

The 7 Most Common Nutrient Deficiencies in Hashimoto's

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March 27, 2024

After my own Hashimoto's diagnosis in 2009, I wanted to figure out what I could do to live the healthiest life possible.

I wanted to know if there was anything I could do to address my symptoms and reverse my condition — or at least stop its progression.

So, I set out on a journey to find the root cause of my disease.

I have learned that Hashimoto's symptoms result from a combination of thyroid hormone imbalances, nutrient deficiencies, food sensitivities, an impaired ability to handle stress, an impaired ability to eliminate toxins, intestinal permeability, and one or more chronic infections. ^[1]

Some of these root causes can be somewhat elusive and may take a lot of digging to uncover, but addressing nutrient depletions is usually pretty straightforward. Best of all, when we address nutrient depletions, we can feel better quickly, even when other underlying root causes are still present!

In this article, you'll learn more about:

- Why we have nutrient deficiencies
- The top seven nutrient deficiencies in Hashimoto's
- How to navigate lab testing for nutrient deficiencies
- Recommended supplements to address nutrient deficiencies

Why Are People with Hashimoto's Prone to Nutrient Depletions?

While macronutrients — carbs, fats, and proteins — are the three basic components of our diet, micronutrients are the vitamins and minerals that are vital to our well-being. Most people with Hashimoto's have numerous micronutrient deficiencies. ^[2] In fact, I would argue that due to our current farming practices and the Standard American Diet (S.A.D.), micronutrient depletions are a factor for most people!

Nutrient deficiencies can occur as a result of eating nutrient-poor foods or foods with less bioavailable (easily and readily absorbed and used) nutrients, following a calorie-restricted diet, having inflammation from [infections](#) or [food sensitivities](#), taking certain [medications](#), or having an imbalance of [gut bacteria](#). ^[3]

Even people who are eating organic, nutrient-dense diets are at risk for micronutrient deficiencies, as factors like [low stomach acid](#), [fat malabsorption](#), and a [deficiency in digestive enzymes](#) will result in many of us not being able to properly break down the nutrients from the foods we eat. ^[4]

A lack of sufficient thyroid hormones can also lead to nutrient deficiencies, as it makes [nutrient extraction](#) from food more difficult and less efficient. ^[5] Furthermore, these nutrient deficiencies can contribute to the development of Hashimoto's, which in turn makes it more difficult to extract nutrients, and creates a cycle that can be difficult to break. ^[6]

I believe that restoring one's nutrient levels through nutrient-dense foods, supplementation, and optimizing digestion, are some of the fastest ways to feel better with Hashimoto's and begin to restore the body!

The 7 Most Common Nutrient Deficiencies in Hashimoto's

From research and experience, I've concluded that the most common nutrient deficiencies in Hashimoto's are (in no particular order):

1. [Selenium](#)
2. [Vitamin D](#)
3. [Vitamin B12](#)
4. Iron/[Ferritin](#) (the iron storage protein)
5. [Thiamine](#)
6. [Zinc](#)
7. [Magnesium](#)

For more in-depth information, I encourage you to read these linked articles about each nutrient. However, in this article, I offer a brief overview of each, along with recommended products and dosages.

I've also separated the supplements into two groups: ones that can be safely supplemented with little or no nutrient testing, and ones that require testing for nutrient deficiencies prior to consumption.



“The most common nutrient deficiencies in Hashimoto’s are selenium, vitamin D, B12, ferritin (the iron storage protein), thiamine, zinc, and magnesium.

Restoring one’s nutrient levels through nutrient dense foods, supplementation and optimizing digestion, are some of the fastest ways to feel better with Hashimoto’s and begin to restore the body!”

Isabella Wentz, PharmD



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4 Supplements Safe to Consume Without Getting Tested for Nutrient Deficiencies

I often see nutrient deficiencies in my clients with Hashimoto’s.

Four supplements that I recommend taking, which generally produce a positive benefit and with very few side effects, are thiamine, magnesium, selenium, and zinc. Unlike vitamin D, B12, and ferritin, I don’t generally recommend testing for these nutrients before supplementation. Deficiencies can usually be addressed by supplementing these nutrients in the doses recommended below.



