



Dr. Techy says, "Give chronic pain patients a chance to get better".



## **WHEN TO USE OXYTOCIN (OXT) AND HUMAN CHORIONIC GONADOTROPIN (HCG)**

Both OXT and HCG are proving to be almost indispensable for the chronic pain patient who wants to get better and use fewer opioids and other symptomatic pain drugs.

### **QUESTIONS OF THIS BULLETIN**

1. When is the best time to start OXT or HCG?
2. Which one should be started first?

### **WHEN**

Anytime the patient has their pain controlled to the point that they can carry out activities of daily living. Don't expect a neurohormone (OXT), HCG, or other) to be effective if the patient is in agony, bed-bound, hysterical, unstable blood pressure, or has severe cortisol or other hormonal imbalance.

### **WHICH ONE FIRST?**

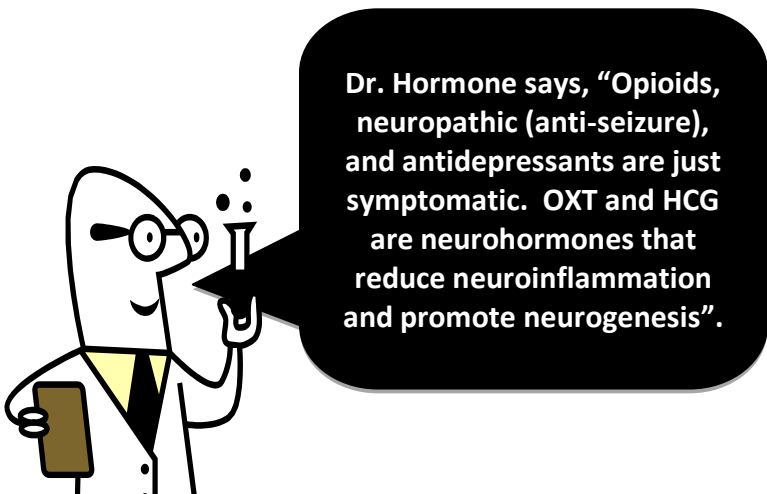
Either one. Wait a month before adding the other. This is enough time to see if the hormone is effective. Many patients do better when they are on both hormones.

**Starting Dosages with Troches or Sublingual Tablets**

OXT - 20 units BID

HCG – 250 units 3 days a week

Raise dosages after 2 to 4 weeks if little of no response. Can skip days to increase safety.



Dr. Hormone says, "Opioids, neuropathic (anti-seizure), and antidepressants are just symptomatic. OXT and HCG are neurohormones that reduce neuroinflammation and promote neurogenesis".



**Tennant Foundation**

### **Contact Information:**

334 S. Glendora Ave., West Covina, CA 91790-3043

Ph: 626-919-7476 Fax: 626-919-7497

E-mail: [veractinc@msn.com](mailto:veractinc@msn.com)

[www.hormonesandpaincare.com](http://www.hormonesandpaincare.com)

[www.foresttennant.com](http://www.foresttennant.com)