Why Men Feel u201cOffu201d Even With Normal Testosterone

If you're a man dealing with brain fog, If you're a man dealing with brain fog, fatigue, or that flat feeling underneath fatigue, or that flat feeling underneath everything you do, everything you do, and someone has told you that your and someone has told you that your testosterone is normal, testosterone is normal, there's a good chance that you're there's a good chance that you're missing something most physicians never missing something most physicians never check.

check. check. In the next 10 minutes, I'm going to In the next 10 minutes, I'm going to show you what the research actually says show you what the research actually says about testosterone and your brain, and about testosterone and your brain, and exactly what we look at in functional exactly what we look at in functional medicine and fixing it. I'm Dr. Myra medicine and fixing it. I'm Dr. Myra Reed. This is week three of my men's Reed. This is week three of my men's health series here on the Smarter, health series here on the Smarter, Stronger, Longer Channel. Every week Stronger, Longer Channel. Every week this month I'm walking you through this month I'm walking you through what's actually happening inside your what's actually happening inside your body as you age, and what the real body as you age, and what the real evidence-based functional medicine has evidence-based functional medicine has to say about it. Today is about to say about it. Today is about testosterone, your brain, and why so testosterone, your brain, and why so many men feel like they're just doing many men feel like they're just doing everything right, and they're still everything right, and they're still feeling off.

feeling off. Let me start with what I hear from men Let me start with what I hear from men in my practice almost every week. in my practice almost every week.

It's rarely, "I have brain fog." It's It's rarely, "I have brain fog." It's more subtle. It's the word that just more subtle. It's the word that just doesn't come as fast. The thought that doesn't come as fast. The thought that used to be immediate now takes a moment used to be immediate now takes a moment more. It's shown up to your job, your more. It's shown up to your job, your family, your workout training, checking family, your workout training, checking every box, and something underneath every box, and something underneath still feels flat. If this sounds like still feels flat. If this sounds like you, I want to say this clearly.

you, I want to say this clearly. What you're feeling is real and it's What you're feeling is real and it's fixable. Let's go to the research. Your fixable. Let's go to the research. Your brain is full of androgen receptors, the brain is full of androgen receptors, the docking sites for testosterone. Density docking sites for testosterone. Density is highest in two key regions, the is highest in two key regions, the hippocampus, which controls memory, hippocampus, which controls memory, the prefrontal cortex, which controls the prefrontal cortex, which controls executive function, focus, drive. When executive function, focus, drive. When testosterone drops, these regions lose a testosterone drops, these regions lose a critical signaling point. In a study critical signaling point. In a study published in Neurology at the University published in Neurology at the University of Washington, researchers gave of Washington, researchers gave testosterone to older men and tracked testosterone to older men and tracked their cognitive performance. The result?

their cognitive performance. The result? Improved spatial memory, improved verbal Improved spatial memory, improved verbal memory in men with mild cognitive memory in men with mild cognitive impairment. In a separate longitudinal impairment. In a separate longitudinal study, also in neurology, researchers study, also in neurology, researchers from the National Institute of Aging from the National Institute of Aging followed older men for years. The men followed older men for years. The men with the lowest free testosterone had with the lowest free testosterone had measurably faster cognitive decline.

measurably faster cognitive decline. Translation? Low testosterone isn't just Translation? Low testosterone isn't just a hormone problem. It's a brain problem.

a hormone problem. It's a brain problem. This is also the work Dr. Dale Bredesen This is also the work Dr. Dale Bredesen has built his cognitive decline protocol has built his cognitive decline protocol around. When hormones drop, the brain around.

The Truth About Testosterone Lab Ranges

When hormones drop, the brain literally fuels loses the fuel and the literally fuels loses the fuel and the structural support. So, if anyone has structural support. So, if anyone has told you testosterone doesn't matter for told you testosterone doesn't matter for your brain, they're not looking at the your brain, they're not looking at the whole picture.

whole picture. It does. The research is clear. So, if It does. The research is clear. So, if testosterone matters this much for the testosterone matters this much for the brain, why are so many men still brain, why are so many men still struggling? Even men who have been told struggling? Even men who have been told that their levels are normal. The that their levels are normal. The standard lab range for total standard lab range for total testosterone runs from 264 to 916 testosterone runs from 264 to 916 nanometers per deciliter.

nanometers per deciliter. This is the range most used by insurance This is the range most used by insurance companies and most clinics use. companies and most clinics use.

If your level comes back at 320, they'll If your level comes back at 320, they'll tell you you're fine. tell you you're fine. But here's what they don't tell you.

