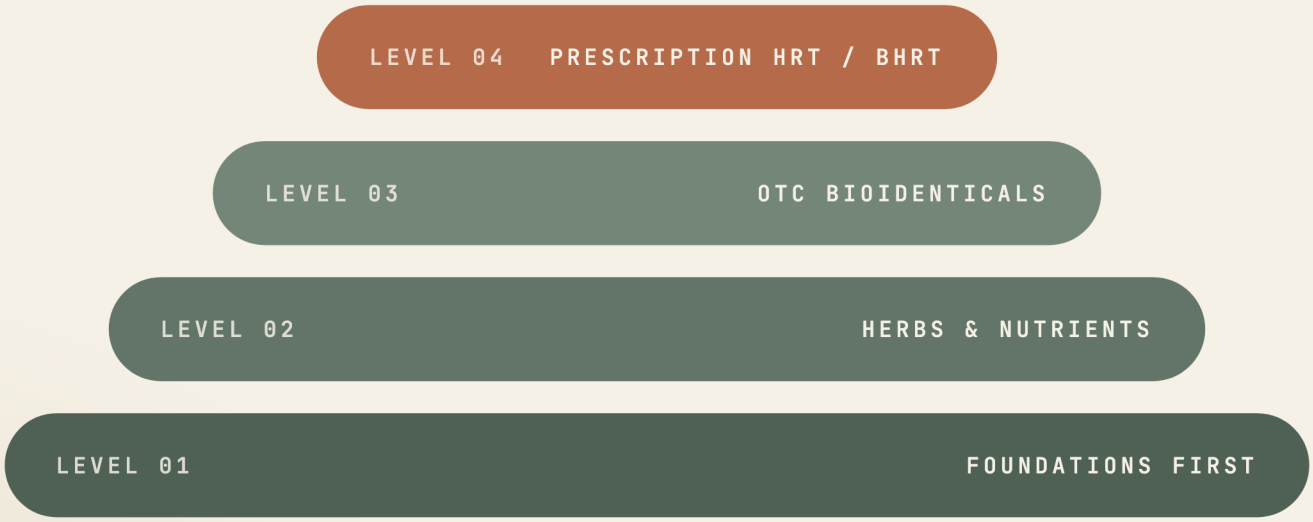
FOR WOMEN DECIDING ABOUT HRT

The *HRT* Ladder.

A smart, layered approach to hormone therapy.

Hormone therapy can be incredibly supportive, but it works best when it's built on solid ground. Here are the four levels we recommend working through, before and alongside a prescription.



KELSEY ALE FNTP, FOUNDER OF AUDRE · AUDRE.CO

FORMAT

A 9-page reference

USE IT AS

A reference, not a prescription

LET'S TALK ABOUT HRT

Hormone therapy is a powerful tool, not a starting point.

Many women are curious about HRT, and rightly so. But even the best prescription can't override a body that's inflamed, undernourished, or running on stress.

> So if you're considering HRT, or wondering when to bring it in, *here is the layered approach we recommend.*

01 Build the Foundations — PG. 03
The 4-Pillar Hormone Reset Method · blood sugar, adrenals, muscle, detox

02 Herbal & Nutrient Support — PG. 04
Vitex · Black cohosh · Ashwagandha · Magnesium

03 Over-the-Counter Bioidenticals — PG. 05
Low-dose progesterone · DHEA

04 Prescription HRT or bHRT — PG. 06
Estradiol · Progesterone · Testosterone · DHEA

USE Your Baseline: Two Weeks of Data — PG. 07
A tracking sheet to fill in before you change anything

USE How to Know You're Ready — PG. 08
Signs you've outgrown a level, and what to ask your provider

END The Bottom Line — PG. 09
The four pillars, recapped

LEVEL ONE

01 Build the Foundations.

BEGIN HERE
Weeks 0 to 12

Start by restoring the four systems this guide is built on. They're what your hormones sit on top of, and they set the conditions everything else works in.

