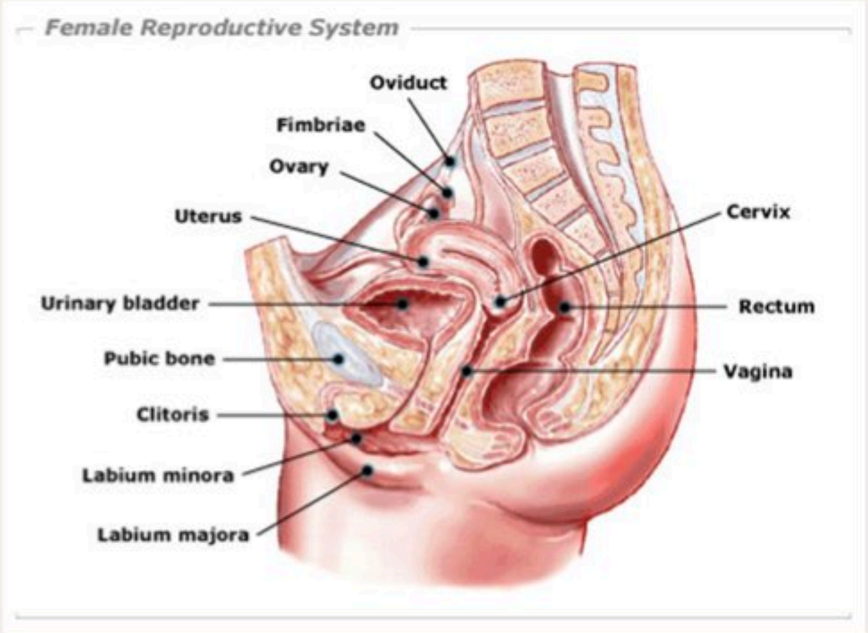
Lots of things can affect fertility, including a**nything that is affecting any part of the lower jiao.**

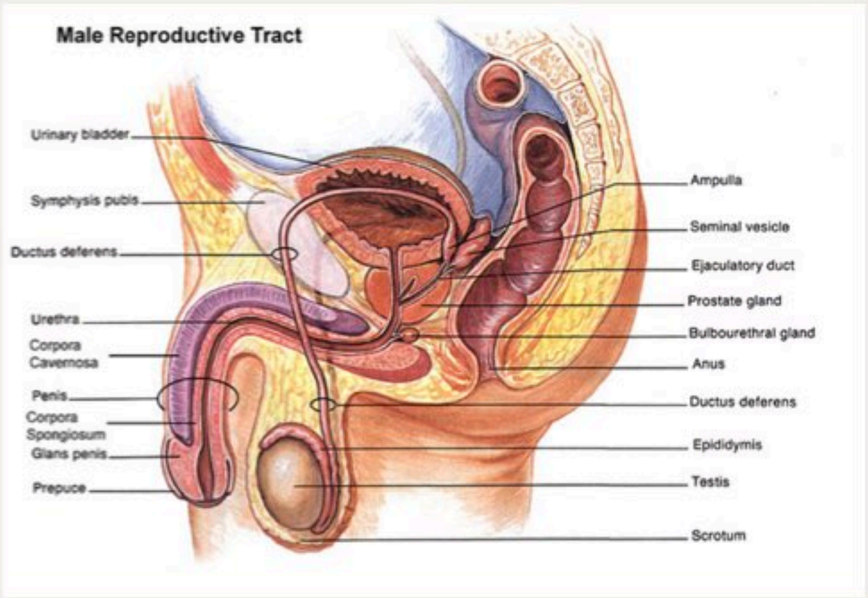
This means - low grade digestive infections, or any type of gut dysbiosis **WILL affect fertility.**

Sperm are particularly vulnerable to infection.