But here's what they don't tell you. The range was built around population The range was built around population averages, including aging, averages, including aging, sick, and under treated men.

sick, and under treated men. It is not the range associated with It is not the range associated with optimal energy, recovery, drive, or optimal energy, recovery, drive, or sexual health. In my practice, normal sexual health. In my practice, normal isn't the goal. Optimal is the goal.

isn't the goal. Optimal is the goal. And these are very different numbers. I And these are very different numbers. I look at where you fall within that look at where you fall within that range. I look at free testosterone, not range. I look at free testosterone, not just the total. A full hormone picture just the total. A full hormone picture in panels. A man at 320 is not the same in panels. A man at 320 is not the same as a man at 750.

as a man at 750. The first man is told he's fine. The The first man is told he's fine. The second man feels fine. second man feels fine. And it is the first place most men are And it is the first place most men are quietly being failed by the system.

quietly being failed by the system. Here's the second place. Most men don't Here's the second place. Most men don't get their hormones checked until they're get their hormones checked until they're already deeply symptomatic. I see men in already deeply symptomatic. I see men in their late 30s and early 40s who have their late 30s and early 40s who have been quietly declining for years. Their been quietly declining for years. Their testosterone has been dropping. Their testosterone has been dropping. Their sleep has been worsening. Their energy sleep has been worsening. Their energy and clarity have been fading. By the and clarity have been fading. By the time someone finally tests them, they're time someone finally tests them, they're 45, 50, 55, and the conventional 45, 50, 55, and the conventional medicine compares them to the normal for medicine compares them to the normal for your age. But normal for your age isn't your age. But normal for your age isn't the same as healthy. In my practice, we the same as healthy. In my practice, we start measuring earlier. We look at start measuring earlier. We look at trends, not just a single snapshot. We trends, not just a single snapshot. We catch decline before it becomes catch decline before it becomes dysfunctional. Because the earlier we dysfunctional. Because the earlier we catch it, catch it, the more options you have and the better the more options you have and the better the outcomes. Now let's talk about the outcomes. Now let's talk about treatment, because this is the next treatment, because this is the next place where men get short changed. A lot place where men get short changed. A lot of the men who come into my practice are of the men who come into my practice are already on testosterone.

already on testosterone.

Brain Fog, Memory & Cognitive Decline in Men

Usually a topical gel, most often Usually a topical gel, most often AndroGel. Their numbers are still AndroGel. Their numbers are still sub-optimal though. Their symptoms are sub-optimal though. Their symptoms are still there.

still there. Why? Why? Why? Topical gels have real absorption Topical gels have real absorption challenges. Many men absorb only a challenges. Many men absorb only a fraction of what they apply. And the fraction of what they apply. And the application sites really matter. Most application sites really matter. Most men are putting it on their shoulders or men are putting it on their shoulders or upper arm, where absorption is upper arm, where absorption is unpredictable.

unpredictable. unpredictable. Receptor saturation at the same Receptor saturation at the same application site over and over time can application site over and over time can create a false ceiling. And concerns create a false ceiling. And concerns about skin-to-skin transfer with about skin-to-skin transfer with partners or kids can cause men to partners or kids can cause men to under-apply or use the wrong areas under-apply or use the wrong areas entirely. So, men think they're being entirely. So, men think they're being treated, their labs may even look okay, treated, their labs may even look okay, but not optimal, but not optimal, but their levels never reach truly the but their levels never reach truly the optimal levels and they feel only optimal levels and they feel only marginally better or not really better marginally better or not really better at all. This is not a testosterone at all. This is not a testosterone failure, it's a delivery failure. And in failure, it's a delivery failure. And in my practice, when a topical isn't doing my practice, when a topical isn't doing the job, we move to better options.

the job, we move to better options. There's bioidentical compounded creams There's bioidentical compounded creams formulated for your dosing and applied formulated for your dosing and applied where the absorption is dramatically where the absorption is dramatically higher and more consistent. The higher and more consistent. The testosterone injections, usually we use testosterone injections, usually we use the right kind of oil, not the one that the right kind of oil, not the one that they're using, the peanut oil from the they're using, the peanut oil from the pharmacies. Pellet therapy, for the pharmacies. Pellet therapy, for the right candidate, is huge. Most men love right candidate, is huge. Most men love it for the convenience and the ease of it for the convenience and the ease of of how it goes over time. Now, I want to of how it goes over time. Now, I want to take this one step further take this one step further because there's something most men because there's something most men aren't told about testosterone aren't told about testosterone replacement. When you take testosterone replacement. When you take testosterone from the outside, like a gel, injection, from the outside, like a gel, injection, or pellet, your your body recognizes or pellet, your your body recognizes that supply. It does what it's designed that supply. It does what it's designed to do. It shuts off your own production.

to do. It shuts off your own production. Your pituitary stops sending the signal, Your pituitary stops sending the signal, your testicles stop producing, and over your testicles stop producing, and over time, they can shrink, what we call time, they can shrink, what we call atrophy, and your fertility can drop, atrophy, and your fertility can drop, sometimes dramatically. This is not a sometimes dramatically. This is not a side effect, that's the mechanism.

side effect, that's the mechanism. For some men, that trade-off is For some men, that trade-off is acceptable, but for many of the men I acceptable, but for many of the men I see, younger men especially, men who see, younger men especially, men who still want children, there's even a still want children, there's even a better option out there now.

better option out there now. It's called enclomiphene. It's called enclomiphene. Enclomiphene works completely different. Enclomiphene works completely different.

