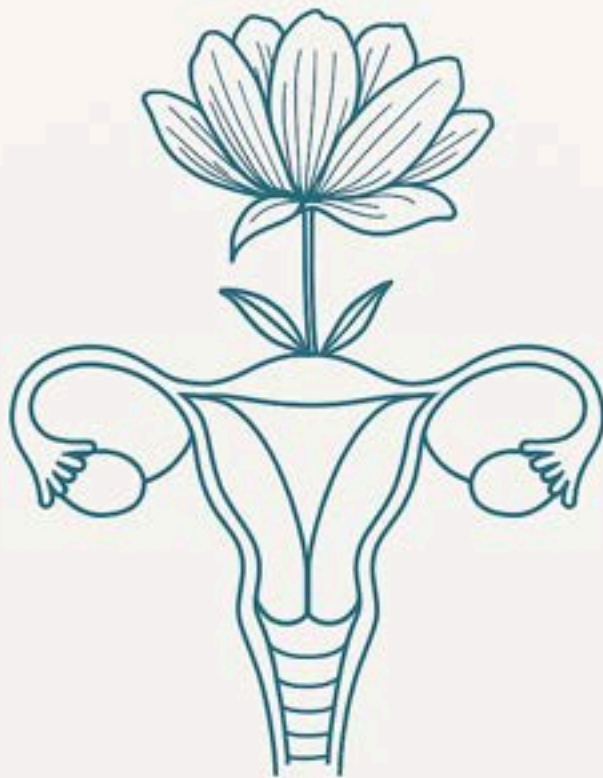


THE ENDOMETRIOSIS REPAIR MANUAL



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The Endometriosis Repair Manual

By Carmen Mair

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Medical Disclaimer: This guide is intended for informational purposes only and should not be considered medical advice. The supplements and lifestyle changes recommended are based on the personal experience of the author and clinical research. Please consult a healthcare provider, functional medicine practitioner, or physician before beginning any new diet, supplement, or lifestyle regimen. Individual needs and tolerances vary, and this guide is not meant to diagnose, treat, cure, or prevent any medical condition.

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Introduction to Endometriosis (What it is and why it's painful)

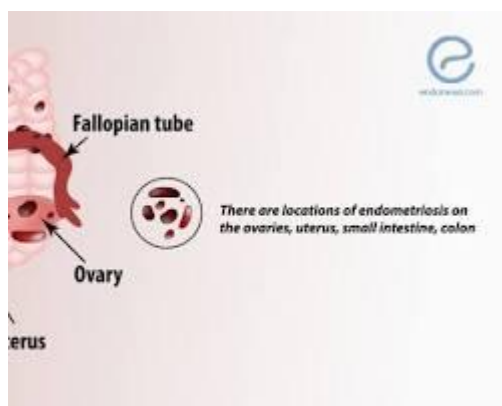
What is Endometriosis

Endometriosis is more than just misplaced tissue. At its core, it's a **chronic, systemic inflammatory condition** where tissue *similar* to the uterine lining grows outside the uterus. These endometrial-like cells often appear on the ovaries, fallopian tubes, pelvic lining, and sometimes even beyond the reproductive organs. But they don't exist in isolation. They're part of a much larger imbalance in the body's immune, hormonal, and detox systems.

Unlike conventional views that reduce endo to "bad tissue in the wrong place," functional and integrative medicine sees endometriosis as a reflection of **deeper dysfunctions**: immune dysregulation, hormone imbalance (particularly unopposed estrogen), gut permeability, liver congestion, and even mitochondrial fatigue. The tissue doesn't just grow. It inflames, scars, and wires the nervous system for chronic pain over time. Add in stress, trauma, and environmental toxins (like plastics and pesticides that mimic estrogen), and you have a perfect storm that fuels flare-ups, fatigue, infertility, and pain.

From a Traditional Chinese Medicine lens, endometriosis may be understood as **blood stasis, cold in the uterus, or liver qi stagnation**, all pointing to a blockage in energy flow, often tied to emotional suppression, poor digestion, or chronic stress. Pain, in this view, is not just physical but **energetic and emotional congestion**.

Most importantly: **your body is not broken**. This is not your fault. Endometriosis is your body's way of signaling imbalance and with the right support, we can shift the internal terrain, lower inflammation, and support healing from the inside out.



www.endonews.com

Endometriosis location

The misplaced endometrial tissue acts like the normal lining of the uterus. It thickens, breaks down, and bleeds with each menstrual cycle. However, this bleeding has no way to escape the body, which can cause pain, inflammation, and scar tissue formation.

Endometriosis is a common condition, affecting an estimated 1 in 10 women of reproductive age. It can cause a variety of symptoms, including:

- Pelvic pain, especially during menstrual periods
- Pain during or after sexual intercourse
- Heavy or prolonged menstrual bleeding
- Painful bowel movements or urination
- Fatigue
- Infertility

The exact cause of endometriosis is unknown to the medical field. Conventional treatments may include hormone therapy, medication to relieve pain and surgery.

Why is endometriosis so painful?

Pain in endometriosis isn't just about where the tissue grows. It's about **how your whole system responds**. What makes endo so excruciating for some (and nearly silent for others) has less to do with the size or number of lesions and more to do with **immune reactivity, nerve sensitization, hormone imbalances, and emotional imprinting**.

On a biological level:

1. **Inflammation:** These endometrial-like cells bleed during your cycle—but unlike uterine tissue, they have no exit. Your body treats this trapped blood like a threat, sparking an inflammatory cascade that swells tissue, irritates organs, and fuels chronic pain.
2. **Nerve Growth + Sensitization:** Endo lesions grow their own nerve supply—meaning they *create pain* and *amplify it*. Over time, the nervous system gets rewired to overreact, even to harmless triggers like a full bladder, ovulation, or gentle movement.
3. **Scar Tissue & Adhesions:** The immune system's attempt to “wall off” these areas can cause nearby organs to fuse together (e.g., ovaries stick to the bowel). This mechanical restriction adds another layer of sharp, stabbing, or tugging pain—especially during periods, sex, or bowel movements.
4. **Estrogen's Role:** Estrogen is a growth signal—and in endometriosis, it acts like fuel on a fire. Without enough progesterone to balance it, estrogen drives both tissue growth and inflammation, intensifying each monthly cycle.

But here's what conventional medicine misses:

Many women with endometriosis also have a **sensitized nervous system**—sometimes due to years of pain, sometimes rooted in unresolved trauma or chronic stress. In these cases, the brain is stuck in a hyper-alert state (fight or flight), and pain is not just processed—it's

amplified. This is why pain can continue even *after* surgery, and why two women with the same diagnosis can have drastically different experiences.

From a psycho-emotional lens:

The womb holds stories, of grief, betrayal, pressure to conceive, shame around sexuality, or not feeling safe in the body. The body keeps the score. And for many, endometriosis pain is as much about what the body is trying to **release** as it is about what's physically present.

Bottom line: Endometriosis pain is multifactorial. It's not in your head—but it *is* shaped by your nervous system, your hormones, your immune responses, and sometimes, your past. Healing starts by recognizing pain as a messenger, not a malfunction.

Where You Can Feel Endometriosis Pain

Pain from endometriosis can show up in unexpected places and often, it doesn't make logical sense. That's because this isn't just a gynecological issue. Endometriosis pain is influenced by **where the lesions are, how inflamed the area is, how your nervous system has adapted**, and sometimes, how your fascia, lymph, and emotional energy are moving (or stuck) in the body.

Common Physical Locations:

- **Pelvis & Lower Abdomen:** The classic endo pain—deep, dull, stabbing, or cramping—often worsens around ovulation or menstruation. Lesions on the uterus, ovaries, and peritoneum create pressure and inflammation.
- **Lower Back & Hips:** Fascia is like cling wrap wrapping all your internal organs—when inflammation spreads, it tugs on surrounding connective tissue. This tension can refer pain into your sacrum, glutes, or even hips.
- **Legs & Sciatic Pathway:** If endo involves the pelvic nerves (especially the sacral plexus or sciatic nerve), pain can radiate down the thighs or buttocks. It may feel like nerve pain, tingling, or heaviness.
- **Bowel & Bladder:** Lesions on the bowel or bladder can cause pain with urination, bowel movements, or even during digestion. Many women are misdiagnosed with IBS or interstitial cystitis because of this overlap.
- **During or After Sex (Dyspareunia):** Deep penetration can hit inflamed tissue or adhesions, triggering sharp pain—or lingering soreness afterward. But this can also be related to **pelvic floor dysfunction** (from years of clenching due to chronic pain or fear).

Nervous System + Fascia = Amplified Pain Map

Pain doesn't just stay where the lesion is—it travels. When inflammation activates nearby nerves, or when fascia tightens to protect inflamed organs, the body begins to **refer pain to distant regions**. Over time, the brain rewires itself into a state of hyper-vigilance, amplifying pain signals even in areas with no active lesions. This is known as **central sensitization**—a form of nervous system burnout.