Most people with Hashimoto's have deficiencies in these nutrients, and I've seen very limited adverse reactions with supplementation (please check the special considerations/cautions sections under each supplement heading to learn about adverse reactions). [\[7\]](#)

Thiamine

Thiamine (vitamin B1) is responsible for converting carbohydrates into energy. It also helps with the digestion of proteins and fats. [\[8\]](#) Thiamine is necessary for the proper release of hydrochloric acid in the stomach, which is required for proper protein digestion — essential for healing from Hashimoto's. It has been found to often be deficient in people with Hashimoto's and Crohn's disease. [\[9\]](#)

I wrote an [article about thiamine](#) a couple of years ago, and I still get hugs from readers at conferences, as well as messages from people who have turned their life around using thiamine. I recently received a letter from a reader who started on disability due to her [thyroid fatigue](#) and, with the use of thiamine, was able to return back to work!

Thiamine helped me resolve my fatigue and the low blood pressure I battled for as long as I could remember. (It was sometimes as low as 80/50 mmHg!) My blood pressure has always tested normal after I started this supplement a few years ago.

Research suggests that a dose of 600 mg of thiamine per day can turn fatigue around in three to five days. [\[10\]](#) In my survey of 2232 people with Hashimoto's, 36 percent of respondents reported that B1 supplementation made them feel better.

Signs of thiamine deficiency can include: having Hashimoto's or other autoimmune conditions, irritable bowel syndrome (IBS), fatigue, low blood pressure, [low stomach acid](#), brain fog, and/or [adrenal](#) and [blood sugar](#) issues.

People with thiamine deficiencies may also feel worse after drinking alcohol or taking an L-glutamine supplement.

Recommended Supplement: [Benfomax from Pure Encapsulations](#)

Dose: 600 mg per day*

**Please note: All dosage recommendations in this article are intended for adults. Please consult with your pediatrician before giving supplements to children.*

Expected Benefits: More energy, better brain function, stabilized blood pressure, and improved blood sugar tolerance

When to Expect to See Benefits: Usually 3 to 5 days

How Long to Take: 3 months to 2 years



Special Considerations: If you have an adverse reaction to thiamine (which is rare), I recommend detoxifying the liver with a [liver support protocol](#). I've found that sensitivities to B vitamins could be a symptom of "liver congestion," a condition that can lead to multiple chemical sensitivities and numerous symptoms.

Precautions: Thiamine is generally safe if taken in the recommended dosages. One exception to this is for people with cancer, as thiamine can influence the growth of tumor cells. Because of this unusual dose-response pattern, I strongly advise working with an integrative cancer specialist if you have a thiamine deficiency and cancer.

Additionally, there is some evidence to suggest that digoxin can reduce the body's ability to absorb and utilize thiamine, especially when taken in combination with furosemide.

Check with your health practitioner if you are on other medications or if you have other health conditions, to ensure thiamine is safe for you.

See my full [thiamine article](#) for more information on how this nutrient could benefit you.

Selenium

I used to have panic attacks... but they stopped after I started taking selenium (and balancing my [blood sugar](#)). I've seen this time and time again, and it makes me so happy to see improvements with this one inexpensive nutrient!

Selenium deficiency has been recognized as an environmental trigger for Hashimoto's, and most people with Hashimoto's are at risk for this deficiency, which can manifest as increased [anxiety](#), [fatigue](#), and [depression](#). ^[11]

Populations at higher risk of selenium deficiency include those with IBS and celiac disease. ^[12] In my personal experience and my experience with clients, I have seen that IBS symptoms often show up many years before a thyroid condition is recognized. I often wonder if one of the mechanisms behind this is the depletion of selenium. Because cereals and grains tend to be higher in selenium, people who follow grain-free diets and eat non-processed foods may also be at a greater risk of selenium deficiency. ^[13]

Numerous studies support using selenium in Hashimoto's, [Graves'](#), and pregnancy. In fact, selenium can help prevent postpartum Hashimoto's. ^[14]

A dose of 200 mcg per day has been found to reduce TPO antibodies by about 50 percent within three months! ^[15] Additionally, 62 percent of my readers have reported increased energy levels with the same dose.