Growing babies are also particularly vulnerable to infection

•CLARE PYERS•





Treatment Strategies

Interference with LJ

- Scars - even small ones. Test the skin sensation
- Cold:
  - belly - check above and below navel
  - butt
  - sides
  - hands & feet
- Infection:
  - overt dysbiosis, celiac, crohn's, fructose intolerance, IBS, ulcerative colitis, chronic bowel problems
  - tendency for thrush (even if only once a year)
  - tendency for UTIs (more than 2 in past 5 years, or 1 in past 12 months)
- Inflammation:
  - hemorroids
  - any rash in genital area
  - previous abnormal pap smear
  - constipation (less than daily BM)

Treatment Strategies

Interference with LJ - Infection

- Tendency for thrush
  - Previous sexual abuse? Chong mai.
  - Candida? Often linked with chronic Yin Xu and Damp. Zhi bai di huang fits most presentations. Diet + Chinese herbs better than other approaches
  - Using soaps and deodorisers
- Tendency for UTI
  - Heat venting from Heart via SI and UB
  - Dysbiosis/Lingering pathogen in LJ. Often in bowel too.
  - Need strong herbs for this - one set for acute and another set for underlying/ lingering pathogens. Don't let this slide.
- Overt dysbiosis, IBD etc
  - Diet adjustments essential
  - Herbs may need to be long term. Can do gu formulas during pregnancy if need be
  - Chinese herbs better than other approaches

Treatment Strategies

Interference with LJ - Inflammation

- Hemorroids
  - must go gluten free. possibly also corn
  - low preservative low processed diet
  - witch hazel topically
- Genital Rash
  - food intolerances.
  - treat like eczema/dermatitis anywhere else - need to fix the gut
  - strong presence of Dampness, often confounded by Yin deficiency. Can be tricky to treat.
  - Also check sanitary products are low reactive.

Treatment Strategies

Interference with LJ - Inflammation

- Previous abnormal pap smear
  - Gu syndrome likely. Might need herbs all the way through first and second trimester
  - Higher chance of problems conceiving, miscarrying and potential genetic problems with baby unless genes switched off during egg maturation and sperm production time frames.
  - Be careful with tonic herbs
- Constipation (less than daily BM)
  - Can be gu syndrome. Overgrowth of bad bugs eg eubacterium, clostridium, (usually anaerobes)
  - Yang deficiency (low histamine) = poor bowel motility
  - Magnesium, vitamin C can be dosed to bowel tolerance
  - Dairy and gluten sensitivity is common

Treatment

BY PATTERN

Treatment Strategies

TCM Diagnosis - Liver Qi Stagnation

- Erectile dysfunction - performance related
- Headaches
- Irritability
- Digestive disturbances
- Insomnia
- Repressed emotions
- P: wiry
- T: dark red

Treatment Strategies

TCM Diagnosis - Liver Qi Stagnation

- Herbal formulas: Jia wei Xiao Yao san, Xiao Yao san, Yue ju wan, Si ni san
- Acupuncture: Liver 13, Liver 3, GB24, PC6, Sacral holes, Bl23, GB30, GB34

- Supplements: Magnesium, Acetyl L-Carnitine, MethylB12
- Lifestyle: Regular exercise and stretching. Meditation. Minimise snacking - eat 3 meals per day.

Treatment Strategies

TCM Diagnosis - Kidney Yang Xu/Lack of Ministerial Fire

- Low libido
- Limpness of erection
- Fatigue
- White facial complexion
- Dizziness
- Tinnitus
- Lower back and knee pain/aching
- Urinary frequency, maybe also dribbling
- P: weak
- T: pale, tooth marks, thin white coat

Treatment Strategies

TCM Diagnosis - Kidney Yang Xu/Lack of Ministerial Fire

- Herbal formulas: Zhen Wu Tang, You gui wan Er Xian tang, Shen Qi Wan + Tian Xiong San
- Acupuncture: Du4, Sacral holes, Bl23, Kid10, GB39. Moxa. Warm needles.

- Supplements: Deer velvet (lu rong), VitD, Tribulus
- Lifestyle: Gentle exercise - weights rather than cardio. Ensure adequate sleep and rest. Timing intercourse to avoid fatigue (no more often than every 2-3 days). Add extra salt to diet, focus on cooked foods and warming spices.

