



Verisana LAB · Suite LP22190 · Lower Ground Floor ·
145-157 St John Street · London · EC1V 4PW

John Smith
Sample Street
Anytown

**Surname,
First name** Smith, John

DOB 01-01-1990

Sex male

Laboratory # 10000000

Date collected 01-01-2019

Date received 01-01-2019

Report date 03-01-2019

Laboratory report








Enclosed you will find the results of your laboratory examination. In addition to your results you will also receive a brief summary of the correlating effects, regarding the tested parameters. These are compiled without any knowledge on the clinical background and as such, may only be used as an interpretation aid. In case of health problems, please consult a doctor or practitioner for medical treatment and accompaniment for making the best decisions for your health. We explicitly warn against beginning, suspending or changing any medication or therapy without consulting your doctor or practitioner.

Test: Comprehensive Hormone Check

Sample material: saliva

Analyte	Result	Reference range	Result
Cortisol (morning 0-1,5h)	6000 pg/ml	920-12900 pg/ml	
Cortisol (1,5-3h)	5000 pg/ml	790-7450 pg/ml	
Cortisol (3-6h)	4000 pg/ml	420-4180 pg/ml	
Cortisol (6-9h)	3000 pg/ml	320-3100 pg/ml	
Cortisol (9-15h)	2000 pg/ml	200-3000 pg/ml	
DHEA (morning value)	210,0 pg/ml	150-620 pg/ml	

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Analyte	Result	Reference range	Result
DHEA (after 12 h)	180,0 pg/ml	150-620	
Cortisol/DHEA ratio (morning)	22,7	2-85	
Cortisol/DHEA ratio (after 12 h)	8,8	1-20	
Estradiol	3,4 pg/ml	Estradiol (male): 0,4 - 2,5 pg/ml	
Progesterone	150,0 pg/ml	Progesterone (male) < 60 pg/ml Progesterone creme/gel (0,05 mg): 45-650 pg/ml	
Progesterone/Estradiol -Ratio	38,2	The progesterone/estradiol quotient is a quotient which measures the estrogen dominance. The reference refers to a progesterone/ estradiol ratio of 30:1. The quotient should be at least 30. A lower quotient indicated an estrogen dominance.	
Testosterone	150,0 pg/ml	Testosterone (male), age-related: 14-19 years: 18-248 pg/ml 20-29 years: 41-143 pg/ml 30-39 years: 32-100 pg/ml 40-49 years: 30-98 pg/ml 50-59 years: 30-92 pg/ml 60+ years: 23-87 pg/ml Testosterone creme, gel (5-10 mg): 115-800 pg/ml	

The morning cortisol level is within the normal range. Cortisol is a stress hormone which is produced in the adrenal cortex. Stress is the strongest stimulus for the cortisol distribution. Stress hormones are chemical messengers that help the body to react to extraordinary strain. Our body can not differentiate between positive and negative stress. Stressors include heavy physical labour, competitive sports, psychological and physical stress situations, serious illnesses but also positive events such as wedding preparations, new family members or a new job. It has an anti-inflammatory effect, stimulates the fat decomposition and increases the protein turnover. The cortisol distribution is subject to daily fluctuations.

The cortisol value after 1.5-3 hours is within the reference range.

The cortisol value after 3-6 hours is within the reference range.

The cortisol value after 6-9 hours is within the reference range.

The cortisol value after 9-15 hours is within the reference range.



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The DHEA (morning) value is within the normal range. DHEA is produced mainly in the adrenal cortex. It is a primary substance for the production of testosterone and estradiol. The DHEA level depends on the daily rhythm and age. From the age of 25 the DHEA production continually decreases.

The DHEA value (after 12 h) is within the normal range.

The cortisol/DHEA quotient describes the ratio between Cortisol and DHEA and shows how capable our body is of handling stress. A low quotient means a better medical condition. With increasing age the cortisol/DHEA quotient rises. The cortisol/DHEA quotient shows a balanced ratio of the counterparts cortisol and DHEA. This suggests that the hormonal capacity of the body is sufficient to handle stress.

The cortisol/DHEA quotient after 12 hours is within the reference range.

Estradiol is a sex hormone which is produced in men in the adrenal glands and fat tissue. Increased estradiol levels encourage a female appearance in men, such as breast growth and reduced body hair. High values can lead to increased fat deposits (thighs, buttocks) and therefore also to excess weight. An increased estradiol level can be caused by a liver dysfunction, substitution treatment or obesity (an enhanced conversion of testosterone to estradiol through aromatase).

The progesterone level is increased. Progesterone is a yellow body hormone, which is produced in men in the adrenal glands and testicles. It has a mood lifting effect, neutralises the effect of estrogens on the breast tissue, stimulates the bone and collagen growth and encourages the reduction of fat tissue during physical activity.

The progesterone/estradiol quotient is a quotient that measures the estrogen dominance. With a ratio of 38,2:1 the progesterone/estradiol quotient is within the normal range. Therefore the ratio of progesterone to estradiol is balanced.

The age-appropriate testosterone level is increased. Increased values can be caused by testosterone therapy, the intake of aromatase inhibitors and sports.

Yours sincerely
Your laboratory team