Emotional & Energetic Pain Pathways

From an energetic or Eastern perspective, endo pain is often described as “stuck blood” or “cold womb”—but it's also a sign of **emotional holding**. Some women feel pain in their chest (grief), throat (unspoken truth), or jaw (suppressed rage). These are not random—**your body stores emotion where it's been forced to hold the most**.

What Else Affects Endometriosis Pain

Several factors can increase the pain caused by endometriosis:

1. **Menstrual Cycle:** Pain often worsens during your period due to hormonal changes, especially high estrogen levels, which cause the endometrial tissue to grow and break down.
2. **Stress:** High stress levels can increase inflammation and muscle tension, which makes pain worse.
3. **Diet:** Foods that cause inflammation, like processed foods or those high in sugar and trans fats, can make symptoms worse.
4. **Hormonal Imbalances:** Excess estrogen or low progesterone can fuel endometrial growth, worsening pain.
5. **Physical Activity:** For some, intense physical activity can trigger or worsen pelvic pain.

Root Causes for Endometriosis

Endometriosis doesn't just happen. It's not “bad luck,” a random rebellion of your uterus, or a punishment for being a woman. Endometriosis is the end expression of **multiple upstream imbalances**, immune, hormonal, microbial, and emotional that have gone unaddressed for years.

While the traditional model floats ideas like retrograde menstruation or embryonic cell migration, these are only fragments of the picture. If we want to **truly heal**, we need to zoom out and look at what's creating the internal environment that allows endo to grow, spread, and cause pain.

Immune System Dysfunction

Your immune system should clear out endometrial-like cells that end up in the wrong place. But in endo, **immune surveillance is impaired**. Macrophages, NK cells, and dendritic cells don't do their job effectively, allowing ectopic tissue to implant and grow. This also means more inflammation, less resolution, and often... coexisting autoimmunity.

Estrogen Dominance

Too much estrogen or poorly metabolized estrogen acts like fertilizer for endo tissue. But it's not just "high estrogen levels." It's about:

- Low progesterone to counterbalance it
- Impaired detox pathways (especially in the liver and gut)
- Recirculation of estrogen via the **estrobolome** (gut bacteria that reactivate estrogen)
- **Also: Some women with endo don't have high estrogen but they have estrogen receptor hypersensitivity or poor clearance.**

Genetics and Family History

There is evidence that endometriosis may run in families. If a woman's mother or sister has the condition, she is more likely to develop it herself. Genetics may predispose some women to develop endometriosis, though environmental or lifestyle factors are also believed to play a role.

Environmental Toxins

Some studies suggest that exposure to environmental toxins, such as dioxins and polychlorinated biphenyls (PCBs), might contribute to the development of endometriosis. These chemicals can disrupt hormonal balance and increase inflammation. Environmental factors and exposure to hormone-disrupting chemicals may increase the risk of developing endometriosis by affecting estrogen levels and immune function.

Lymphatic or Vascular Spread

This theory suggests that endometrial cells may travel through the lymphatic system or blood vessels to distant parts of the body. This could explain how endometrial tissue is sometimes found in areas far from the uterus, such as the lungs or even the brain. This theory provides an explanation for how endometrial tissue can spread beyond the pelvic region, though it is not the primary theory for most cases of endometriosis.

Liver Congestion & Detox Blockages

The liver is your primary estrogen processor. If it's overwhelmed by toxins (from food, plastics, mold, alcohol, meds), it can't clear estrogen efficiently, leading to recirculation and buildup. Functional detox isn't a juice cleanse, it's phase 1 + 2 liver support with amino acids, B vitamins, sulfur, and antioxidants. Milk thistle and dandelion help, but they're only part of the picture.

Trauma + Nervous System Dysregulation

This is the most overlooked root cause. Many women with endo have a history of trauma, sexual, emotional, birth, medical gaslighting, or inherited ancestral trauma.

This creates a **frozen, hyper-vigilant nervous system** that keeps the body in sympathetic dominance (fight/flight), promoting inflammation, suppressing detox, and dysregulating hormones. Pain isn't just physical, **it's stored memory**. Until the nervous system feels safe, healing is limited.

Other Theories (With Limited Clinical Impact):

- **Retrograde menstruation:** Found in ~90% of menstruating women—yet only 10% develop endo. So it's clearly *not* sufficient.
- **Embryonic cell transformation / coelomic metaplasia:** Interesting theories, but they don't explain systemic inflammation, immune dysfunction, or why lifestyle changes help.
- **Surgical seeding or vascular spread:** May explain how it gets there—not *why* it's allowed to thrive.

TCM Insight:

In Traditional Chinese Medicine, the root of endometriosis lies in **blood stasis, liver qi stagnation, and cold invasion**. These are energetic imbalances resulting from:

- Suppressed emotions
 - Chronic stress
 - Digestive weakness
 - Exposure to cold
- TCM treatment would focus on warming the womb, moving blood, releasing stuck liver energy, and restoring flow.

Why This Guide Focuses on Inflammation and Estrogen Dominance

Endometriosis is not a one-cause condition, it's a **multifactorial, systemic imbalance** involving immune dysfunction, hormonal dysregulation, microbiome shifts, liver detox overload, environmental toxins, and often, emotional trauma. Healing is not about chasing one root cause, it's about **changing the terrain** that allows endometrial tissue to grow, inflame, and hurt.

That said, two core drivers consistently show up across almost every case, and, more importantly, are *highly responsive to food, supplements, and lifestyle shifts*:

Chronic Inflammation: The Pain Amplifier and Disease Accelerator

Inflammation is your body's attempt to clean up until it becomes the fire that never stops burning. When endometrial-like tissue bleeds where it doesn't belong, the immune system reacts with an inflammatory storm. Over time, this not only causes pain, it *fuels adhesion formation, nerve sensitization, organ fusion*, and even fertility issues.

Reducing systemic inflammation isn't just symptom relief, it's root cause medicine. By calming the immune system through food, micronutrients, targeted botanicals, and nervous system support, we can dramatically reduce the pain, pressure, and progression of endometriosis.

Estrogen Dominance: Fertilizing the Fire

Estrogen, in balance, is a beautiful hormone. But when it becomes **unopposed by progesterone, poorly metabolized by the liver, or recirculated by the gut**, it becomes a growth signal that drives endometrial tissue to expand, inflame, and resist healing.

This isn't just about *too much* estrogen, it's about:

- **Poor detoxification** (liver overload, sluggish bile, lack of phase 2 cofactors)
- **Microbiome dysregulation** (the estrobolome reactivating cleared estrogen)
- **Receptor hypersensitivity** in endo lesions
- **Low progesterone from stress, HPA dysfunction, or anovulation**

Addressing estrogen dominance through targeted nutrition, detox support, and hormone-stabilizing strategies is a direct way to **cut off the fuel supply** to endometrial overgrowth.

Why Focus Here First?

While there are other contributors, autoimmune tendencies, trauma patterns, toxin load, these are not always easy to measure or influence quickly. **Inflammation and estrogen dominance, however, give us leverage.** They respond well to integrative interventions. They allow you to see tangible shifts, reduced pain, more regular cycles, improved energy, often within weeks.

But we won't ignore the rest of the picture. Throughout this guide, you'll also find:

- Nervous system tools to downshift out of chronic stress
- Gut-healing principles to support estrogen clearance and immune balance
- Detox strategies that go beyond green juices and into methylation, bile flow, and real terrain change

This is not a quick fix. It's a **deep rebalancing process**. And inflammation + estrogen dominance are simply the doors we'll walk through first because they open access to everything else.

Inflammation: The Hidden Engine Behind Endometriosis

Inflammation is not the enemy, it's your body trying to protect and repair. But in endometriosis, this protection becomes overactive and misdirected. Instead of healing tissue, **it keeps wounds open**. It's not just a side effect. It's the **central mechanism driving pain, lesion growth, scarring, and immune dysfunction**.

What Triggers the Inflammatory Cascade in Endo?

1. Ectopic Tissue Breakdown:

Each month, endometrial-like tissue outside the uterus responds to hormonal signals by thickening and bleeding. But with no exit route, this blood irritates the surrounding tissue, leading to an aggressive immune response.

2. Immune Confusion:

The immune system struggles to clear this "foreign" tissue and instead of resolving it, it attacks the area repeatedly, releasing cytokines, prostaglandins, and histamines that worsen swelling, pain, and tissue damage.

3. Nerve Growth + Sensitization:

Inflammatory chemicals (like TNF-alpha and IL-6) stimulate nerve growth into lesions, making them hyper-sensitive. This is why even small lesions can cause debilitating pain, your nerves are inflamed and rewired to overreact.