When combined with myo-inositol, selenium has been shown to be beneficial in a dose as low as 83 mcg. Consuming both of these together may not only reduce thyroid antibodies, but may also reduce TSH. ^[16]



Myo-inositol can also support blood sugar levels and healthy hormone balance, so if these are areas where you need support, a combined supplement like [Rootcology's Selenium + Myo-Inositol](#) might work really well for you!* ^[17]

Recommended Supplement: [Selenium Methionine from Pure Encapsulations](#) (contains 200 mcg of selenium per capsule) or [Rootcology Selenium + Myo-Inositol](#) (contains 83 mcg of selenium per capsule)

Please note that Rootcology supplements only ship to the U.S. at this time. International readers may consider [Selenium Methionine from Pure Encapsulations](#).

Dose: 200-400 mcg per day on its own, or 83 mcg per day if combined with myo-inositol

Expected Benefits: Less anxiety, better T4 to T3 conversion, lower thyroid antibodies, more energy, less hair loss, fewer palpitations

When to Expect to See Benefits: Usually 3 to 5 days for symptoms to start improving, and 3 full months to see a reduction in thyroid antibodies

How Long to Take: 3 months to 2 years

Special Considerations: Selenium is best utilized when it is formulated with methionine, a sulfur-containing amino acid. Ingredients may show up as selenium methionine or selenomethionine. As this version of selenium contains sulfur, this may cause an adverse reaction in those with a CBS mutation and those who are sulfur-sensitive.

Precautions: Selenium can cause adverse reactions if you have an iodine deficiency. While iodine can both trigger and exacerbate Hashimoto's, some people may be deficient in it and may benefit from a low-dose iodine supplement. Up to 250 mcg of iodine has been well-tolerated in people with Hashimoto's, and most multi and prenatal vitamins contain anywhere from 150-250 mcg. ^[18] (Read more about this in my article on [iodine and Hashimoto's](#).)

Selenium has a narrow therapeutic index, and doses of under 100 mcg per day (when used as monotherapy) may not be sufficient for improving Hashimoto's symptoms and markers, while doses in excess of 800 mcg per day can be toxic.

The RDA in the United States lists 400 mcg of selenium per day as the upper limit, while a study done in China found signs of toxicity at doses of 900 mcg. ^[19]

Please keep in mind that everyone's chemistry is different, and you may have an underlying health issue that adds risk to you reacting to selenium supplements, so I always recommend that you discuss any type of supplementation with your practitioner.

Additionally, it is important to note that some foods and herbal supplements, such as those taken for lactation support, may be sources of selenium. These include Brazil nuts, burdock root, alfalfa, fenugreek, fennel seed, catnip, chamomile, garlic, cayenne, nettle, oat-straw, yarrow, peppermint,



sarsaparilla, lemongrass, ginseng, hawthorn berry, rose hips, and raspberry leaf. Please consult with your practitioner to determine the most appropriate dosage for you, to avoid selenium toxicity.

For more information on possible selenium supplement interactions, please check out my [selenium article](#).

Magnesium

I've heard magnesium referred to as a "miracle nutrient," and I couldn't agree more! Magnesium is necessary for more than 300 biochemical reactions in the body: it supports the immune system, maintains normal nerve and muscle function, regulates the heartbeat, strengthens bones, keeps blood glucose levels steady, and plays a role in the production of energy. ^[20]

Magnesium deficiency can cause migraines, headaches, insomnia, menstrual cramps, anxiety, joint pain, and a whole host of other symptoms (including intolerance to loud noises), while supplementation can resolve them.

I have witnessed the miracle of magnesium for myself, personally, in the realm of menstrual cramps. I used to get cramps that were so horrific, I often had to miss school and work on the first day of my menses. I remember a time during my pharmacy internship when I had to physically lay down in the back of the pharmacy because my menstrual cramps were unbearable. With enough magnesium on board, my menstrual cramps are thankfully a thing of the past!

Additionally, studies show that long-term use can help with normalizing the appearance of the thyroid gland on ultrasound tests, and magnesium may also help reduce thyroid and breast nodules. ^[21]

Recommended Supplement: [Magnesium Citrate Powder by Rootcology](#) or [Magnesium \(glycinate\) by Pure Encapsulations](#). Choose citrate if you tend to be constipated; glycinate if your stools tend to be on the looser side. (Please note that Rootcology supplements only ship to the U.S. at this time. International readers may consider [Magnesium \(citrate powder\) by Pure Encapsulations](#).)

