

SRx - New Dosing Protocol

After an additional 3 years of research on top of the initial 5 years, we have found that only an evening use of Secretropin yielded a higher level of IGF-1 and BP-3(GH) than the combination of a morning and evening dosing regimen.

It appears that the evening pulsing of GH production with Secretropin, parallels the natural peak stimulation and production of GH better than when Secretropin is used in the morning (2 sprays) and in the evening (4 sprays). In fact, the morning use of Secretropin predisposed to the diminution of the maximal production of GH (as measured by IGF-1 and IGFBP-3) at night, via the Somatostatin pathway.

Therefore, we now recommend only an evening use of Secretropin beginning with 4 sprays and the morning dosing be eliminated. The evening dosing should be increase by one spray each month up to 6 sprays based upon the measured response of both IGF-1 and IGFBP-3 at 30 day intervals.

A characteristic finding of over shooting the Secretagogue Threshold is a dip in the IGF-1 and/or IGFBP-3 levels. When this occurs, one merely reduces the number of sprays to the previous level. Retest in 30-60 days.

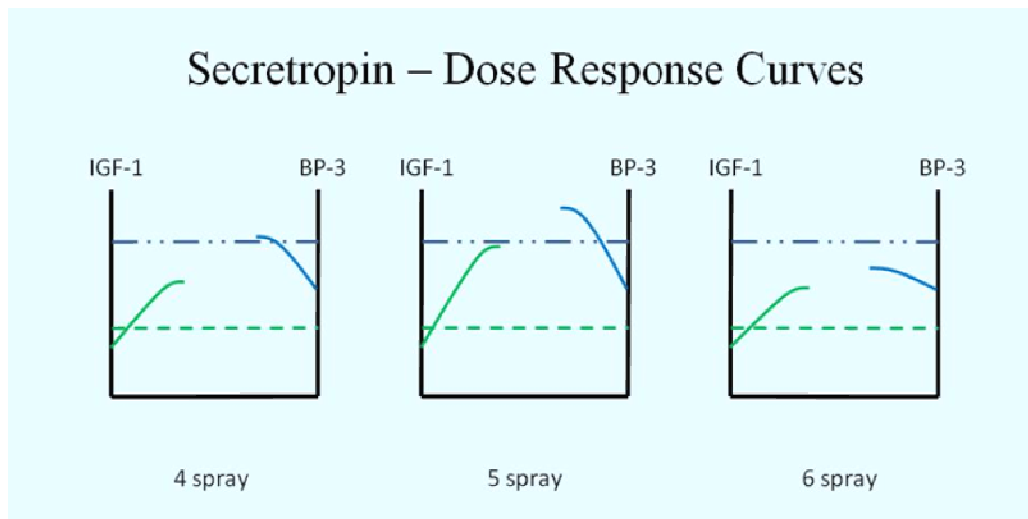


Figure 1: Initial dosing of 4 sprays increases both the IGF-1 and IGFBP-3 as did the 5 spray regimen. When dosing was increased to 6 sprays at night the result was a drop in both IGF-1 and IGFBP-3 production indicating a down-regulation of Growth Hormone release.