4. Estrogen Feeds Inflammation:

Estrogen increases COX-2 activity and prostaglandin production, both of which amplify inflammatory signaling. Inflammation then increases aromatase, which converts testosterone into more estrogen. *Vicious cycle alert.*

Signs You're Inflamed (Beyond Just Period Pain)

- Severe bloating or "endo belly"
- Fatigue that feels like you're dragging yourself through the day
- Joint or muscle aches unrelated to movement
- Random food sensitivities or histamine intolerance
- Mood swings, anxiety, or brain fog—especially premenstrually
- Post-surgery flare-ups or wound healing issues

Functional Medicine's View: The Root of the Fire

Inflammation doesn't start in the pelvis. It's often driven by:

- Leaky gut + endotoxins (LPS)
- Environmental toxin exposure (BPA, dioxins)
- Blood sugar instability and insulin resistance

- Mitochondrial dysfunction and oxidative stress
- Nervous system dysregulation (sympathetic dominance)
- Unprocessed emotional stress, trauma, or grief that keeps the body in a chronic “threat” state

This means your pelvic inflammation is systemic not just local. Healing must happen from the inside out.

How This Guide Helps You Reduce Inflammation

Throughout this program, you’ll:

- Identify and eliminate inflammatory foods (without becoming obsessed or restricted)
- Add potent anti-inflammatory nutrients like omega-3s, magnesium, sulforaphane, curcumin, and quercetin.
- Heal the gut lining and support liver detox (so you stop recycling inflammatory estrogens)
- Regulate blood sugar and insulin levels
- Introduce **somatic practices that calm your nervous system (which *directly* lowers inflammation)**

From a Mind-Body Lens:

In Chinese medicine, inflammation is often the result of “internal heat,” liver qi stagnation, or blood stasis. This can arise from:

- Suppressed emotions like anger or grief
- A lifestyle that burns too hot (overwork, overtraining, overstimulating)
- Poor digestive fire or “cold in the womb”

True healing means not just cooling the fire but asking: Why was the fire lit in the first place?

Estrogen Dominance: When a Vital Hormone Becomes a Driver of Disease

Estrogen is not the problem but **estrogen without balance is**.

In the right amounts, estrogen builds the uterine lining, keeps skin glowing, boosts mood, supports bones, and maintains vaginal health. But when estrogen **dominates over progesterone**, or when the body can’t metabolize and eliminate it properly, it fuels endometrial tissue growth, inflammation, and pain.

This is what we call **estrogen dominance** and it’s one of the most potent accelerators of endometriosis.

What Is Estrogen Dominance *Really*?

There are **three types** of estrogen dominance:

1. **Too much estrogen overall** (e.g., from environmental toxins, high body fat, or poor detox)
2. **Too little progesterone to balance it** (e.g., from stress, anovulation, perimenopause)
3. **Impaired estrogen metabolism or clearance** (e.g., sluggish liver, constipated gut, low bile flow)

In any of these cases, the result is the same: **more estrogen stimulating more tissue growth and inflammation**, with no counterbalance to shut it off.

Before We Talk About Food:

You can eat all the broccoli and take all the supplements, but if your body can't metabolize and eliminate estrogen properly, you'll stay stuck in a hormonal loop.

That's why the next section dives deep into **how to use food as medicine**—not just to reduce inflammation, but to:

- Support liver detox and bile flow
- Improve gut health and estrogen excretion
- Regulate blood sugar and increase SHBG naturally
- Create the internal terrain where hormones come back into balance

The Estrogen–Inflammation Vicious Cycle

Estrogen increases inflammatory enzymes (COX-2), promotes mast cell activity, and enhances histamine responses. It also fuels **endometrial cell proliferation**, thickening the lesions and worsening immune dysfunction.

Inflammation increases **aromatase**, the enzyme that turns androgens into *more* estrogen. This creates a self-feeding loop of inflammation → estrogen → tissue growth → more inflammation.

Factors That Create Estrogen Dominance

- **Poor Liver Detox:** Your liver processes estrogen in 3 phases. If phase 1 is overactive (e.g., from toxins) but phase 2 is sluggish (e.g., low B6, magnesium, or methyl groups), estrogen metabolites recirculate.
- **Low SHBG (Sex Hormone Binding Globulin):** A liver protein that binds and neutralizes excess estrogen. Low in women with insulin resistance, PCOS, or thyroid

dysfunction.

- **Gut Dysbiosis + Estrobolome Issues:** The estrobolome (your estrogen-clearing bacteria) can either detox or re-activate estrogen. When imbalanced, it sends estrogen *back into circulation*.
- **Chronic Stress & Low Progesterone:** If you're not ovulating regularly or you're in a chronic fight-or-flight state, you won't make enough progesterone. This leaves estrogen unopposed.
- **Exposure to Endocrine Disruptors:** Plastics (BPA, phthalates), pesticides, personal care products, and even receipts contain estrogen-mimicking chemicals that **bind to your receptors** like imposters.

In Traditional Chinese Medicine, estrogen dominance might be seen as **liver qi stagnation and phlegm accumulation**, a system that's **overburdened, stagnant, and overheated**. When emotions are suppressed (especially anger, resentment, and shame), the liver stagnates, and blood can't flow freely. The result? **Excessive tissue growth, irritability, painful periods, and emotional overwhelm**.

How This Guide Helps You Balance Estrogen Naturally

You won't see a quick fix here. Instead, we'll:

- Support **phase 1 and 2 liver detox** (through sulforaphane, B vitamins, taurine, and glycine)
- Balance the gut microbiome to optimize **estrobolome** function
- Reduce exposure to environmental xenoestrogens (plastics, pesticides, etc.)
- Increase **SHBG naturally** by stabilizing blood sugar and improving thyroid health
- Support healthy ovulation and **boost natural progesterone** through stress regulation, seed cycling, and nutrient repletion
- Introduce somatic and emotional release tools to **unblock stagnant liver energy**

Quick Self-Check: Signs of Estrogen Dominance

- Heavy or clotty periods
- Sore breasts premenstrually
- Irritability, anxiety, or mood swings (especially days 21–28)
- Cyclical migraines or headaches
- Spotting before your period
- Trouble sleeping mid-cycle
- Bloating and water retention

Estrogen dominance is not about *killing estrogen*. It's about restoring the pathways that **process, clear, and balance it**. When you lower the estrogen load and support progesterone naturally, you slow down the fire that fuels endometriosis and give your body room to heal.

Possible Conditions Linked to Estrogen Overload:

- **Fibroids and Endometriosis:** Excess estrogen might contribute to the growth of fibroids (uterine tumors) and endometriosis (uterine lining tissue growing outside the uterus).
- **Breast Cancer:** While not a direct cause, some studies suggest a possible link between long-term unopposed estrogen and an increased risk of certain breast cancers <https://www.cancer.gov/types/breast/hp>.
- **Autoimmune Conditions:** The theory is that estrogen dominance might play a role in triggering or worsening autoimmune diseases like lupus or rheumatoid arthritis.

Estrogen's journey out of the body

Estrogen's transport out of the body is a two-part process: metabolism and excretion. Here's a breakdown:

Part 1: Metabolism (Primarily in the Liver)

- Estrogen, whether produced in the ovaries, fat cells, or adrenal glands, gets sent to the liver. There, it's metabolized into **estrogen metabolites**, which are either protective or harmful depending on your liver's enzyme activity, nutrient status (like B6, B12, folate), and toxin load.

Part 2: Excretion (Primarily via Bile + Stool, Secondarily via Urine)

- Once metabolized, estrogen must be bound to bile (produced in the liver) and sent to the intestines to be eliminated in stool. Some estrogen also exits via the kidneys into the urine.

Where Things Go Wrong:

- If **liver detox is sluggish**, you make more inflammatory or carcinogenic estrogen metabolites (like 4-OH or 16-OH estrone).
- If **bile flow is poor** (often from low-fat diets, gallbladder issues, or sluggish liver), estrogen gets stuck.
- If **gut bacteria are imbalanced**, your estrobolome reactivates cleared estrogen, **sending it back into circulation**.

Additional Players

SHBG (Sex Hormone Binding Globulin):

Sex Hormone Binding Globulin (SHBG) is a protein that binds to excess estrogen and testosterone, reducing how much is "free" and active in the body. When SHBG is low,

estrogen floats around unchecked. When it's optimal, it acts like a sponge, **soaking up excess hormones and protecting your cells**.

High SHBG = less available estrogen = improved symptoms.

Low SHBG = more circulating estrogen = inflammation and estrogen dominance.