Dose: 100 to 400 mg daily, at bedtime (Note: Do not exceed 400 mg per day.)

Expected Benefits: Reduced anxiety, reduced palpitations, more energy, improvements to the appearance of the thyroid during ultrasound tests (when used long-term), reduced menstrual cramps, better sleep, relief from constipation, migraines, cramps, and pain.

When to Expect to See Benefits: This really depends on an individual's set of symptoms. In my experience, clients see benefits with anxiety, insomnia, menstrual cramps, and even migraines/headaches, within the first week. I have also seen menstrual cramps reduced by 80-90 percent within the first month, and pain continues to decrease with continued use. With regard to normalizing thyroid appearances on ultrasound tests, this may take 8 months to a few years of use.

How Long to Take: 3 months to lifetime



Special Considerations: Make sure to space your magnesium by at least four hours from thyroid medications, iron supplements, and calcium supplements, as magnesium can block their absorption. I prefer taking magnesium at bedtime because it promotes restful sleep.

Magnesium citrate can cause loose stools, which may be a good or a bad side effect, depending on which direction you tend to swing. Consider magnesium glycinate if you tend to experience diarrhea, or magnesium citrate if you tend to be more constipated. Keep in mind that, for some people, the glycinate version can worsen anxiety symptoms. If you are prone to anxiety, the citrate version would be a better choice.

Precautions: When taken in the recommended dosage, magnesium is generally considered safe. However, do not take magnesium if you are taking levodopa/carbidopa, as it can reduce the effectiveness of this drug. There may be moderate interactions with some other medications, so check with your doctor if you have any concerns. ^[22]

For more information about the importance of [magnesium](#) and more about potential drug interactions, please see my full article.

Zinc

Zinc is involved as a catalyst in many different pathways in the body. It's also very important for gut health, immune function, tissue healing, the conversion of T4 to T3, and the production of TSH. It can help tighten the intestinal junctions of those with intestinal permeability as well. ^[23]

Symptoms of zinc deficiency include poor wound healing, impaired taste and smell, and thin, brittle, peeling, or white-spotted nails. Those low in zinc may also have a weakened immune system and suffer from allergies, frequent colds, or respiratory infections. ^[24] Low [alkaline phosphatase](#) (ALP) on a blood test can provide an indirect indication of zinc deficiency (the optimal range for alkaline phosphatase is 70-90 IU/L).

Depleted zinc levels can result in diarrhea, hair loss, impotence, loss of appetite, skin issues (acne, rashes, canker sores, foot fungus), depression, impaired vision, low sperm count, ADHD, unexplained weight loss, a lack of alertness, and open sores on the skin. ^[25]

Over 52 percent of my surveyed readers reported feeling better after starting zinc supplementation.

Who is at Risk for Deficiency: Since zinc is needed to form TSH, those who are constantly producing TSH are more likely to develop deficiencies in zinc. If you have celiac disease or any other malabsorption syndrome that has caused intestinal damage, you may have an impaired ability to absorb zinc. ^[26]

Recommended Supplement: [Zinc 30](#) by Pure Encapsulations

Dose: 30 mg per day (larger doses require a doctor's supervision)

Special Considerations: To ensure proper absorption, zinc supplements should be taken with food. I've also found that taking 500 mg of [evening primrose oil](#), twice per day, improves the absorption of zinc.



(Thanks to Trudy Scott for the tip!) Doses should be no more than 30 mg per day without your doctor's supervision. This is because doses above 40 mg may cause a depletion in copper levels. Zinc supplementation can also deplete one's iron levels.

Precautions: Doses should be no more than 30 mg per day without a doctor's supervision. Doses above 40 mg may cause a depletion in copper and/or iron levels.

Zinc supplementation may also not be appropriate for those with HIV/AIDS, those taking antibiotics or penicillamine (Cuprimine, Depen), or those with renal (kidney) dysfunction.