Treatment Strategies

TCM Diagnosis - Kidney Yin/Jing Xu

- High libido
- Erections not sustained
- Insomnia, copious dreaming, maybe wet dreams
- 5 palm heat
- Lower back and knee pain/aching
- Dizziness, tinnitus
- Scant, dark urine
- P: rapid, thin
- T: red, uncoated or thin yellow coat

Treatment Strategies

TCM Diagnosis - Kidney Yin/Jing Xu

- Wu zi yang zong wan (Alchemy Wild Oats)
- Liu wei di huang wan (Alchemy Cool and Moisten)
- Er Xian tang (Alchemy rewind)
- Supplements: Royal jelly, Melatonin, Zinc, VitC, VitE, D-Ribose
- Acupuncture: BL23, Kid3, Kid6, Kid2, Kid10, Du4, GB39
- Lifestyle: Gentle exercise - not strenuous. Intercourse no more frequent than every second day. Get to bed by 11pm latest. Encourage snacking throughout the day - carb+protein snack at bedtime to support Yin restoration and peaceful sleep.

Treatment Strategies

TCM Diagnosis - Damp Heat in Liver Channel

- Erection not hard enough
- Soreness or distention of inguinal region
- Acne
- Genitourinary tract infections
- Dribbling, incomplete or unsmooth urination
- Bitter taste in mouth
- Linked with alcohol intake
- P: rapid, slippery
- T: red, yellow coat

Treatment Strategies

TCM Diagnosis - Damp Heat in Liver Channel

- Long dan die gan tang
- Li dan pai shi wan (Alchemy Spring Clean)
- Supplements: Magnesium, NAC, B complex

- Acupuncture: GB34, Liv2, Liv5, Liv8, Liv13, Liv14, GB24, GB28, Tai Yang
- Lifestyle: avoid alcohol, reduce coffee, focus on fresh fruit and vegetables, small amount of organic meat, chicken or fish. Avoid produce sprayed with pesticides. Minimise chemical exposure. Regular exercise. Meditation.

Treatment Strategies

TCM Diagnosis - Cold in Liver Channel

- Shrinking and retraction of penis. Partial inability to achieve erection
- Symptoms worse with cold, relieved by warmth
- Pulling pain in testes
- Pain or strain to groin
- History of recurring genitourinary infections
- Work in cold environment
- Maybe constitutionally Yang xu
- Scrotum or penis cold to touch
- P: Slow
- T: Pale, white coat

Treatment Strategies

TCM Diagnosis - Cold in Liver Channel

- Nuan gan jian
- Yue ju wan
- Wu jin wan (Alchemy Smooth)

- Supplements: Tribulus, Deer velvet, Vitamin D, B complex, Iodine, NAC
- Acupuncture: Liv8, Liv5, Liv4, St30, Liv13, Liv12 (can do femoral artery massage). Moxa
- Lifestyle: Keep warm, nothing cold anywhere on, in or near body (includes all foods and drinks).

Treatment Strategies

TCM Diagnosis - Spleen Qi Deficiency

- Low libido
- Low sperm concentration and motility
- Premature ejaculation
- Poor appetite
- Bloating, flatulence
- Poor concentration, foggy head, poor memory
- P: slippery, soggy
- T: pale, teeth marks, wet coat

Treatment Strategies

TCM Diagnosis - Spleen Qi Deficiency

- Bu Zhong yi qi tang (Alchemy Lift Me Up)
- Gui pi tang (Alchemy Nourish)

- Supplements: B complex, CoQ10, HydroxoB12, Vitamin K, Vitamin A, NAC, Zinc
- Acupuncture: Sp3, Sp6, Ren6, St36, St8, St30, Sp4, PC6
- Lifestyle: avoid raw or rich and damp foods, keep emotions and politics away from eating time. Ensure to sit whilst eating. Regular movement during the day. Weight-lifting exercise with low-medium weights only (15+ reps). Encourage singing and meditation.

