

# CGM & Hormone Monitor: Webinar Questions

Mira Device and Technical Questions	Answer
Is Mira a registered FDA device class? or a CLIA waived?	Yes, Mira is FDA registered. Mira does not require CLIA certification because it is an FDA-cleared at-home test for self-administration.
Is E3G the urinary metabolite of just estradiol? Does it take E1 or E3 into account at all?	E3G is estrone 3-glucuronide is a urinary metabolite of estradiol (E2). Mira does not measure the urinary meatbolties of estrone (E1) or estriol (E3).
Can E1, E2 and Testosterone also be tracked?	Currently, Mira only tracks E3G, estrone 3-glucuronide, a urinary metabolite of estradiol (E2). Mira does not measure the urinary metabolites of estrone (E1) or estriol (E3) or testosterone.
Does it track xenoestrogens? Does this only detect natural estrogen or if there is a woman with high xenoestrogens from outside sources, would it show estrogen high?	Mira does not track xenoestrogens directly. However, if xenoestrogens lead to an increase in serum estradiol (E2) levels or contribute to estrogen dominance, Mira’s E3G levels will reflect this increase.
How is the Mira data protected?	Data is encrypted, deidentified, stored securely in accordance with HIPAA and GDPR standards, and accessible only to a limited number of trained support staff. Users can delete their accounts and data permanently. Mira doesn’t sell user data.
Can the device be recycled in some way?	Mira wands are designed for single use only and cannot be reused. However, they are recyclable and eco-friendly.
Are there Mira/CGMs that are reusable for clients to use for a specific amount of time then they can give it back the practice?	The analyzer is designed for use by a single user at a time, as it is connected to a specific user's Mira app via Bluetooth. Although it can be reset for a new user (instructions available <a href="#">here</a> ), we cannot guarantee the lifespan or accuracy of the results after it has been used by multiple individuals, as there is a risk of mishandling or potential damage to the device.  CGM are single use only.
Insurance, and Cost and Availability	Answer
Is Mira/CGM something a dietitian can prescribe in a private practice or does it have to come from a PCP request to insurance?	Mira does not require a prescription. Patients can purchase Mira directly from our website using your discount code or affiliate link. Alternatively, providers can sell Mira directly to clients after purchasing in bulk.  The Theia platform enables non-prescribing clinicians, such as dietitians, to obtain a CGM for their patients. Through Theia, providers can invite patients to use a CGM, and if the patient agrees, Theia will handle the prescription, pharmacy fees, and shipping logistics, ensuring a seamless experience for the patient. This process does not require a prescription from a primary care physician (PCP) for insurance, and the CGM will be paid for by the patient as self-pay. To learn more about Theia, follow <a href="#">this link</a> .
Are Mira devices covered by insurance?	Mira is not covered by standard insurance, but it is eligible for payment through FSA and HSA accounts. Patients can use their FSA/HSA funds to purchase Mira products after applying a provider discount code. Additionally, some fertility benefit programs, such as Carrot and Maven, may cover Mira expenses, so it’s worth checking if your patient has access to these benefits.
Will insurance cover Mira/CGMs? If not, how much are patients expected to pay?	As mentioned above, Mira is generally not covered by insurance. After applying a provider discount, the initial cost for a Mira analyzer and a box of wands for one month of tracking is approximately \$175. For three months of tracking, the total cost is approximately \$300.
Is Mira available in Canada?	Yes, Mira is available internationally. We offer worldwide shipping and free shipping is available on orders over \$159 USD. Shipping rates will be automatically calculated at checkout based on your location.
Any recommendations for sourcing a CGM? I'm located in Canada and I've chatted with	Consider trying the Theia platform. To learn more about Theia, follow <a href="#">this link</a> .