Getting these systems back online often relieves the majority of perimenopause symptoms, including fatigue, mood swings, hot flashes and stubborn weight, without adding anything external yet.

SYMPTOM RELIEF FROM FOUNDATIONS ALONE

60-80%

of perimenopause symptoms commonly ease once the four pillars are supported, before any hormone is added.

THE 4-PILLAR HORMONE RESET METHOD

Stabilize blood sugar
So insulin and cortisol stay in balance, and the day stops swinging.

Support your adrenals
So your body can regulate hormones naturally instead of from a stress state.

Rebuild muscle
To boost metabolism and restore hormone sensitivity at the cellular level.

Clear inflammation, open detox
So your liver and gut can process hormones cleanly, in and out.

Why first. Without these in place, anything you layer on top, whether herbs, OTC or prescription, has to push uphill. With them, smaller doses do more.

LEVEL TWO

02 Herbal & Nutrient Support.

AFTER FOUNDATIONS
As needed

Once your base is solid, you can explore gentle herbal or nutrient supports that nudge hormone balance without pushing too hard.

Think of these as tuning, not treatment. They work best when the body already has what it needs to respond.

COMMON ALLIES

Vitex (Chasteberry)	CYCLE & PROGESTERONE
Black Cohosh	HOT FLASHES
Ashwagandha	ADRENALS & SLEEP
Magnesium	NERVOUS SYSTEM

PLANT-BASED · LOW INTERVENTION · PAIR WITH FOUNDATIONS

> These can help nudge hormone balance *naturally*, without overriding the body's own signals.

✓ **What they're good at**

Smoothing rough edges: sleep, mood, mild cycle irregularity, low-grade hot flashes.

! **What they're not**

A replacement for hormones the body genuinely needs more of. If symptoms are severe, keep moving up the levels.

A gentle reminder. Even "natural" supports interact with medications and conditions. Run new additions past a qualified provider before stacking them.

LEVEL THREE

03 Over-the-Counter Bioidenticals.

IF SYMPTOMS PERSIST
After 12 to 16 weeks

If symptoms persist after twelve to sixteen weeks of foundational work, consider easing into OTC bioidentical support.

Think low-dose progesterone creams or DHEA, with supervision. These aren't as potent as prescription HRT, but they can offer a gentle bridge while you keep watching how your body responds.

MOST COMMON BRIDGES

Low-dose progesterone cream	TOPICAL
DHEA	ADRENAL PRECURSOR

WAIT WINDOW

12-16 wks

of consistent foundation work before introducing OTC bioidenticals, so you can see what's already shifted.

→ **Use it as a bridge**
Between fully natural support and prescription therapy, not as a permanent substitute for either.

★ **Always with supervision**
"Over-the-counter" doesn't mean "without guidance." Track symptoms, dosing and response with a provider.

Reality check. OTC bioidenticals are not regulated the same way prescription HRT is. Quality, potency and absorption vary. Choose carefully.

LEVEL FOUR

04 Prescription HRT or bHRT.

QUALITY OF LIFE STILL AFFECTED

Time to explore

If you've built strong foundations but symptoms are still affecting your quality of life, this is the time to explore prescription hormone therapy with a qualified provider.

At this stage, the goal is precision: the right hormone, at the right dose, for the right reason, supported by data rather than guesswork.

WHAT IT MAY INCLUDE

Estradiol	ESTROGEN
Progesterone	CYCLE & SLEEP
Testosterone	ENERGY & LIBIDO
DHEA	ADRENAL SUPPORT

> Always with proper *testing*, supervision, and symptom tracking.

A Test, don't guess

Baseline labs and a clear symptom picture before, during and after starting therapy.

B Qualified provider

Someone trained in functional or integrative hormone therapy, who treats this as a partnership.

C Track and adjust

Hormones aren't set-and-forget. Plan for follow-ups and refinements over the first 6 to 12 months.