Some individuals may experience nausea, diarrhea, vomiting, headaches, or a "metallic taste" in the mouth when supplementing with zinc. This may be a sign of zinc toxicity or overdose, and you may need to cut back on your dose or avoid zinc supplementation altogether. [\[27\]](#)

As always, please consult with your local practitioner to determine if zinc supplementation is appropriate for you.

To learn more about [zinc and Hashimoto's](#), please see my full article.

The 3 Most Important Thyroid Nutrient Tests

Vitamin D, B12, and ferritin are very common nutrient deficiencies that I've seen in those with Hashimoto's, but unlike the ones mentioned above, require testing before starting supplementation.

Most doctors will order these tests for you if you ask, and the tests should be covered by your insurance. If you do not have a doctor who is willing to order the tests for you, or if you have a high-deductible insurance plan, I've provided links for self-ordering options for each of the tests below, as well as a guideline for your optimal reference range, and my preferred supplement choice.

Additionally, the [Spectracell Micronutrient Test Panel](#) can be used to test for thiamine and magnesium deficiencies. However, selenium and zinc levels are not reliably found via blood tests.

Please note: The lab interpretation guide I provide below is based on functional labs. In some cases, doctors may consider your numbers "normal" when you are indeed deficient. Make sure to be an educated and empowered patient, and always ask for a copy of your own labs so that you don't miss out on the life-changing effects of these important nutrients!

Vitamin D

Recommended Test: I recommend testing for vitamin D deficiency with the [Vitamin D 25-Hydroxyvitamin or 25\(OH\)D](#) test, then retesting within three months once you start supplementing, to make sure that you are getting enough, but not too much. In contrast to most vitamins which are water-soluble and are excreted by the body in excess, vitamin D is fat-soluble and can build up.



Understanding Your Results: Vitamin D levels should be between 60 and 80 ng/mL for optimal thyroid receptor and immune system function.

Vitamin B12

Recommended Test: You can test your B12 (cobalamin) levels through your healthcare provider or through [Ultralabs](#). This is not a routine test but is covered by most insurance plans. Levels may be low, even if all other screening tests for iron and anemia come out within the reference range.

Understanding Your Results: Optimal B12 levels should be between 700-900 pg/mL. Please note: most labs will not flag low B12 levels unless they are under 200 pg/mL.

Ferritin

Recommended Test: Ferritin levels may be low, even if all other screening tests for iron and anemia come out within the reference range. You need to specifically test for ferritin. Ferritin level tests can be ordered by your doctor, or you can self-order one via [Ultralabs](#).

Understanding Your Results: Normal ferritin levels for women are between 12-150 ng/mL. According to some experts, ferritin levels of at least 40 ng/mL are required to stop hair loss, while levels of at least 70 ng/mL are needed for hair regrowth. The optimal ferritin level for thyroid function is between 90-110 ng/mL.

How to Access Thyroid Nutrient Tests

All of the above labs can be ordered by your primary care doctor or endocrinologist, and are covered by most insurance plans. I believe that these tests should be the standard of care for everyone with Hashimoto's, but you may need to request them from your doctor.

Please note: If you don't have a doctor that can order the labs for you, you can order each of the labs separately, or you can order the full [Root Cause Nutrition](#) panel from Ultralabs. This company allows patients to order their own labs (and receive the results), but also allows them to submit their receipts to their insurance for billing! Please be sure to check with your insurance, as each company has different rules.

3 Supplements Safe to Consume After Getting Tested for Nutrient Deficiencies

I recommend getting tested for the following nutrient deficiencies before starting on supplements in order to ensure optimal levels.



Vitamin D

Vitamin D deficiency is more commonly found in people with Hashimoto's — 68 percent of my readers with Hashimoto's reported also being diagnosed with vitamin D deficiency — and deficiency has been correlated with the presence of [antithyroid antibodies](#). Research done in Turkey found that 92 percent of Hashimoto's patients were deficient in vitamin D, and another 2013 study found that low vitamin D levels were associated with higher thyroid antibodies and worse disease prognosis. ^[28]

According to my 2015 survey, 74 percent of my readers felt better after taking a vitamin D supplement! This isn't surprising, as vitamin D supplements can improve our mood and help us reduce thyroid antibody levels. ^[29]

Both thyroid peroxidase and thyroglobulin antibodies were reduced in a Polish trial of 18 women who were supplementing with vitamin D, to reach a target level of 60 ng/mL. ^[30] I've personally found that most of my clients who are in remission from Hashimoto's keep their levels of vitamin D between 60-80 ng/mL.