a local pharmacist about it and it seems cost prohibitive.	
<b>Provider-Specific Educational Questions</b>	<b>Answer</b>
Is there any data for perimenopausal women?	Yes, there are several pilots and studies currently happening related to perimenopause. Our perimenopause use case resources are <a href="#">here</a> .
Is this at all applicable to post-menopausal women?	Beyond two years post-menopause, hormone levels are generally low and stable, making tracking with Mira likely unnecessary. However, using Mira to monitor hormone replacement therapy (HRT) during menopause is still being investigated.
Can Mira be used if on birth control?	<p>Hormonal birth control typically suppresses ovulation, but some women may still ovulate and have menstrual cycles. Combined oral contraceptives typically suppress ovulation, which can result in non-ovulatory, non-menstrual bleeding cycles, breakthrough bleeding, or even amenorrhea. In contrast, progestin-only pills (POPs) may allow for the continuation of regular cycles.</p> <p>Mira can be useful for women experiencing symptoms they attribute to hormonal fluctuations or deprivation while using contraceptive methods that suppress ovulation. For example, if symptoms such as vaginal dryness, pain during sex, low mood, or low desire are present, Mira can help confirm low hormone levels and the absence of fluctuating LH/FSH, supporting the possibility of hormonal deprivation.</p> <p>If symptoms appear cyclical but Mira shows no hormonal fluctuations (as expected with ovulatory suppression), clinicians can help differentiate these symptoms from hormonal causes. Mira can also help identify background ovarian activity, whether it is regular, irregular, or resulting in successful ovulation.</p> <p>Some healthcare providers recommend that patients begin using the Mira monitor to track their hormone patterns before transitioning off birth control. This approach helps patients establish a testing routine and gain a clearer understanding of their hormonal changes both before and after discontinuing birth control. It provides valuable insights into their fertility and overall reproductive health throughout the transition period.</p>
What is DIM?	<p>According to the National Cancer Institute: <i>Diindolylmethane, a phytonutrient and plant indole found in cruciferous vegetables including broccoli, brussels sprouts, cabbage, cauliflower and kale, with potential antiandrogenic and antineoplastic activities. As a dimer of indole-3-carbinol, diindolylmethane (DIM) promotes beneficial estrogen metabolism in both sexes by reducing the levels of 16-hydroxy estrogen metabolites and increasing the formation of 2-hydroxy estrogen metabolites, resulting in increased antioxidant activity. Although this agent induces apoptosis in tumor cells in vitro, the exact mechanism by which DIM exhibits its antineoplastic activity in vivo is unknown.</i> <a href="#">Cite</a></p> <p>Dr. Pederson: DIM is a supplement that helps with estradiol metabolism, used for patients with high estradiol levels</p>
When you say carbs, can you specify- high dense rich complexed carbs?	Lynsey: Carbohydrates are anything that cause a rise in blood sugar. Main sources of carbs are grains (whole and refined, pasta, crackers etc), starchy veggies (potatoes, corn, sweet potatoes), legumes (beans, lentils, etc), fruit, milk and yogurt and sweets like cake, candy, cookies, pop. Certain carbs cause a greater rise in blood sugar (like highly refined carbs) compared to other complex carbs (beans, fruit, milk). But it is important to help a client understand what foods contain carbs and the balance of carbs to consume with protein and fat at meals. Just because a carb is complex doesn't mean it isn't impacting blood sugar. That is why CGM information can be so helpful to see those variations.
What is most common hormone issue in fertility?	<p>Olivia: Based on data from the CDC, PCOS is the leading cause of infertility in the US. Some other hormonal imbalances that impact fertility that I personally see in my clinic are thyroid disorders, low progesterone/short luteal phase, and hypothalamic amenorrhea (or some spectrum of HA). Its important to note that there are deeper root causes to all of these.</p> <p>Dr. Pederson: There are a lot- low estradiol and progesterone, high estradiol, low progesterone, low testosterone, etc</p>
What extent of hormonal health would resolve itself before deep dive clinical?	Olivia: This is a tough one to answer as the question is a bit vague. Overall I would say that sometimes you will have an irregular cycle or delayed ovulation due to a one-off stressful event or sickness and this is normal and will resolve itself. However if symptoms and irregularities become chronic and there are a

