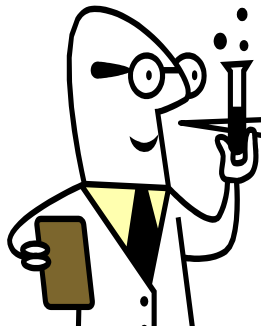




PROTOCOLS FOR HCG AND OXYTOCIN



Dr. Hormone says, "My protocols for HCG and oxytocin are quite simple. First, replace any hormones that are deficient on routine testing. Then I try HCG or oxytocin"

HCG – Injectable is more effective in most patients, but, otherwise I also use a sublingual preparation made by my local compounding pharmacy.

Sublingual HCG

- a. Concentration: 250 units per ml
- b. Starting dose, 1/2 ml 3 days a week
- c. After 1st week increase to twice a day
- d. I limit HCG to 5 days a week
- e. If no response after a month, I stop it.
- f. The dosage can be increases if the patient is getting a good response. (*I have a patient who went up to 750 units a day, but dropped back to a lower dose when she believed she had maxed out.*)
- g. Side-effects have been acne and hair loss. (*If this occurs I cut back the dosage.*)

Injectable HCG

- a. Concentration: 1000 units per ml
- b. Starting dose: 1/4 ml 3 days a week
- c. Increase to 1/2 cc after 2 weeks
- d-g. As above.

Dr. Techy says, "HCG and oxytocin are easy to use."



Oxytocin

- a. Sublingual or nasal is acceptable.
- b. Concentration: 40 units per ml
- c. Starting dose is 1/4 ml daily for 5 days a week.
- d. Increase dosage to 1/2 ml of more daily after a week and if no side-effects have occurred.
- e. The highest dosage I've used is 1 ml given for 5 days a week.
- f. I limit dosing to 5 days a week for safety.
- g. If no response after one month, I stop oxytocin.
- h. Side-effects: severe depression with crying can occur. The other is dysphoria. When they occur, I discontinue oxytocin.