Factors affecting SHBG levels include:

Increases SHBG	Decreases SHBG
Estrogen (e.g. birth control pill)	Insulin resistance
Hyperthyroidism	Hypothyroidism
Weight loss / lower body fat	High sugar or processed food diets
Certain medications (anticonvulsants)	PCOS, high androgens
Aging	Liver dysfunction

Note: While the pill increases SHBG, it can suppress ovulation, lower progesterone, and impact gut and liver function which may **worsen root causes of endometriosis** long-term.

How to Eat to Reduce Inflammation & Clear Estrogen Naturally

Food is not just fuel, it's *information*. Every bite communicates with your hormones, immune system, gut, and detox pathways. For women with endometriosis, the goal isn't just to "eat clean". It's to **create a low-inflammatory, high-detox terrain where estrogen gets processed, inflammation goes down, and pain starts to ease**.

This isn't a weight loss plan. It's a **hormone-healing protocol** rooted in whole food medicine.

Core Principles of the Endo-Supportive Diet

- **Reduce Inflammatory Load:** Remove foods that spike cytokines, histamine, or gut permeability.
- **Support Estrogen Metabolism:** Feed the liver, bile, and microbiome what they need to break down and excrete estrogen.
- **Nourish the Gut:** Heal leaky gut, reduce endotoxins, and prevent estrogen recirculation.
- **Regulate Blood Sugar:** High insulin = low SHBG = more free estrogen.
- **Boost Antioxidants:** Endo is driven by oxidative stress. You need color, polyphenols, and sulfur-rich foods.
- **Balance Hormones Gently:** Through food, not synthetics.

Best Foods for Endo Healing (And Why)

- **Cruciferous vegetables** (e.g., broccoli, kale, cabbage, bok choy, rocket):
Rich in sulforaphane, which supports phase 2 liver detox and helps metabolize estrogen. High in fiber to bind and eliminate excess hormones through the gut.
- **Bright-colored vegetables** (e.g., carrots, beets, pumpkin, sweet potato):
Provide antioxidants, support the liver, and feed beneficial gut bacteria. Their fiber content aids estrogen excretion.
- **Low-glycemic fruits** (e.g., berries, citrus, pomegranate):
Packed with antioxidants and vitamin C to reduce oxidative stress without spiking blood sugar.
- **Healthy fats** (e.g., olive oil, avocado, flaxseed, chia seeds, hemp seeds):
Support hormone synthesis, calm inflammation, and help modulate immune response.
- **Omega-3 rich foods** (e.g., wild salmon, sardines, anchovies, flaxseeds):
Provide EPA and DHA to reduce prostaglandins and chronic pelvic inflammation.
- **Clean protein sources** (e.g., organic eggs, wild-caught fish, pasture-raised poultry, and legumes if tolerated):
Essential for detoxification, hormone production, immune modulation, and blood sugar stability.
- **Zinc- and magnesium-rich foods** (e.g., pumpkin seeds, tahini, spinach, oysters):
Support hormone regulation, calm the nervous system, and reduce inflammation.
- **Anti-inflammatory herbs and spices** (e.g., turmeric, ginger, cinnamon, parsley):
Reduce inflammation, support digestion, and assist liver function.

Worst Foods for Endometriosis (and Why)

- **Gluten-containing grains** (e.g., wheat, barley, rye):
Can increase intestinal permeability ("leaky gut") and trigger immune activation. Often linked to flare-ups in sensitive individuals.
- **Dairy products (especially A1 casein-containing dairy):**
Can be pro-inflammatory and increase insulin and IGF-1, which fuel endometrial tissue growth and worsen bloating and histamine reactions.
- **Refined sugar and processed carbohydrates** (e.g., pastries, white bread, soda):
Spike insulin, lower SHBG (sex hormone-binding globulin), and contribute to inflammation and hormonal imbalance.
- **Refined seed oils** (e.g., canola, soybean, sunflower oil):
High in omega-6 fatty acids, which convert into arachidonic acid and increase inflammatory prostaglandins.
- **Alcohol** (especially in excess):
Burdens liver detox pathways, disrupts hormonal clearance, and increases gut permeability.
- **Processed meats and conventionally raised animal products** (e.g., deli meats, bacon, hormone-fed beef): Contain added hormones, antibiotics, and inflammatory fats that disrupt the endocrine system and gut microbiome.

Food Combining & Timing Strategies

Morning:

- **Start with protein + fiber + fat:** This keeps blood sugar stable, increases SHBG, and sets up the nervous system for calm.
- Example: 2 eggs sautéed in olive oil with kale + half avocado + 1/2 cup sweet potato.

Midday:

- **Build the biggest meal of the day:** Your digestion is strongest here.
- Include liver-supportive foods like beets, cruciferous veg, and good fats.
- Example: Baked salmon with roasted carrots, rocket salad, and quinoa.

Evening:

- **Go lighter + gut-soothing:** Focus on warming, cooked foods that calm the nervous system and support the liver.
- Example: Ginger-carrot soup with grilled zucchini and turmeric chicken.

Bowel Tip:

- **Aim for 1-2 bowel movements per day.** Estrogen is cleared via stool. If you're not pooping daily, you're recycling hormones.

The Power of Strategic Keto: Use It in the Follicular Phase to Lower Inflammation

Keto isn't for everyone long term but when used **cyclically and strategically**, it can be a powerful anti-inflammatory tool for women with endometriosis.

The **follicular phase** (Day 1 to ovulation) is the best window to leverage keto-style eating. During this time:

- Estrogen naturally rises and is less sensitive to suppression
- Progesterone is low (so there's no risk of impeding its production)
- The body is more insulin-sensitive and resilient to carb restriction
- Autophagy (cellular clean-up) is more active, especially early in the cycle

Benefits of Keto in the Follicular Phase:

- **Rapidly lowers inflammation and prostaglandins**
- **Increases SHBG** by improving insulin sensitivity
- **Improves focus and mood** when brain fog is usually worst (early follicular)
- **Supports detoxification** by reducing liver and gut load from blood sugar swings
- **Enhances mitochondrial repair**—especially important post-period when energy is low

What This Looks Like Practically (Days 1–13 of Cycle):

Meal Component	Example
Protein	Eggs, wild salmon, grass-fed beef, organic chicken
Fats	Avocado, olive oil, coconut oil, chia, flax, ghee
Non-starchy veg	Zucchini, spinach, kale, mushrooms, cauliflower, cucumber

Optional	1/2 avocado + lemon as a light breakfast if appetite is low
Beverages	Herbal teas, bone broth, water with sea salt, dandelion root tea

Avoid heavy fasting during menstruation if adrenals are weak. Instead, eat light but nourishing.

Once You Ovulate: Shift Out of Keto Gently

After ovulation, your body needs:

- **More carbohydrates** to support progesterone production
- **More serotonin precursors** for mood and sleep
- **Stable energy** to prevent PMS and cravings

Around **Day 14**, begin reintroducing **carb-rich whole foods** like:

- Sweet potato
- Pumpkin
- Cooked carrots or beets
- Quinoa or lentils (if tolerated)
- Berries, banana, or apple

This gives your luteal phase the fuel it needs while keeping insulin in check.

Summary: Your Anti-Inflammatory Food Cycle

Cycle Phase	Focus	Macronutrient Balance
Menstruation (Day 1–4)	Repair + anti-inflammatory	Moderate protein/fat, higher complex carbs
Follicular (Day 5–13)	Detox + inflammation reset	Functional keto: high fat, moderate protein, low carb

Ovulation (Day 14–20)	Transition + ovary support	Add carbs back in, reduce fat slightly
Luteal (Day 21–28)	Progesterone support + mood	Moderate protein/fat, higher complex carbs

Cycle-Synced Keto Strategy

Your hormones aren't static, so your nutrition shouldn't be either. That's why a **cycle-synced approach to keto** offers a powerful, sustainable path for women with endometriosis. Rather than following a rigid one-size-fits-all low-carb protocol, we align your nutrition with the natural hormonal shifts across your menstrual cycle. This allows you to maximize the benefits of ketosis, like reduced inflammation and improved energy, *without disrupting your progesterone, burning out your adrenals, or worsening PMS.*

Let's walk through how to adapt your food and macronutrient intake across each phase of the cycle so your diet works *with* your body, not against it.

Menstruation (Days 1–4): Repair & Gentle Support

Hormones are at their lowest. Energy is down. Your body is shedding the uterine lining and needs warmth, rest, and gentle nourishment, not restriction.

Goal: Anti-inflammatory support, gentle detox, comfort foods

Focus: Moderate protein and fat, gentle carbs to support cortisol and energy

Best foods: Bone broth, soft-cooked greens, sweet potato, soups, wild-caught fish, turmeric, ginger

Avoid: Hard fasting or aggressive keto if you feel depleted

This is the time to nourish, not push. Think: grounding, warming, slow.