Treatment Strategies

TCM Diagnosis - Stasis of Phlegm and Blood

- Complete or partial inability to achieve erection
- Black facial complexion
- Purple lips
- Chest oppression and discomfort
- History of diabetes, heart disease, genital trauma
- Pain in genital area
- Overweight men
- Sperm antibodies
- P: rough, choppy or intermittent pulse
- T: purple, sublingual veins, maybe white coat

Treatment Strategies

TCM Diagnosis - Stasis of Phlegm and Blood

- Herbal formulas: Wu jin wan, Shao fu zhu yu tang, Wen Dan Tang
- Acupuncture: St40. Sp3, St36, Dai mai, Sacral holes, +/- Gb34, Liv2, Co11 +/- Moxa ren4, ren6

- Supplements: Choline, 5-MTHF, NAC, PEA
- Lifestyle: Regulate emotions. Regulate appetite. Avoid all processed foods, focus on fresh fruit and vegetables, fish and white meat. Regular exercise and movement is essential. Vigorous exercise is applicable: HIIT, spin, heavy weights.

Treatment Strategies

TCM Diagnosis - Kidney and Heart Qi Xu

- Complete or partial lack of erections
- Can be history of violence, trauma or abuse
- Frequent urination
- Palpitations
- Timid, doubting
- Sore lower back and knees
- Fatigue
- Maybe also poor memory, loose stools, digestive complaints if Spleen involved as well
- P: weak, thin
- T: thin white coat

Treatment Strategies

TCM Diagnosis - Kidney and Heart Qi Xu

- Herbal formulas: Tian wang bu xin dan, Er Xian tang
- Acupuncture: Kid24, 26, 27. Ren17. Hrt3. Kid3. Ren mai.

- Supplements: CoQ10, Maca, GABA, 5-HTP, L-theanine
- Lifestyle: Reduce emotional stress and worry. Gentle exercise - not strenuous. Get to bed by 11pm latest.

Men are not hairy women

•CLARE PYERS•

Treatment Strategies

How are you taking care of his shen?

- Confidently providing care
- Showing leadership and strength in your clinical decision making so he doesn't have to
- Show your understanding and consideration for his situation by creating a plan for each of his issues
- Explain how your plan addresses his issues

Treatment Strategies

TCM Diagnosis - Blood Deficiency

- Scant menstrual blood, maybe pale (sometimes normal or heavy flow)
- Fatigue
- Dry hair, skin, nails
- Insomnia (trouble getting to sleep)
- Pale complexion
- Dizziness
- Heart palpitations
- P: weak
- T: pale

Treatment Strategies

TCM Diagnosis - Blood Deficiency

- Herbal formulas: Ba zhen tang, Si wu tang
- Acupuncture:
  - Support earth element Sp6, Sp3, St36, St25.
  - Liver Blood Liv8, Liv13, Pc7, Pc3.
  - Heart blood Hrt3, Hrt7, Kid7, Kid3/10.
  - Previous eating disorders Kid16,21, Ren17, Ren15.

- Supplements: Melatonin, Maca, Iron, Multi mineral, 5-HTP, Glutathione, Vitamin A, Folinic Acid, Selenium
- Lifestyle: Ensure adequate calories and nutrients in the diet. Reduce emotional stress and worry. Regular movement during the day but avoid strenuous exercise (HIIT, endurance cardio).