BEFORE YOU CHANGE ANYTHING

Two weeks of data.

You can't tell whether something worked if you never wrote down where you started. This is the sheet that makes everything after it readable.

1 BARELY THERE **5** NOTICEABLE, WORKABLE **10** WORST IT GETS

Symptom, in your own words	M	T	W	T	F	S	S	M	T	W	T	F	S	S
Cycle day, if you track it														

WEEK ONE · WEEK TWO · PRINT A SECOND COPY FOR WEEKS THREE AND FOUR

Which one is loudest, and when does it show up?

What did you notice that you'd never connected to this?

What would you most want gone in six months?

Most women fill this in and find the pattern was obvious the whole time. It just had never been written down where they could see it.

THE PART A TIMELINE CAN'T TELL YOU

How to know you're ready.

The weeks on each level are a frame, not a rule. These are the things worth noticing, and the questions worth bringing to the person who knows your history.

3 cycles **Why we suggest at least twelve weeks at each level.** It takes an average of three menstrual cycles, or about twelve weeks, to really see how a change is impacting your hormones. Anything shorter and you're reading normal cycle-to-cycle variation, not the effect of what you changed.

LEVEL ONE, CONSIDERING LEVEL TWO

You've given the foundations a real run.

- Roughly twelve weeks of consistent work, not perfect work
- Your log shows movement in some things and not others
- What hasn't moved is specific enough that you can name it

LEVEL TWO, CONSIDERING LEVEL THREE

Tuning helped, and it wasn't enough.

- Twelve to sixteen weeks of foundations plus targeted support
- Symptoms still affect your day in a way you can point to on the log
- You have a provider willing to supervise, because over-the-counter never meant unsupervised

LEVEL THREE, CONSIDERING LEVEL FOUR

You want precision, not approximation.

- Quality of life is still affected, and you can say how
- You're ready for testing and follow-up, not a one-time prescription
- You'd rather know what your levels are than keep guessing

THIS ISN'T A QUEUE

If what you're living with is severe, you don't have to work your way up from the bottom first. Take the log to a provider now. The foundations still matter, they just don't have to come before everything else.

AT ANY LEVEL

- Here's what I've tracked. What do you see in it?
- What would you want to rule out before we call this hormonal?
- Which tests would change what you'd recommend, and which wouldn't?

BEFORE STARTING ANYTHING NEW

- What are we hoping this changes, and by when would we know?
- What would tell us it isn't working, as opposed to needing more time?
- How often would we reassess, and what would we look at?
- What are the risks, given my history and my family's?
- If I want to stop, how does that work?

IF YOU'RE ALREADY ON HORMONE THERAPY

- Is what's left a dose question, or is something else in the way?
- What else could be contributing that we haven't looked at?
- What are the options if this formulation doesn't suit me?

TAKE PAGE 07 WITH YOU

Specific documented symptoms are much harder to wave away than one vague "I just feel off."

BOTTOM LINE ON HRT

Start by giving your body what it needs to *function well*. Then layer in support, with clarity and confidence.

THE 4-PILLAR HORMONE RESET METHOD

→

Stable blood sugar

The single biggest lever for steady energy and steady moods.

→

Lower stress load

So adrenals can step out of survival and back into rhythm.

→

Protein + muscle

The metabolic engine that makes every hormone work harder.

→

Daily detox support

Gut and liver clear the way so what you take in actually lands.

"Your body isn't working against you. It's not trying to betray you, it's trying to protect you. And it will keep protecting you, until it has the support it needs."

Then, if you still need more help, layer in support, whether herbal, OTC or prescription, with clarity and confidence. This guide is a map, not a prescription. Use it alongside a qualified provider who knows your story.

This guide is intended for educational purposes and isn't medical advice. It doesn't diagnose or treat any condition and isn't a substitute for care from a qualified provider who knows your history. Talk to your doctor before starting, stopping, or changing any medications or supplements.