Follicular Phase (Days 5–13): Detox & Strategic Keto

Estrogen begins to rise. Energy, motivation, and insulin sensitivity improve. This is the best time to lean into **functional keto** and cellular reset.

Goal: Support estrogen detox, lower inflammation, leverage ketosis for fat-burning and clarity

Focus: High fat, moderate protein, low carb

Use functional keto here.

What This Looks Like:

- **Protein:** Eggs, wild salmon, grass-fed beef, organic chicken
- **Fats:** Avocado, olive oil, coconut oil, ghee, flax, chia

- **Non-starchy veg:** Zucchini, kale, cauliflower, cucumber, spinach
- **Optional light breakfast:** ½ avocado with lemon + salt if not hungry
- **Hydration:** Bone broth, dandelion tea, water with sea salt

This is where keto works best: your energy rises, blood sugar stabilizes, and inflammation drops fast.

Ovulatory Phase (Around Day 14): Transition + Ovary Support

Estrogen peaks. LH surges. Ovulation occurs. Your body is expending energy and needs additional **carbohydrate support** to maintain balance and ease the shift into the luteal phase.

Goal: Ease the transition from keto, support ovulation, protect energy

Focus: Begin increasing complex carbs + slightly lower fat

Ideal carbs to reintroduce:

- Sweet potato
- Pumpkin
- Cooked carrots or beets
- Quinoa or lentils (if tolerated)
- Berries, banana, or stewed apple

Think of this phase as the bridge—gently moving out of ketosis to prep your body for the progesterone-heavy luteal phase.

Luteal Phase (Days 15–28): Progesterone Support + Craving Management

Progesterone takes center stage. Appetite increases. PMS symptoms may appear if blood sugar, magnesium, or serotonin are low. Strict keto here can backfire, causing mood swings, insomnia, and cravings. Now is the time to **reintroduce healthy carbs**, deeply nourish your adrenals, and support emotional resilience.

Goal: Stabilize blood sugar, ease PMS, and support hormone synthesis

Focus: Moderate protein and fat, higher complex carbs

Key nutrients: Magnesium, B6, tryptophan (for serotonin), electrolytes

Best foods for this phase:

- Roasted root vegetables (carrots, beets, parsnips)
- Cooked grains (quinoa, millet, oats if tolerated)
- Warming stews, slow-cooked meats, dark leafy greens
- Pumpkin seeds, tahini, sunflower seeds
- Dark chocolate (min. 70%)
- Magnesium-rich foods: spinach, pumpkin seeds, avocado, dark choc

- Electrolyte-rich: bone broth, coconut water, Himalayan salt

Give yourself permission to eat more carbs during this phase. They support progesterone, calm your nervous system, and help you sleep.

Quick Summary: Anti-Inflammatory Food Cycle by Phase

Cycle Phase	Focus	Macronutrient Balance
Menstruation (Day 1–4)	Repair + anti-inflammatory	Moderate protein/fat, slightly higher complex carbs
Follicular (Day 5–13)	Detox + inflammation reset	Functional keto: high fat, moderate protein, low carb
Ovulation (Day 14–20)	Transition + ovary support	Add carbs back in, reduce fat slightly
Luteal (Day 21–28)	Progesterone support + mood	Moderate protein/fat, higher complex carbs

How to Transition Out of Keto Safely

(Without Energy Dips, Hormonal Crash, or Binge Cravings)

Strict keto has its place, but staying in ketosis too long can backfire for women, especially in the **second half of the menstrual cycle**. That’s when progesterone rises and your body needs **more carbohydrates** to support hormone production, mood regulation, and metabolic stability. If you stay too low-carb during this time, you risk insomnia, anxiety, sugar cravings, PMS, and even worsened estrogen dominance.

This is where a **smart, gradual transition out of keto** becomes essential—not just to prevent symptoms, but to support long-term hormone balance.

Why Transition Slowly?

- Avoids rebound weight gain or binge eating
- Supports steady progesterone production
- Prevents blood sugar crashes and mood swings

- Allows liver and gut time to adapt to more carbs
- Maintains stable energy and reduces cravings

Step-by-Step Guide to Transitioning Out of Keto

1. Increase Carbs Slowly

Start by adding **10–20g of carbohydrates per day** over 5–7 days. Pay attention to:

- Energy levels
- Digestion
- Sleep quality
- Cravings

If any symptoms worsen, slow down the reintroduction and prioritize cooked, gut-friendly carbs.

2. Choose Nutrient-Dense, Hormone-Friendly Carbs

Focus on **whole-food, low-inflammatory carbs** that support your cycle, not spike blood sugar.

Great transition carbs:

- Sweet potato
- Pumpkin
- Carrots & beets
- Stewed apples or pears
- Quinoa or soaked lentils (if tolerated)
- Berries, banana, pomegranate
- Butternut squash

Avoid ultra-processed carbs, gluten, and sugar—which disrupt gut and hormone balance.

3. Adjust Your Macronutrient Ratios Gently

Here's a sample breakdown as you exit keto:

Initial Transition (50g carbs/day):

- Carbs: 50g (200 cal ~11%)
- Protein: 80g (320 cal ~18%)
- Fat: 137g (1230 cal ~68%)

Later Transition (100g carbs/day):

- Carbs: 100g (400 cal ~22%)
- Protein: 80g (320 cal ~18%)
- Fat: 120g (1080 cal ~60%)

This keeps fat high initially but allows a gradual carb reintroduction while reducing fat over time.

4. Shift According to Your Cycle

When to increase carbs most:

- **Late luteal phase (PMS week):** To support serotonin and reduce anxiety
- **Days 1–3 (menstruation):** To replenish nutrients lost in bleeding and reduce cortisol burden
- **After ovulation (around Day 15):** To support the energy demands of the luteal phase

5. Electrolytes Still Matter!!!

As you add more carbs, your body will hold more water. This doesn't mean you're bloated or inflamed, it's a **normal response**. But you'll still need to **monitor electrolytes**, especially magnesium and potassium, to prevent fatigue and headaches. Please see the next chapter for more detailed information.

6. Listen to Your Body

Signs you're transitioning too fast:

- Bloating or digestive upset
- Energy crashes
- Sugar cravings or mood swings
- Trouble sleeping or brain fog

Slow down, add carbs only at night, or choose easier-to-digest sources like cooked squash or fruit.

Summary: Key Guidelines for Transitioning Out of Keto

- Increase carbs slowly (10–20g/day)
- Favor whole food carbs over processed
- Keep fat higher during the transition, then gradually reduce
- Align your shift with your cycle—especially Days 15–28 and Days 1–3
- Support your liver and gut to handle increased metabolic load
- Monitor energy, cravings, sleep, and mood—not just macros

“This isn’t falling off the wago, it’s responding to your body. You’re not breaking the rules. You’re finally learning how to listen to your hormones.”

Electrolytes & Micronutrients: The Silent Pillars of Hormone & Inflammation Balance

You can eat perfectly and still feel flat, foggy, or fatigued if your **electrolytes and micronutrients** are off. This is especially true on a ketogenic or anti-inflammatory diet, where natural water loss and dietary restrictions can lead to subtle but significant deficiencies.

Electrolytes regulate fluid balance, nerve signaling, muscle function, and energy. Micronutrients drive the detox, hormone, and immune pathways we’re trying to optimize. If these are depleted, your body stays in survival mode no matter how good your macros are.

Let’s explore the **essential minerals and micros** that need to be on your radar, especially when eating low-carb or cycling in and out of keto.

Electrolytes First: The Big Three

Sodium

- Why It Matters: Supports adrenal function, nerve signaling, blood pressure, and hydration. A lack of sodium is the main reason people feel “keto flu.”
- Sources: Sea salt, bone broth, olives, pickles (without added sugar), mineral water
- Goal: 3,000–5,000 mg/day on a keto or anti-inflammatory diet
- Tip: Add ¼–½ tsp sea salt to water in the morning for a hydration boost

Potassium

- Why It Matters: Balances sodium, supports nervous system and blood pressure, reduces water retention and bloating (common in PMS and luteal phase)
- Best Sources: Avocados, spinach, Swiss chard, mushrooms, salmon, pumpkin seeds
- Goal: 2,500–3,500 mg/day
- Watch for: Low potassium can lead to fatigue, constipation, muscle cramps, and cravings

Magnesium

- Why It Matters: Crucial for over 300 enzymatic reactions—including **estrogen metabolism, blood sugar control, mood, sleep, and PMS regulation**
- Best Food Sources: Pumpkin seeds, almonds, spinach, dark chocolate (min. 70%), avocado
- Goal: 300–400 mg/day

- Depleted by: Stress, menstruation, alcohol, low-carb diets

Best Magnesium Supplements (By Need)

Form	Best For
Magnesium glycinate	Sleep, anxiety, PMS, nervous system
Magnesium citrate	Constipation, digestion
Magnesium malate	Chronic fatigue, fibromyalgia
Magnesium taurate	Cardiovascular health
Magnesium L-threonate	Cognitive support, brain fog

Tip: Avoid magnesium oxide, poor absorption and mostly a laxative.