Instead of replacing testosterone from Instead of replacing testosterone from the outside and shutting off your own the outside and shutting off your own production, it signals your pituitary production, it signals your pituitary gland to do its job, to drive your gland to do its job, to drive your testicles to produce testosterone more testicles to produce testosterone more naturally. Your own testosterone climbs naturally. Your own testosterone climbs often into the

optimal range. Your often into the optimal range. Your testicles stay active and protected.

testicles stay active and protected. Your natural hormonal rhythm stays Your natural hormonal rhythm stays intact. In my practice, I've had intact. In my practice, I've had excellent results with enclomiphene, excellent results with enclomiphene, especially for men with secondary especially for men with secondary hypogonadism, hypogonadism, hypogonadism, where the testicles still work fine, but where the testicles still work fine, but the brain signal has weakened. So, if the brain signal has weakened.

TRT, Fertility & What Most Men Arenu2019t Told

So, if you've been told testosterone you've been told testosterone replacement is your only option, it replacement is your only option, it isn't. There's a path that helps your isn't. There's a path that helps your body do what it's already designed to body do what it's already designed to do. And here's the part you cannot skip.

do. And here's the part you cannot skip. Even with the right replacement, Even with the right replacement, hormones don't work in isolation. The hormones don't work in isolation. The lifestyle inputs either multiply your lifestyle inputs either multiply your results or quietly undo them. First is results or quietly undo them. First is sleep. In a 2011 study published in sleep. In a 2011 study published in JAMA, healthy young men who slept just 5 JAMA, healthy young men who slept just 5 hours a night for 1 week saw their hours a night for 1 week saw their testosterone's drop 10 to 15%.

testosterone's drop 10 to 15%. In 1 week. In 1 week. This is how fast sleep moves the needle. This is how fast sleep moves the needle. The second, diet. Insulin resistance and The second, diet. Insulin resistance and chronically high blood sugar suppresses chronically high blood sugar suppresses testosterone and amplifies testosterone and amplifies aromatization, aromatization, aromatization, the process where your testosterone gets the process where your testosterone gets converted to estrogen. Stable blood converted to estrogen. Stable blood sugar protects your entire hormone plant sugar protects your entire hormone plant profile. Third, alcohol. Even moderate profile. Third, alcohol. Even moderate alcohol lowers your testosterone and alcohol lowers your testosterone and disrupts deep sleep.

disrupts deep sleep. The effect is dose-dependent and The effect is dose-dependent and consistent across the literature. consistent across the literature.

Chronic stress. When cortisol stays Chronic stress. When cortisol stays elevated for too long, it directly elevated for too long, it directly suppresses testosterone production at suppresses testosterone production at the level of the brain. You cannot the level of the brain. You cannot out-prescribe a nervous system that is out-prescribe a nervous system that is stuck in survival mode. And fifth, toxin stuck in survival mode. And fifth, toxin exposure. Endocrine disruptors, exposure. Endocrine disruptors, phthalates and plastics, BPA, atrazine phthalates and plastics, BPA, atrazine in our water, microplastics, certain in our water, microplastics, certain pesticides bind to your hormone pesticides bind to your hormone receptors and disrupt the whole entire receptors and disrupt the whole entire system. These are not side issues. They system. These are not side issues. They are the foundation that testosterone are the foundation that testosterone replacement works on.

replacement works on. Replacement without lifestyle is a leak Replacement without lifestyle is a leak you cannot keep filling. This is exactly you cannot keep filling. This is exactly what I mean when I talk about living what I mean when I talk about living smarter, stronger, longer. Smarter, smarter, stronger, longer. Smarter, knowing the difference between normal knowing the difference between normal and optimal, and optimal, catching the decline early, asking catching the decline early, asking better questions for of your labs and better questions for of your labs and your doctor, stronger, building the your doctor, stronger, building the biology that supports your brain, your biology that supports your brain, your body, your drive, the right hormones, body, your drive, the right hormones, the right delivery method, the right the right delivery method, the right inputs.

inputs. inputs. Longer, sustaining it for decades, your Longer, sustaining it for decades, your health span, not just your life span, health span, not just your life span, sharp at 70, strong at 80, fully present sharp at 70, strong at 80, fully present for the people who matter the most to for the people who matter the most to you. Brain fog isn't a sign

that you're you. Brain fog isn't a sign that you're broken. It's a signal. And the signal broken. It's a signal. And the signal that your system is asking for a deeper that your system is asking for a deeper look and a real plan.

look and a real plan. I built a free men's hormone quiz on my I built a free men's hormone quiz on my website and it's the fastest way to website and it's the fastest way to connect what you're feeling to what's connect what you're feeling to what's actually going on under the hood.

actually going on under the hood. The link is in the description. The link is in the description. If you want to work with me directly and If you want to work with me directly and my consultation information is there my consultation information is there too. Next week is the final week in this too. Next week is the final week in this series and it's where everything comes series and it's where everything comes together. I'll walk you through how to together. I'll walk you through how to build your next decade intentionally, build your next decade intentionally, not by chasing one number, not by not by chasing one number, not by relying on one prescription, but by relying on one prescription, but by building a system that lets you live building a system that lets you live