Treatment Strategies

TCM Diagnosis - Yin Deficiency

- Scant menstrual blood, maybe bright red
- Symptoms worse at night - eg hot, thirsty, irritable, heart palms
- Dry hair, skin, nails
- Insomnia (trouble staying asleep)
- Malar flush
- Dizziness, tinnitus
- Scant urine
- P: thin, thready
- T: red or pink, peeled coat

Treatment Strategies

TCM Diagnosis - Yin Deficiency

- Herbal formulas: liu wei di huang wan, zhi bai di huang wan, zuo gui wan, gui shao di huang wan, er Xian tang
- Acupuncture:
  - Kid2, Kid6, Hrt7, Hrt3, Ren4, Kd27, Ren17, Bl23

- Supplements: Royal jelly, Zinc, Vit C, GABA, Vit E, Calcium
- Lifestyle: Ensure adequate calories and nutrients in the diet. Reduce emotional stress and worry. Gentle exercise - not strenuous. Get to bed by 11pm latest. Encourage snacking throughout the day: carb+protein snack at bedtime to support Yin restoration and peaceful sleep.

Treatment Strategies

TCM Diagnosis - Kidney Yang Xu/Lack of Ministerial Fire

- Low libido
- Fatigue
- Pale complexion
- Dizziness, Tinnitus
- Lower back and knee pain/aching
- Urinary frequency, maybe also dribbling
- Normal or heavy menstrual flow
- P: weak
- T: pale, tooth marks, thin white coat

Treatment Strategies

TCM Diagnosis - Kidney Yang Xu/Lack of Ministerial Fire

- Herbal formulas: Zhen Wu Tang, You gui wan Er Xian tang, Fu gui ba wei wan
- Acupuncture: Du4, Sacral holes, Bl23, Kid10, GB39. Moxa. Warm needles. Cup on navel and Moxa ren 8

- Supplements: Deer velvet (lu rong), VitD, Tribulus, iodine
- Lifestyle: Gentle exercise - weights rather than cardio. Ensure adequate sleep and rest. Stay warm. Add extra salt to diet, focus on cooked foods and warming spices.

Treatment Strategies

TCM Diagnosis - Kidney Jing Xu

- Low ovarian reserve
- Anovulation
- Scant menstrual flow
- Low libido
- Fatigue
- Pale complexion
- Dizziness, Tinnitus
- Lower back and knee pain/aching
- P: weak
- T: pale

Treatment Strategies

TCM Diagnosis - Kidney Jing Xu

- Herbal formulas: wu zi yang zong wan, fu gui ba wei wan, you gui wan, liu wei di huang wan
- Acupuncture: Kid3,6,7. Ren4,6. Moxa. Hrt3, 7. Kid16, 21.

- Supplements: Deer velvet (lu rong), VitD, Tribulus
- Lifestyle: Gentle exercise - weights rather than cardio. Ensure adequate sleep and rest. Stay warm. Add extra salt to diet, focus on cooked foods and warming spices.

Treatment Strategies

TCM Diagnosis - Heart-Uterus Bao Mai Not Connected

- Anovulation
- Amenorrhea, Irregular periods
- Scant menstrual blood
- Heart palpitations
- Stress, emotional distress
- P: weak in heart position
- T: red tip

Treatment Strategies

TCM Diagnosis - Heart-Uterus Bao Mai Not Connected

- Herbal formulas: gui pi tang, tian wang bu xin dan, suan zao ren tang
- Acupuncture: upper Kidney points - Kid24, 26, 27. Ren17. Hrt3. Kid3. Ren mai.

- Supplements: GABA, 5-HTP, L-theanine
- Lifestyle: Find joy in your life. Work on connection and intimacy in relationship. Gentle exercise - weights rather than cardio. Ensure adequate sleep and rest.

Treatment Strategies

TCM Diagnosis - Damp in Lower Jiao (+/- heat)

- Acne
- Genitourinary tract infections
- Tendency to thrush
- Bitter taste in mouth
- Loose bowels, smelly stools
- P: rapid, slippery
- T: red, yellow coat

Treatment Strategies

TCM Diagnosis - Damp in Lower Jiao (+/- heat)

- Herbal formulas: Long dan die gan tang, Li dan pai shi wan, Ba zheng san, Gui zhi fu ling wan
- Acupuncture: GB34, Lr2, Lr5, Lr8, Lr13, Lr14, GB24, GB28, Tai Yang. Sp3, St36, Dai mai, +/-Moxa ren4, ren6

- Supplements: Magnesium, NAC, B complex, Vitex, Chromium
- Lifestyle: avoid alcohol, reduce coffee, focus on fresh fruit and vegetables, small amount of organic meat, chicken or fish. Avoid produce sprayed with pesticides. Minimise chemical exposure. Regular exercise. Meditation.