Key Micronutrients for Endometriosis Healing

These nutrients are often depleted in women with chronic inflammation, hormone imbalances, or gut issues and are essential for estrogen detox, immune modulation, and tissue repair.

Zinc

- Supports ovulation, immune function, and tissue repair
- Found in pumpkin seeds, oysters, red meat, tahini

Vitamin D

- Modulates inflammation, mood, and immune tolerance
- Get tested! Aim for 40–60 ng/mL. If low, supplement with D3 + K2

Vitamin B6 (Pyridoxal-5-Phosphate)

- Required for progesterone synthesis, estrogen clearance, and calming PMS
- Found in turkey, bananas, avocado, and sunflower seeds
- Active form (P5P) is best absorbed

Vitamin C

- Key antioxidant that supports detox and lowers prostaglandin-driven pain
- Found in citrus, kiwi, bell peppers, broccoli, berries

Choline

- Essential for liver detox and estrogen metabolism
- Found in egg yolks, liver, and lecithin

Selenium

- Crucial for thyroid health and estrogen detox
- Found in Brazil nuts (just 1–2 per day!)

Summary: Why Micros + Electrolytes Matter

“If macronutrients are the builders, electrolytes and micros are the project managers. Nothing runs without them.”

- **Low magnesium = cramps, cravings, irritability, sleep issues**
- **Low potassium = bloat, fatigue, and adrenal stress**
- **Low sodium = dizziness, nausea, and burnout on keto**
- **Low B6 = poor progesterone, estrogen dominance, and PMS**
- **Low zinc = poor healing, immune dysregulation, and irregular ovulation**

The Supplement Regimen That Supports Real Healing

Supplements aren't magic pills but when chosen wisely and layered with intention, they become powerful allies in restoring hormonal balance, reducing inflammation, shrinking lesions, and supporting detox pathways in endometriosis.

This chapter outlines the most effective supplements backed by clinical research and functional medicine wisdom. You'll learn not just *what* to take, but *why*, *how much*, *when*, and what to watch for, so you can use supplements to heal, not guess.

Reminder: Supplements work best when paired with the anti-inflammatory nutrition, lifestyle, and cycle-synced strategies you've already learned. They amplify healing but they don't replace it.

Core Protocol (Start Here)

These are the foundational nutrients almost every woman with endometriosis can benefit from especially during active pain, inflammation, or estrogen dominance.

Omega-3 Fatty Acids (EPA + DHA)

Why: Reduces pelvic inflammation, modulates immune function, and lowers prostaglandins that trigger pain

Dose: 3,000 mg EPA + DHA combined per day

Tip: Choose IFOS-certified fish oil or algae oil (for plant-based). Enteric-coated softgels reduce fishy aftertaste.

Curcumin (Turmeric Extract)

Why: Inhibits NF-kB, prostaglandins, and other inflammatory pathways; may reduce lesion size and pain

Dose: 2,000 mg/day with black pepper extract (piperine)

Best Form: Liposomal or phytosomal for enhanced absorption

N-Acetyl Cysteine (NAC)

Why: Precursor to glutathione (master antioxidant); supports liver detox of excess estrogen and shrinks cysts

Dose: 1,200 mg/day, split in two doses

Tip: Take on an empty stomach—morning and midafternoon work best

Magnesium

Why: Calms the nervous system, reduces cramps, supports hormone production, improves sleep

Dose: 300–400 mg/day

Best Form: Magnesium glycinate (calming, gut-friendly) or citrate (if constipated)

Bonus: Epsom salt baths = transdermal magnesium + muscle relief

Vitamin D3 + K2

Why: D3 reduces inflammation, supports immune regulation and hormone balance; K2 prevents soft tissue calcification and enhances calcium use

Dose:

- D3: 2,000–4,000 IU/day (based on blood levels)

- K2: 90–100 mcg/day (use MK-7 form)
Tip: Always take with a meal that contains fat

Estrogen Metabolism Support (When Estrogen Dominance is Suspected)

DIM (Diindolylmethane)

Why: Supports phase 1 estrogen detox, helping your body metabolize harmful estrogen into protective forms

Dose:

- Week 1: 100 mg
- Week 2: 200 mg
- Week 3+: 300 mg

Caution: Monitor for signs of **too low estrogen** (vaginal dryness, mood swings, delayed ovulation). Discontinue if symptoms appear.

Calcium D-Glucarate (Optional add-on)

Why: Supports phase 2 liver detox and reduces estrogen recirculation via the gut

Dose: 500–1,000 mg per day with food

When to Use: If DIM is not tolerated or during luteal phase to prevent estrogen rebound

Immune & Inflammation Modulators

Resveratrol

Why: Potent antioxidant; inhibits endometrial tissue growth, lowers cytokines like IL-6 and TNF- α

Dose: 1,000 mg/day

Best Form: Trans-resveratrol + quercetin combo (if available) for enhanced effect

Adaptogens (Optional, for Stress and Adrenal Resilience)

Chronic stress worsens inflammation, lowers progesterone, and disrupts ovulation. Adaptogens help your body regulate cortisol and recover from long-term stress, supporting hormonal balance and nervous system resilience.

Best Used For: Burnout, high cortisol, anxiety, cycle irregularity, post-pill recovery

Adaptogen	Why It Helps	How to Use

Ashwagandha	Calms HPA axis, reduces cortisol, supports thyroid + sleep	300–500 mg/day in AM, take for 6–8 weeks then pause
Rhodiola rosea	Boosts energy and focus, modulates stress response	100–300 mg in AM, avoid if prone to anxiety
Holy basil	Calming, anti-inflammatory, supports blood sugar + mood	Herbal tea or 300 mg extract, gentle and well tolerated
Schisandra	Liver-protective + adaptogenic, supports estrogen clearance	500 mg extract, often in combo blends

Cycle caution: Do not use continuously. Most adaptogens benefit from 4–6 week cycles, followed by breaks. Avoid during pregnancy unless supervised.

Vitex (Chasteberry) *optional*

Why: Vitex indirectly supports progesterone by acting on the hypothalamus and pituitary glands to reduce prolactin levels and rebalance the LH:FSH ratio. It's especially helpful for luteal phase deficiency, PMS, breast tenderness, and cycle irregularity, particularly after coming off the pill.

Best Used For:

- Low progesterone symptoms (short luteal phase, spotting, anxiety before period)
- Post-pill amenorrhea
- Cyclical breast pain or bloating
- Recurrent PMS or mood swings in the luteal phase

Dose:

- Start with 400–500 mg daily (standardized extract, once in the morning). Up to 1,000mg daily.
- Use for at least 3 months to see full effect
- Only use during luteal phase (after ovulation) unless otherwise instructed

Cautions:

- **Do not use if you're already ovulating regularly with good progesterone levels**
- **Can worsen symptoms if used during the follicular phase in sensitive women**

- Not recommended alongside hormonal medications without practitioner supervision
- Avoid if undergoing IVF or using Clomid unless directed

Gut & Microbiome Support

Probiotics (Broad Spectrum)

Why: Gut health = hormone health. Probiotics improve estrogen clearance, immune resilience, and reduce bloating

Dose: 50–100 billion CFU daily

Best Form: Capsule + food-based combo

Food First: Unpasteurized sauerkraut, kimchi, kefir (if tolerated)

Prebiotics (Optional)

Why: Feed good gut bacteria and promote estrogen-binding fiber

Food Sources: Cooked onion, garlic, leek, asparagus, flaxseed, apples

Supplement: Acacia fiber or PHGG (Partially Hydrolyzed Guar Gum) if tolerated

Targeted Add-Ons (Use Based on Your Symptoms)

Symptom	Supplement	Why It Helps
Heavy bleeding	Iron bisglycinate	Replenishes iron stores without constipation
Low energy/mood	B-complex with B6 (P5P)	Supports neurotransmitters + estrogen detox
Poor sleep	Magnesium glycinate, L-theanine	Calms nervous system + supports GABA
High stress	Phosphatidylserine or adaptogens	Lowers cortisol + inflammation

PMS/bloating	Chasteberry (Vitex)*	Supports progesterone (use short-term, luteal phase only)
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Supplement Safety Notes

- **Cycle syncing matters:** Some supplements (like DIM or Vitex) should not be used continuously. Pause latest after 2-3 months.
- **Not every woman needs every product.** Start slow, track symptoms, and layer in support.
- **Work with a practitioner** if you're taking medications, TTC, or dealing with autoimmune conditions.