Who is at Risk for Deficiency: Anyone who is not a full-time lifeguard in Southern California may be at risk. 😊 Vitamin D deficiency is rampant, especially in most North Americans, Europeans, and Australians — and it affects a large number of people with Hashimoto's. A low-fat diet or fat malabsorption issue increases the risk.

Recommended Supplement: [Vitamin D3 by Pure Encapsulations](#)

Dose: I generally recommend a dose of 2,000-5,000 IU for my clients, with a recheck in 3 months.

Special Considerations: I also recommend spending time in the sunshine to get more vitamin D if you have Hashimoto's. If you don't live in a warm climate, get to one! You have an official prescription for a beach vacation from yours truly!

Precautions: Be sure to keep monitoring your levels if you're using more than 2,000 IU of vitamin D per day, as large doses can cause hypercalcemia (signs include headache, weakness, nausea, vomiting, and constipation). Individuals with hyperparathyroidism or kidney disease are at particular risk.

If pregnant or lactating, consult your physician before taking vitamin D3. 10,000 IU is for short-term or intermittent use only.

Vitamin D supplementation may result in hypercalcemia in certain individuals taking digoxin or thiazide diuretics.

Take a look at my full [article on vitamin D](#) for more information on how important it is to thyroid health.



Vitamin B12

Vitamin B12 helps us with our energy production. Low levels are commonly associated with Hashimoto's and may lead to fatigue, depression, neurological issues, impaired digestion, brain fog, tingling extremities, nerve damage, seizures, and anemia. ^[31]

Who is at Risk for Deficiency: [Vegans and vegetarians](#) are at the greatest risk, due to the fact that B12 is only found in animal foods and cannot be synthesized by the human body. Those with pernicious anemia (a type of autoimmune condition), [H. pylori](#), and [SIBO](#) may also be susceptible.

In my survey of 2232 people with Hashimoto's, 33 percent reported that they had tested as deficient in this all-important vitamin, and 76 percent said they felt better after taking a B12 supplement.

Recommended Supplement: [B12 5000 Liquid](#) (methylcobalamin) by Pure Encapsulations

Dose: 5000 mcg, sublingually, daily for 10 days; then 5000 mcg, once per week, for 4 weeks; then 5000 mcg monthly for maintenance

Monitoring: You can't really overdose on B12, as it's water-soluble, but I always recommend doing the initial test and retesting three months later, to track and monitor your progress.

Special Considerations: Be sure to use the sublingual version, as swallowing B12 may result in inadequate absorption. Injections are also available and are highly effective; however, the sublingual form is just as effective, much less expensive, and pain-free.

If you have the COMT V158M gene mutation or mitochondrial issues, the [Adenosyl/Hydroxy B12 Liquid](#) supplement from Pure Encapsulations may work better.

Precautions: This product is generally safe, with no known drug interactions. However, please check with your doctor if you are on other medications.

In addition, if you have pernicious anemia, please note that it's often triggered by *H. pylori*, which can trigger both Hashimoto's and pernicious anemia. Treatment can reverse both conditions! ^[32] Read my article on [H. pylori](#) to learn more about this gut infection.

Please see my [full article on B12](#) for more information that may benefit you.

Ferritin

Ferritin is our iron storage protein. Low levels are commonly associated with Hashimoto's and may lead to fatigue, difficulty breathing, and hair loss. ^[33] According to my 2015 survey of readers, supplementation made 63 percent of them feel better.

