



Hormone Quiz

POSTMENOPAUSAL WOMEN

THANK YOU FOR YOUR INTEREST IN ENDOAXIS FORMULATIONS!

We've developed a comprehensive line of 26 products, each designed to address distinct physiological patterns identified through urinary metabolite clearance. While personalized recommendations based on lab testing are always preferred, we understand that testing isn't always accessible or immediate. That's why we've created this clinical guide and hormone quiz—to help providers identify the most appropriate formulation based on a patient's symptoms and health history.

This tool offers a thoughtful, streamlined approach to product selection, and is especially useful in cases where immediate testing is unavailable. However, clinical judgment remains essential.



GUIDELINES FOR USE

DURATION

Products are designed for use over a period of 3–6 months.

MONITORING

Observe symptom changes and patient response during this time. If no response—or adverse symptoms—occur, re-evaluate with additional lab analysis and adjust the protocol as needed.

FURTHER RESOURCES

Visit our Provider Portal (free to register) for expanded clinical education and resources under the Education tab.

DISCLAIMERS

1. DETERMINE THE CAUSE BEFORE INITIATING NUTRITIONAL OR HERBAL

It is important to understand where and how you plan to intervene when supporting your patient. Do you plan to focus on hormone receptor activity and function only? Or do you need to address inflammation as well?

At EndoAxis, our products are designed to address multiple angles of hormone health - from inflammation, to metabolic dysfunction, to receptor response, and more! Knowing your targets for each patient can help with supplement selection.

2. POSTMENOPAUSAL WOMEN NOT USING BHRT

Endogenous estrogen is typically very low in postmenopausal women not using hormone therapy. For this reason:

- Avoid nutrients that further reduce estrogen levels or promote estrogen clearance (e.g., DIM, I3C, Calcium-D-Glucarate), unless supported by lab analysis.
- If the patient presents with estrogen-dominant symptoms, consider testing estrogen metabolites before implementing support.

3. WOMEN USING BHRT

Exogenous hormone use can significantly alter metabolite patterns and receptor activity. For women on bioidentical hormone replacement therapy (bHRT), urinary metabolite testing is strongly recommended to tailor interventions to their unique profile.

4. PATIENTS WITH HORMONE-SENSITIVE CANCERS

In patients with a history of hormone-sensitive breast or reproductive cancers:

- Use caution when selecting herbal formulas.
- Always vet ingredients carefully for estrogenic or hormone-modulating properties.
- Focus support on adrenal health, detoxification, and foundational nutrients unless otherwise indicated.

Score the following questions from:

0 = Not true for me 1 = Somewhat true / occasionally 2 = Absolutely / consistently true

SECTION 1: LOW ANDROGENS

My libido has significantly decreased or feels nonexistent. _____

I feel fatigued or lack motivation — not just tired, but "flat." _____

I am losing muscle or strength, or feel weaker than I used to. _____

My mood or mental drive feels low, even without sadness or anxiety. _____

I want hormone support that improves vitality without increasing estrogen activity. _____

Score _____

SECTION 2: LOW ESTROGENS, BUT FEELING HIGHER ANDROGEN ACTIVITY

I experience vaginal dryness, discomfort with intimacy, or reduced natural lubrication. _____

I experience nightsweats and/or hot flashes _____

I notice cognitive changes: brain fog, memory changes, word-finding difficulty. _____

I have dry skin, thinning tissue, or feel more frail in connective tissues. _____

I struggle with acne, excess facial hair or oily skin. _____

Score _____

SECTION 3: CLASSIC POSTMENOPAUSAL SYMPTOMS

My overall hormone picture feels flat: low libido, mood, and energy all together. _____

I have both vaginal dryness AND low libido/low vitality. _____

I do not feel distinct hormonal shifts — it's like everything is "turned down." _____

My labs show low estrogen AND low testosterone/DHEA, or I suspect both. _____

I struggle with hot flashes and/or nightsweats _____

Score _____

*Add up the score of each section and choose the product that matches with the section that has the **highest score**.* If there is a tie between two sections, read each description and choose the product you feel would be best to try for the patient.

SECTION 1

SECTION 2

SECTION 3

Score	Supplement	Concern
Section 1	Formula 5	Libido, vitality, muscle tone, motivation
Section 2	Formula 8	Vaginal tissue support, cognition, dryness
Section 3	Formula 7	“Everything is low” — comprehensive postmenopausal hormone nourishment

Score the following questions from:

0 = Not true for me 1 = Somewhat true / occasionally 2 = Absolutely / consistently true

SECTION 1

I have constipation (<1 bowel movement per day), but also struggle with estrogen excess symptoms. _____

I am on estrogen bHRT and struggle with bloating, gas, or incomplete bowel elimination with symptoms of estrogen excess (breast tenderness, migraines, fluid retention). _____

I get estrogen-dominant symptoms after travel or during stress. _____

Score _____

PART 2

I have a family history of estrogen-positive cancers (breast, uterine, ovarian). _____

I have been exposed to high environmental toxins (plastics, fragrances, pesticides). _____

I have chronic inflammation or oxidative stress symptoms (fatigue, skin issues). _____

Score _____

SECTION 3

I have a known COMT or methylation polymorphism and tend to feel better when I take methylated B vitamins. _____

I feel very anxious or restless when I drink too much caffeine. _____

I have known elevation in my homocysteine level (>7.2 $\mu\text{mol/L}$) _____

Score _____

SECTION 4

I take bHRT estrogen and feel estrogen dominant symptoms (such as migraines, breast tenderness, weight changes, and/or water retention). _____

I take bHRT and my estradiol is high on lab testing (*Estradiol* >214 pg/mL) _____

I take bHRT and want added support for hormone balance without augmenting my bHRT dose. _____

Score _____

Add up the score of each section and choose the product that matches with the section that has the highest score. If there is a tie between two sections, read each description and choose the product you feel would be best to try for the patient.

SECTION 1

SECTION 2

SECTION 3

SECTION 4

Score	Supplement	Concern
Section 1	Formula 11	Targets beta-glucuronidase and supports gut clearance of estrogen. Ideal for women on bHRT who struggle with estrogen excess and poor GI elimination.
Section 2	Formula 12	Protects against quinone-induced oxidative stress and DNA damage. Ideal for any postmenopausal woman who wants additional antioxidant protection (with or without bHRT).
Section 3	Formula 3	Methyl-supportive blend to help improve catecholamine clearance. Great for any woman who struggles with low COMT activity or is in need of methyl support.
Section 4	Formula 2	<p>Helps to reduce excess estrogen in circulation. This can be a supportive blend for use with bHRT, when estrogen excess is present.</p> <p>** Keep in mind - if a postmenopausal woman has excess estrogen on lab testing and is on estrogen bHRT, the first goal is to reduce her bHRT dose. If this is not possible (pellet) then the use of this formula can support her until reinsertion.</p> <p>Supplementing with Formula 2 can further help balance estrogen excess as needed, but should not be used long-term (due to risk of depelting estrogen in circulation).</p>