Summary: The Functional Supplement Pyramid

1. **Start here:** Omega-3, Curcumin, NAC, Magnesium, D3/K2
2. **Layer in as needed:** DIM, Resveratrol, Probiotics
3. **Customize for symptoms:** Gut support, adaptogens, estrogen detoxifiers
4. **Cycle wisely:** DIM + Vitex + Ashwagandha require cycling based on response

You don't need to take everything at once. Start with the basics. Add in layers. Track how you feel. The power of supplementation lies in precision not in piling on more.

Lifestyle & Detox Strategies That Actually Make a Difference

(Because healing is more than food and supplements)

You can take all the right supplements and eat all the right foods, but if your lifestyle keeps sending stress signals, blocks detox, and inflames your nervous system... you stay stuck. That's why true endometriosis healing happens when you integrate daily practices that gently shift your biology back to safety.

This chapter is about the small things, done consistently, that create the environment your body needs to repair, release, and regulate.

1. Nutrition Recap (Without Overwhelm)

You already know food matters. This is your reinforcement, not repetition.

Focus On:

- Cruciferous veg daily (broccoli, kale, arugula, Brussels sprouts)
- Sulfur-rich and bitter foods (beetroot, garlic, dandelion greens) for liver support
- Protein + fat at every meal to reduce blood sugar spikes and support hormone synthesis
- Anti-inflammatory herbs (turmeric, ginger, parsley)

Reduce or Remove:

- Gluten and A1 dairy (especially if thyroid antibodies or inflammation are high)
- Refined sugar and ultra-processed snacks
- Seed oils (sunflower, soybean, safflower, grapeseed)

This isn't about perfection, it's about **reducing your inflammatory load** and making estrogen detox easier.

2. Detox Pathways: Support Your Liver, Gut, and Lymph

Endometriosis is inflammatory, estrogen-sensitive, and immune-driven. That means your body has to eliminate waste, excess hormones, and inflammatory metabolites *every single day* or they'll build up and worsen your symptoms.

Liver Support

- **Lemon water** first thing in the morning
- **Castor oil packs** 3x/week over liver or lower abdomen (not during bleeding)
- **Liver foods:** beets, dandelion root, bitter greens, turmeric, milk thistle
- **Supplement support:** NAC, magnesium, curcumin, and B vitamins

Gut Support

- Poop daily. No exceptions.
- Use **ground flaxseed** (1 tbsp/day) and plenty of fiber from cooked veg
- Consider **Calcium D-Glucarate** or probiotics to prevent estrogen recirculation
- Avoid overuse of laxatives, which can damage your gut lining

Lymph Support

- **Rebounding (mini trampoline):** 3–5 minutes daily
- **Dry brushing** before showering (always toward your heart)
- Drink at least 2–2.5L water daily, ideally with trace minerals or sea salt

3. Nervous System Regulation: The Most Overlooked Factor

If your body doesn't feel safe, it won't detox, digest, or ovulate properly.

Endometriosis isn't just physical—it's emotional. Chronic pain wires your nervous system into a stress loop. Breaking that loop requires intentional, daily regulation.

Gentle Tools That Work:

- **Box breathing:** Inhale 4, hold 4, exhale 4, hold 4 (3–5 mins/day)
- **Grounding:** Walk barefoot outside. No phone. Just breath + feet on earth.
- **Somatic release:** Gentle shaking, tapping, or stretching (especially before bed)
- **Vagus nerve stimulation:** Humming, cold splashing face, gargling water
- **Evening downshift:** Switch to red light, candlelight, or no screens 1 hour before sleep

Phase-Specific Tip:

- Use breathwork, journaling, and slower evenings during the luteal phase
- Add guided visualizations or gentle meditations during menstruation for repair

Your nervous system is the switchboard for hormonal repair. Flip it to “safe,” and your entire physiology responds.

4. Movement That Heals, Not Hurts

Forget the “no pain, no gain” model. Women with endometriosis need movement that supports lymphatic drainage, reduces cortisol, boosts circulation, and builds strength *without adding stress*.

Ideal Movement Plan:

- **Walking:** Daily, especially after meals (improves blood sugar + digestion)
- **Rebounding:** 5 minutes/day for lymph support
- **Pilates, strength training, or resistance bands:** 2–3x/week to improve insulin sensitivity and hormone resilience
- **Gentle yoga or stretching:** Especially during menstruation and luteal phase
- **Jumping (mini hops):** Supports lymph + estrogen clearance. Use sparingly if energy is low.

Avoid:

- Chronic cardio or long HIIT sessions during your luteal or menstrual phase

- Overtraining without adequate rest or nourishment

These aren't just wellness habits. These are your non-negotiables for hormonal recalibration. You don't need a perfect day. You need a **pattern of safety, flow, and nourishment**. The more your body trusts that environment, the more it will let go of inflammation and hormonal chaos.

Your 7-Day Meal Plan for Endometriosis Healing

(Anti-inflammatory, cycle-aware, and stress-free)

This 7-day plan is designed to reduce inflammation, support estrogen clearance, balance blood sugar, and nourish your hormones without counting calories or overcomplicating things.

Each day includes **real food, simple prep, and targeted function**: from liver support to nervous system care, this isn't just a diet. It's a therapeutic rhythm.

General Guidelines

- **No gluten, dairy, seed oils, or refined sugar**
- All meals include **protein + healthy fats + fiber**
- Cooked foods prioritized in luteal and menstrual phases
- Raw/light foods are more supportive in the follicular phase
- All ingredients are easy to substitute or modify for personal preference

Day 1 (Follicular Phase Start / Light Keto-Style)

Breakfast:

Zucchini + spinach sautéed in ghee with two poached eggs, half an avocado, lemon + sea salt

→ *Supports liver detox + stable blood sugar*

Lunch:

Grilled salmon salad with arugula, olive oil, beet slices, pumpkin seeds, and fresh dill

→ *Omega-3s + estrogen metabolism support*

Snack:

Small handful of walnuts + green tea with lemon

→ *Brain + gut fuel, anti-inflammatory fats*

Dinner:

Turmeric coconut chicken soup with bok choy, mushrooms, and cauliflower rice
→ *Warming, estrogen-clearing, gut-soothing*

Day 2 (Still Follicular)

Breakfast:

Chia pudding with coconut milk, cinnamon, blueberries, and a scoop of collagen
→ *Fiber, antioxidants, and protein without spiking insulin*

Lunch:

Leftover turmeric soup + side of cucumber slices and hummus
→ *Easy digestion, mineral-rich, estrogen-safe*

Snack:

Herbal tea + a hard-boiled egg with sea salt and olive oil drizzle
→ *Simple protein + fat + minerals*

Dinner:

Zucchini noodles with grass-fed beef mince in tomato basil sauce + arugula
→ *Iron, zinc, and liver support in one meal*

Day 3 (Ovulation Transition)

Breakfast:

Green smoothie: Spinach, cucumber, parsley, lemon, avocado, hemp seeds, protein powder
→ *Cooling, cleansing, easy-to-digest*

Lunch:

Grilled chicken with roasted sweet potato + kale with lemon vinaigrette
→ *Carb reintroduction starts here—supports ovulation + progesterone prep*

Snack:

Carrot sticks + guacamole
→ *Fiber + hormone-supportive fats*

Dinner:

Baked cod with roasted cauliflower and sautéed rainbow chard
→ *High minerals, light protein, liver-friendly*

Day 4 (Early Luteal Phase)

Breakfast:

Scrambled eggs with sautéed kale, mushrooms, and ghee
→ *Warming + stabilizing, great post-ovulation combo*

Lunch:

Leftover cod + roasted veggies in a tahini-lemon sauce
→ *Zinc + magnesium + blood sugar balance*

Snack:

Pumpkin seeds + ginger tea
→ *Minerals + anti-inflammatory + supports sleep later*

Dinner:

Lamb and root veggie stew (parsnips, carrots, celery, thyme)
→ *Grounding, progesterone-loving comfort meal*

Day 5 (Mid-Luteal Phase)

Breakfast:

Coconut yogurt with chia seeds, sliced kiwi, and cinnamon
→ *Gut support, cooling but gentle on digestion*

Lunch:

Wild-caught tuna salad with olives, greens, cucumber, and olive oil + sweet potato wedges
→ *Protein, omega-3s, carb balance*

Snack:

Turkey roll-up with avocado slices
→ *Protein + fat to balance afternoon cortisol*

Dinner:

Chicken fajita bowl: Grilled chicken, sautéed peppers + onions, avocado, cauliflower rice
→ *Mood support + magnesium + anti-inflammatory spices*

Day 6 (Late Luteal Phase)

Breakfast:

Bone broth latte with MCT oil + boiled egg + steamed spinach
→ *Soothing, grounding, gut repair boost*

Lunch:

Beef and pumpkin patties with sauerkraut + side salad with tahini dressing
→ *Iron + probiotic + blood sugar support*

Snack:

Sunflower seeds + magnesium-rich dark chocolate square
→ *PMS rescue combo*

Dinner:

Slow-cooked turkey meatballs in a tomato-rosemary sauce + quinoa
→ *Warming, grounding, gentle digestion*

Day 7 (Menstruation Start / Repair Phase)

Breakfast:

Steel-cut oats (if tolerated) with stewed apple, cinnamon, flaxseed, and almond butter
→ *Warming, grounding, supports estrogen clearance*

Lunch:

Butternut squash soup with chicken and turmeric + spinach side salad with EVOO
→ *Anti-inflammatory and easy to digest while bleeding*

Snack:

Golden milk (turmeric + coconut milk) + sliced cucumber with sea salt
→ *Nervous system + hydration support*

Dinner:

Beef liver paté on seed crackers + sautéed kale and roasted carrots
→ *Iron, B vitamins, liver-nourishing powerhouse*

Notes for Success

- You don't need to follow this perfectly, swap any meal or modify based on energy, cravings, and digestion.
- Add castor oil packs, breathwork, or light movement to enhance effects.
- If your digestion slows during luteal or menstrual phases, lean into soups and stews.
- Reheat leftovers with olive oil or broth to avoid dryness and boost absorption.