Treatment Strategies

TCM Diagnosis - Blood Stasis (+/- Cold in Uterus)

- Strong period pain
- Dark facial complexion
- Purple lips
- Chest oppression and discomfort
- Reproductive autoimmune diagnosis (eg NK cells, antiphospholipid etc)
- P: rough, choppy
- T: purple or pale purple, sublingual veins, maybe white coat

Treatment Strategies

TCM Diagnosis - Blood Stasis (+/- Cold in Uterus)

- Herbal formulas: Wu jin wan, Shao fu zhu yu tang, Wen jing tang, di dang wan, tao hong si wu tang, dang gui shao Yao san.
- Acupuncture:
  - Chong mai Sp4, Kid9, Pc6, Kid16.
  - Xi cleft Sp8, Hrt5, Kid9, Kid8, Kid5. Du1.
  - Cup navel and Moxa ren8. See YouTube video
  - Warm needle on back shu points especially Bl23 and Du4.

- Supplements: Choline, 5-MTHF, PEA, CoQ10 (ubiquinol), fish oil, Castor oil (topically), Evening Primrose
- Lifestyle: Regulate emotions. Regulate appetite. Avoid all processed foods, focus on fresh fruit and vegetables, fish and white meat. Regular exercise and movement is essential. Vigorous exercise is applicable: HIIT, spin, heavy weights.

Treatment Strategies

Hormonal Interference

- Cosmetics, hair care, body cleansers
- Nail polish. Fake tan. Hair dye (including men!).
- All cleaning products including clothes washing powder/liquid, scented candles and other air scents
- Pesticides and other chemicals on food - higher in non organic animal products due to biological concentration
- Plastics - lunch containers, water bottles
- Heavy metals
- Tap water
- Flame retardants on furniture, electronic devices, (kids pyjamas!)
- Statins

Treatment Strategies

Hormonal Interference

- These chemicals are everywhere, impossible to avoid all of them. Can reduce exposure.
- Interfere with normal expression of Jing
- Cause Blood Stagnation, Yang Deficiency
- Avoidance of as many things as possible is critical
- Hard to treat due to constant exposure in daily life

Treatment Strategies

Hormonal Interference: How to spot it

- Signs of Blood Stagnation - headaches, painful periods, explosive anger
- Signs of impaired Yang - obesity, fluid retention, Dampness that's hard to shift
- Signs of Jing deficiency are harder to spot - fetal exposure in boys can change genital problems (smaller penis, undescended testes)

Treatment Strategies

Supplements: Minerals - throughout cycle

- **Zinc** - Kidney Jing and Qi, egg quality, hormone functioning, fertilisation, sperm count, sperm morphology, embryo longevity
  - 30mg+ picolinate, carnosine, amino acid chelate
- **Iron** - supports Qi and Blood, uterine lining
  - 25mg+ amino acid chelate, sulfate
- **Magnesium** - supports Liver Qi, sperm motility, sexual arousal,
  - 600mg+ amino acid chelate, malate
- **Selenium** - supports Liver Blood, hair, skin and nails
  - 200mcg+ selenomethionine
- **Iodine** - thyroid support, cysts, Yang tonic
  - 300mcg-3mg potassium iodide

Treatment Strategies

Supplements: Vitamins - throughout cycle

- **Folate** 500mcg - folinic acid (qi and blood tonic) or 5MTHF (qi and blood mover)
- **B12** 500mcg - adenosylcobalamin (qi and yang tonic) methylcobalamin (qi tonic) hydroxocobalamin (clears damp, tonify qi)
- **B complex** - general Qi tonic. Must use activated B vitamins
- **Vitamin D** - 4000IU per day. Yang tonic.
- **Vitamin C** 2g+ per day - egg quality, DNA fragmentation of sperm, supports adrenals
- **Vitamin K** - Sp Qi tonic. Stop bleeding.
- **Vitamin E** - stops free radical damage to sperm, improves fertilisation
- **Vitamin A** - 2000IU per day - healthy gene expression, embryonic development, immune function