Who is at Risk for Deficiency: Women who menstruate and/or are postpartum may be at increased risk due to blood loss. Health conditions that affect our gut microbiota, including [SIBO](#), [H. pylori](#), and [low stomach acid](#), can also cause a ferritin deficiency. ^[34] Vegan/vegetarian diets, various co-factor



deficiencies (article coming soon), and heavy metal toxicity (including copper toxicity) are also factors when it comes to low ferritin levels. ^[35]

Recommended Supplement: [OptiFerin-C](#) by Pure Encapsulations

Dose: 1 to 3 capsules per day, in divided doses, with meals

Special Considerations: Ferritin can be deficient due to numerous root causes, including a lack of [stomach acid](#) that helps us absorb iron from iron-rich foods — so if supplementing does not address your levels, you will need to do some more digging. ^[36] I have more information on this in the Advanced Protocols section of my book [Hashimoto's Protocol](#).

Precautions: Having too much ferritin in your body can be toxic. I recommend retesting your ferritin levels to ensure that your body is not overloaded. If you have elevated ferritin levels, you may have iron overload and may benefit from blood donations.

Keep this supplement out of reach from children and pets, and consult with your doctor if you are on any other medications.

You can read more about [ferritin and Hashimoto's](#) here.

Monitoring Your Thyroid Hormones When Supplementing

Whenever you start a lifestyle or complementary intervention to address Hashimoto's, it's important to work with your doctor to monitor your thyroid symptoms, thyroid hormones, and thyroid antibodies. Selenium, vitamin D, zinc, and magnesium can impact your levels of thyroid hormones. ^[37]

This could potentially reduce your requirement (or need) for thyroid meds. So as you move forward with supplementation, please look out for the following symptoms of being overmedicated: rapid or irregular heartbeat, nervousness, irritability or mood swings, muscle weakness or tremors, diarrhea, heat intolerance, menstrual irregularities, hair loss, weight loss, insomnia, chest pain, and/or excessive sweating.

I recommend testing thyroid hormone levels every six to 12 weeks while taking supplements, to ensure your thyroid medication dosage is optimized, or sooner, if you are showing any of the above symptoms. Thyroid medications are goldilocks hormones — they need to be used in just the right dose — and there are risk factors of being overmedicated.

Testing TSH, T4, T3, and the two most common Hashimoto's antibodies (TPO and TG antibodies — you can [read more about thyroid tests here](#)) is an important part of ensuring that the lifestyle changes you are making are both safe and helpful. 😊

If your doctor is ordering these thyroid labs for you, be sure to request a copy so that you can see them for yourself and ensure that they are interpreted correctly. If you aren't able to use your physician for ordering, or have a high deductible insurance plan as I do, you may also wish to self-order your own thyroid monitoring labs. I recommend [the Ulta Labs thyroid panel](#) for monitoring your progress, which