Putting It All Together: Your Endo Healing Blueprint

You've just explored every layer of endometriosis healing from understanding inflammation and estrogen dominance, to food, supplements, detox, nervous system regulation, and daily rhythms.

But information without integration just becomes noise.

This chapter gives you your **starting point**, your **daily rhythm**, and your **next right steps** so you can begin gently, confidently, and at your own pace.

Core Philosophy: You Heal in Layers, Not All at Once

You don't need to do everything. You just need to start doing the right things in the right order. Your job now is to **create a healing terrain**, a body that's safe enough to

release inflammation, balance hormones, and rebuild. That doesn't happen in one supplement or one clean meal. It happens in rhythm.

Start Here: Your 3 Non-Negotiables

If you do nothing else yet, focus on these:

1. **Poop every day**
 - Add flax, magnesium, cruciferous veggies, and hydration
2. **Regulate blood sugar**
 - Protein, fat, and fiber at every meal
 - No naked carbs, no skipping meals
3. **Create nervous system safety**
 - Breathwork, journaling, screen breaks, or grounding—daily
 - This lowers cortisol, improves detox, and supports ovulation

Week-by-Week Blueprint

Week 1–2: Foundation Reset

- Begin your anti-inflammatory food rhythm (even just breakfast and lunch to start)
- Add magnesium + NAC or curcumin
- Focus on sleep, poop, and 10 minutes of nervous system care

Week 3–4: Add Detox Layers

- Add in cruciferous veggies + ground flaxseed daily
- Consider DIM or Calcium D-Glucarate if estrogen dominance is likely
- Begin castor oil packs and dry brushing if energy allows

Week 5–6: Customize Based on Symptoms

- Add targeted supplements (omega-3s, adaptogens, probiotics)
- Modify carbs around your cycle (low in follicular, more in luteal)
- Track patterns in mood, pain, digestion, cravings

Healing Is Not Linear

Some months will feel miraculous. Others may feel frustrating. That doesn't mean you've failed. It means your body is rewiring and that takes **time, rhythm, and safety**.

What to do when it gets hard:

- Go back to the basics: protein, fat, fiber, breath, and bowel movement
- Pull back, not out, simplify, but stay consistent
- Track your cycle, not to obsess, but to see how far you've come

A Note on Testing & Deeper Work

At any point, you may choose to explore:

- DUTCH hormone testing (for estrogen metabolites + cortisol curve)
- GI-MAP stool test (for estrobolome and gut inflammation)
- Thyroid and nutrient panels (iron, B12, D, zinc, magnesium)

Functional testing can guide further personalization, but it's not required to begin healing. You've already started.

Final Words: You Are the Healer

This protocol is designed to hand your power back. You're not broken. You're not weak. You're not too far gone. Your body wants to heal. It's just been overwhelmed, undernourished, and misunderstood for too long. The body responds to love, rhythm, and consistency more than perfection.

If you're looking for support beyond this guide, I host a warm, science-backed, and cycle-synced community inside [The Fertility Circle](#). It's where I answer questions weekly, guide live group sessions, and help you adapt this work in real life. You don't have to do this alone. I'd love to support you inside the Circle.

Appendix: Nutrient Tracking (Optional Tool)

Track Smart, Not Obsessively

For some women, gaining insight into daily nutrient intake can be incredibly empowering especially when trying to reduce inflammation, balance hormones, or support the body through a therapeutic diet like keto.

If you'd like to track your intake of nutrients like **magnesium, zinc, vitamin D, B-vitamins, or omega-3s**, a great tool is:

Cronometer (cronometer.com or app store)

Unlike calorie-focused apps, Cronometer tracks both **macronutrients and micronutrients**, offering a detailed view of:

- Vitamins & minerals

- Fatty acid ratios
- Amino acid profiles
- Fiber, protein, and carb quality

Best Used For:

- Clarifying whether you're hitting your targets (especially on therapeutic diets)
- Seeing trends in protein, fiber, or fat intake
- Checking nutrient gaps (e.g., low magnesium, iron, or B6)

Tips for Use:

- **Don't log exercise:** The app already factors in your baseline activity. Logging workouts can skew your targets and overestimate your needs.
- **Use for insight, not perfection:** This is a learning tool not a lifestyle. Track a few days, reflect, adjust if needed, and then let it go.
- **Avoid if it creates stress or obsession:** If you've ever struggled with food control or disordered eating, skip tracking altogether and focus instead on food quality and body awareness.

You don't need data to heal but if you like data, use it wisely. [Start your free 30 day trial of Cronometer Pro Here.](#)

Sending you much healing and love.

Carmen

Resources

Here are research sources and studies supporting the supplements and holistic approaches for managing endometriosis symptoms:

1. **Curcumin:** Curcumin has been extensively studied for its role in reducing endometrial cell growth and inflammation. A *Spandidos Publications* study demonstrated that curcumin significantly reduces the expression of vascular endothelial growth factor (VEGF) in endometriotic cells, which helps prevent the formation of new blood vessels that feed endometriosis lesions. The study concluded that curcumin inhibits cell proliferation and induces apoptosis (cell death) in endometrial cells ([Spandidos Publications](#)). Another study published in *MDPI* confirms curcumin's potent anti-inflammatory and antioxidant properties, which make it an effective treatment in reducing lesion size and overall endometriosis severity ([MDPI](#)).
2. **Omega-3 Fatty Acids:** Omega-3 fatty acids, especially EPA and DHA, are powerful anti-inflammatories that can alleviate endometriosis pain by modulating inflammatory cytokines. A study published in *The American Journal of Obstetrics and Gynecology* showed that higher intake of omega-3s correlated with lower levels of prostaglandins, reducing inflammation in the pelvic region. This improvement leads to reduced pain and better management of the condition ([MDPI](#)).
3. **N-Acetyl Cysteine (NAC):** NAC plays a vital role in reducing oxidative stress and supporting liver detoxification. A groundbreaking study published in the *Journal of Clinical Medicine* found that NAC reduced the size of endometriotic cysts and significantly improved fertility in women with endometriosis. The study also highlighted NAC's role in lowering inflammatory markers in the body, making it a powerful tool for managing the condition ([MDPI](#)).
4. **Resveratrol:** Resveratrol is another potent anti-inflammatory and antioxidant that has been studied for its ability to inhibit the growth of endometrial tissue. Research in *Reproductive Sciences* demonstrated that resveratrol reduces the expression of inflammatory cytokines, including IL-6 and TNF- α , and inhibits angiogenesis (formation of new blood vessels), which is key in slowing the progression of endometriosis ([MDPI](#)).
5. **Vitamin D3 and K2:** Vitamin D's immune-modulating effects help reduce the inflammatory response in endometriosis. A study in *The Journal of Endocrinology* confirmed that women with optimal levels of Vitamin D experienced reduced endometriosis symptoms and inflammation ([MDPI](#)). Vitamin K2, when paired with Vitamin D, ensures that calcium is directed to the bones and not to soft tissues, preventing complications like calcification. Both nutrients together play a significant role in hormone balance and immune regulation.
6. **DIM (Diindolylmethane):** DIM supports estrogen metabolism by promoting the breakdown of harmful estrogen metabolites into less potent forms. A study published in *Cancer Research* confirmed that DIM helps regulate estrogen pathways, reducing estrogen dominance—a primary driver of endometriosis. This process helps prevent the proliferation of endometrial cells outside the uterus ([SpringerLink](#)) ([NCBI](#)).
7. **Inflammatory Mediators and Pain in Endometriosis:** [A Systematic Review](#)