Treatment Strategies

Other nutrients: Choline - throughout cycle

- Needed for preventing neural tube defects (Epidemiology. 2009 Sep;20(5):714-9. Choline and risk of neural tube defects in a folate-fortified population. Shaw GM, Finnell RH, Blom HJ, Carmichael SL, Vollset SE, Yang W, Ueland PM.)
- Helps baby's brain and spinal cord develop properly
- Required for sperm morphology, and motility (mitochondrial function)
- Low levels linked with fatty liver, breast cancer risk
- Difficult to get adequate dietary intake, main food sources eggs, meat, liver, peanuts, pasta, rice, fish, dairy products
- Minimum 450mg daily to support fertility, 980mg daily ideal during pregnancy

Treatment Strategies

Other nutrients - throughout cycle

- Glutathione - liposomal glutathione
- Resveratrol
- Deer velvet
- Adrenal cortex
- NAC
- Progesterone, DHEA, pregnenelone
- Fish oil - sperm morphology (head defects), autoimmune problems (NK cells).
- CoQ10 600mg+ - egg quality, sperm quality
    - Ubiquinone = yang tonic, qi tonic
    - Ubiquinol = qi moving, blood cooling

Treatment Strategies

Supplements

- Western herbs
  - Vitex = disperses damp, moves qi, supports yang
  - Tribulus = tonify Yang, tonify qi, can stagnate
  - Maca = nourishes blood, can be cloying
  - Stinging nettle = nourish liver blood, tonify uterus
  - Ashwaganda = Qi and Yang tonic

Treatment Strategies

- Chinese herbs and acupuncture are excellent for fertility prep treatment
- First and foremost our training is in Chinese medicine.
- However supps are also needed. At least a multivitamin (no folic acid! only folate).
- Help to guide your patients to better supplement selection based on their Chinese medicine pattern(s).

RESOURCES

RESOURCES: extend your learning

- **Jane Lyttleton** - The Treatment of Infertility
- **Olivia Pojer** - The Integrative Treatment of Male Infertility with Chinese Medicine
- **IICMC.com** - Fertility, Pregnancy, Postpartum Conference. Melbourne, Oct 27-29th 2023
- **Kirsten Wolfe** - **3 Day Fertile Life Seminar**, **BBT seminar**
- **Naava Carman** - **Advanced Diploma in Fertility Acupuncture**

Want to learn more about fertility?

https://iicmc.com

FERTILE LIFE SEMINAR

Broaden & Deepen your understanding of treating fertility

Know fertility inside out

Learn the FERTILE LIFE Detective system

Know why your patient isn't conceiving & the precise steps to take to achieve pregnancy

Be more confident & develop your uniqueness as a fertility practitioner

https://academy.kirstenwolfe.com.au/

FACE TO FACE = 21-23rd July | Oakleigh Melb
FERTILE LIFE SEMINAR RECORDINGS AVAIL

KIRSTEN WOLFE

"My passion is helping babies come in to the world, for me there is nothing better! Let me share my years of clinical experience with you so we can help more couples & singles achieve their dream of a child"

After successfully treating fertility for over 23 years, The Fertile Life™ method was designed by me, it is an accumulation of my study, clinical experience and unique knowledge.

My practice solely focuses on treatment of Reproductive and Women's health conditions such as infertility (natural and IVF), pregnancy, pre birth, labour and post natal.This has allowed me to become extremely knowledgeable in the field of fertility. Known as "the baby maker" by my patients and professional colleges. I have treated thousands of couples and helped them conceive from the easiest cases to the most difficult where I was their last chance.