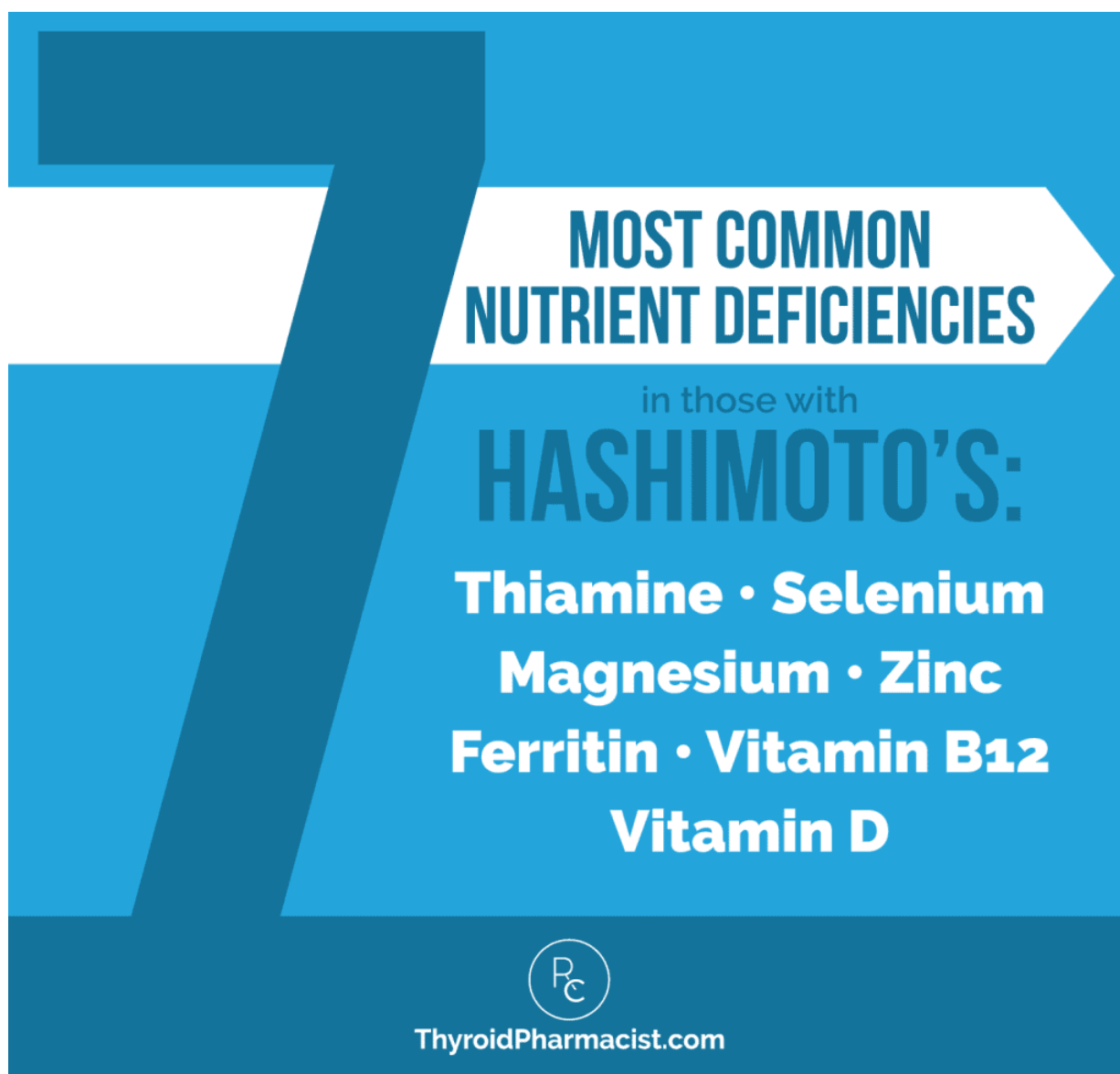
can be ordered anywhere in the U.S. (some, but not all, insurance companies may reimburse you for self-ordered labs — please be sure to check with your plan).

Action Steps

In summary, the most important nutrient depletions to address in those with Hashimoto's include [thiamine](#), [selenium](#), [magnesium](#) ([citrate](#) or [glycinate](#)), [ferritin](#), [B12](#), [vitamin D](#), and [zinc](#).

Thiamine, selenium, zinc, and magnesium are safe and helpful for most people with Hashimoto's, and most people will see a significant benefit from these supplements.

Vitamin D, vitamin B12, and ferritin require testing before supplementing, but also give great results — so be sure to request lab tests for these three nutrients, to see if you would benefit from supplementation.



As with all supplements, please be sure to consult with your healthcare practitioner to determine the dosage and duration that is right for you, and to ensure they do not interact with any other supplements or medications that you may currently be taking.

To further help you along your healing journey, I suggest checking out my cookbook, [*Hashimoto's Food Pharmacology: Nutrition Protocols and Healing Recipes to Take Charge of Your Thyroid Health*](#). In addition to containing 125 delicious, nutrient-dense recipes that will help restore your depletions, this cookbook also includes information regarding how to tailor your diet to you, how to address specific symptoms with nutrition, how to use complementary nutrients to address symptoms, and when to dig deeper beyond nutrition.

I hope this information helps you on your journey toward better health!

Have you tried these nutrients? I'd love to know how they've helped you in your health journey. Let me know in the comments below! 😊

P.S. You can download a free Thyroid Diet Guide, 10 thyroid-friendly recipes, and the Nutrient Depletions and Digestion chapter of my first book for free by [signing up for my newsletter](#). You will also receive occasional updates about new research, resources, giveaways, and helpful information.

For future updates, make sure to follow me on [Facebook](#), [Instagram](#), [TikTok](#), and [Pinterest](#)!

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Note: Originally published in April 2017, this article has been revised and updated for accuracy and thoroughness.