	<p>deeper issues at play such as blood sugar imbalances, chronic stress, autoimmune disease, gut issues, etc. these wont typically resolve itself without intervention. Interventions typically include dietary and lifestyle changes, supplements and sometimes medication.</p> <p>Dr. Pederson: There are a lot of factors that affect hormone health, some long and some short term. If there are red flags like long or short cycles, early or late or no ovulation, bleeding for &gt;5 days, mid cycle spotting, PMS syx, etc, I recommend doing a hormonal evaluation so we can figure out the issues</p>
Do you have data on stress reduction implementation and hormonal data changes?	Currently, Mira does not have specific data on the implementation of stress reduction and its direct impact on hormonal changes. However, existing studies suggest that reducing stress can influence sex hormones, and several third-party studies involving Mira focus on women's health and the menstrual cycle, which may offer insights into these interactions.
Would be great if we can get a list of these studies for reference!	<p><u><a href="#">De Paoli M, Zakharia A, Werstuck GH. The Role of Estrogen in Insulin Resistance: A Review of Clinical and Preclinical Data. Am J Pathol. 2021 Sep;191(9):1490-1498. doi: 10.1016/j.ajpath.2021.05.011. Epub 2021 Jun 5. PMID: 34102108.</a></u></p> <p><u><a href="#">Hirschberg AL. Sex hormones, appetite and eating behaviour in women. Maturitas. 2012 Mar;71(3):248-56. doi: 10.1016/j.maturitas.2011.12.016. Epub 2012 Jan 26. PMID: 22281161.</a></u></p> <p><u><a href="#">Lin G, Siddiqui R, Lin Z, Blodgett JM, Patel SN, Truong KN, Mariakakis A. Blood glucose variance measured by continuous glucose monitors across the menstrual cycle. NPJ Digit Med. 2023 Aug 11;6(1):140. doi: 10.1038/s41746-023-00884-x. PMID: 37567949; PMCID: PMC10421863.</a></u></p> <p><u><a href="#">Mauvais-Jarvis F, Clegg DJ, Hevener AL. The role of estrogens in control of energy balance and glucose homeostasis. Endocr Rev. 2013 Jun;34(3):309-38. doi: 10.1210/er.2012-1055. Epub 2013 Mar 4. PMID: 23460719; PMCID: PMC3660717.</a></u></p>
<b>CGM and Theia Related Questions</b>	Answer (Mira)
For the dietitian, what CGM do you use?	<p>Olivia: I personally use the free style libre in my practice</p> <p>Lynsey: Freestyle libre 2 or 3</p>
How long do you recommend patients try both with Mira and CGM?	<p>Theia recommends at least two sensors for each patient. The first being to establish a baseline of results and then additional sensors for comparing/contrasting and experimentation.</p> <p>Dr. Pederson: Mira- minimum 3 months to get a sense of their hormones. CGM 4 weeks as it takes that long to get a sense of it and make changes and learn from them</p>
Is the CGM paired with a food and activity record?	<p>Yes! If using theia app, the food and activity record is paired with the CGM information.</p> <p>When an activity is logged in Theia (via photo or text) we isolate the glucose response in a 3-hour time window and provide a score based upon the bodies response to that input.</p>
What is the benefit of Theia vs just prescribing Libre 3 sensor?	<p>Theia will cover the end-to-end logistics of the sensors. Including prescription, order fulfilment and client support for hardware and software issues. Additionally, Theia has a software for clients and providers that adds additional functionality for blood sugar regulation analysis.</p> <p>Theia also offers additional features for providers such as EHR integrations, commissions on client orders, custom score profiles and more.</p>
How does Theia compare with Levels and Nutrissense?	<p>Theia only partners with healthcare practices and is not a direct to consumer company. This means that we will not provide guidance that is not aligned with the ethos of your practice. Moreover the tools that Theia builds will help empower your practice as opposed to further building our customer base.</p> <p>Lastly, Theia is more cost-effective and does not require a commitment to use.</p>

Is Theia available in the UK?	<p>Theia is available in the UK but we cannot provide sensor fulfilment.</p> <p>Clients in the UK can use Theia through our Bring Your Own Sensor product.</p> <p>Theia supports the Libre 3, Libre 2 and the Dexcom G7.</p>
Is Theia available in Canada?	Yes
<b>Webinar Case Report Specific Questions</b>	<b>Answer</b>
What specific gut testing are you doing in your practice Dr. Pederson?	Dr. Pederson: I use GI effects through Genova
Can you write out the names of the digestive enzymes as I missed some of them?	Dr. Pederson: I commonly recommend Digestive Enzymes Ultra through Pure
What form of DHEA did you use for this client?	Dr. Pederson: I use oral DHEA 25mg twice per day
<b>Integration and Data Analysis</b>	<b>Answer</b>
Does Mira integrate with Heads Up Health?	We have initiated discussions with Heads Up Health; however, we are not yet integrated at this time.
Isn't there a way to use Mira to track blood glucose and hormones both? Do patients need both to track these?	Currently, Mira cannot track blood glucose levels, and CGMs cannot track hormone levels. As a result, both technologies are needed to comprehensively track your patient's health. However, Theia and Mira are exploring potential collaborations and integrations to make this process more seamless for providers in the future.