

Hinz Medical FoodsTM For the management of Drug-induced hyposerotonergicTM conditions

Drugs that work with serotonin do not work if there are not enough (depleted) serotonin.™

When SSRIs deplete serotonin, the only way to increase the synthesis of the total number of serotonin molecules in the system is by administering the required nutrients as found in R&RTM.

THE PROBLEM - SSRI-induced serotonin depletion

Platelets contain 99% of whole blood serotonin¹

Medical science literature documents the magnitude of SSRI-induced serotonin depletion:

- SSRIs may deplete[™] 80% of platelet serotonin in two weeks²
- SSRIs may deplete 90% of platelet serotonin in three weeks³
- Eventually, lab assay of platelet serotonin may become undetectable⁴
 For a more in-depth depletion bibliography, go to https://hinzmedicalfoods.com/bibliography-1/

A POTENTIAL SOLUTION - R&RTM

R&R™ can achieve serotonin concentrations higher than a modified normal diet alone while addressing the ability of serotonin precursors to deplete dopamine (catecholamines) and glutathione (thiols).

To order for the clinic, pharmacy, or to authorize online ordering by the patient contact NeuroResearch Centers, Inc. +1-218-626-2220
1150 88th Ave W, Duluth, MN | Brenda@NeuroAssist.com

R&R is a medical food administered enterally under the supervision of a healthcare professional for the specific dietary management of hyposerotonergic conditions or states.



Recommended daily starting dose:
two tablets, three times a day
To be used under the supervision of a licensed caregiver

McCloskey, D. et al. Selective Serotonin Reuptoke Inhibitors (SSRIs): Measurement of Effect on Platelet Function Transl Res. 2008 March; 151(3): 168–172

*Jordan, S. et al. Serotonergic agents increase the incidence of GI bleeds in patients with continuous-flow left ventricular assist devices J heart and lung tplt 05 Jan 2016, 35(6):823-824

*Wagner, A. et. al. Effects of Howekine treatment of platelet 431-migramine binding, S-H1 uptoke and 541 uptoke



Hinz Medical Foods™/NeuroResearch Centers, Inc.™

1150 88th Ave. West - Duluth, MN +1-218-626-2220 | www.HinzMedicalFoods.com

Hyposerotonergic[™] conditions occur when serotonin concentrations are not enough, low, inadequate, delpeted, deficient, or suboptimal on a modified normal diet.™

Hypodopaminergic™ conditions occur when dopamine concentrations are not enough, low, inadequate, depleted, deficient, or suboptimal on a modified normal diet,™

Hypoglutathionemia™ conditions occur when glutathione concentrations are not enough, low, inadequate, depleted, deficient, or suboptimal on a modified normal diet.™

- Giving only serotonin precursors can deplete dopamine and glutathione.™
- Giving only *dopamine precursors* can deplete serotonin and glutathione.™
- Giving only *glutathione or glutathione* precursors can deplete serotonin and dopamine.™

The centrally acting monoamines (monoamines) are serotonin, dopamine, norepinephrine, and epinephrine.

A MEDICAL FOOD APPLICATION - MANAGING HYPOSEROTONERGIC™ CONDITIONS CAUSED BY SSRI-INDUCED SEROTONIN DEPLETION



PERSPECTIVES

SSRI MEDICATIONS MAY DEPLETE SEROTONIN.

- Platelets contain 99% of whole blood serotonin.
- SSRIs may deplete[™] 80% of platelet serotonin in two weeks
- SSRIs may deplete 90% of platelet serotonin in three weeks
- Eventually, lab assay of platelet serotonin may become undetectable

HOW SSRI-INDUCED SEROTONIN DEPLETION MAY CAUSE TACHYPHYLAXIS

- SSRI drugs that work with serotonin do not work if there is not enough serotonin due to depletion.™
- The only way to increase the synthesis of the total number of serotonin molecules in the system is by administering the required nutrients.™

R&R may be administered concomitantly with SSRIs to address SSRI-induced serotonin depletion (see below).

R&R BENEFITS:

- 1. R&R can establish peripheral and central serotonin concentrations higher than is possible by modifying a normal diet.
- Administering only the serotonin precursors L-tryptophan or 5-L-hydroxytryptophan can deplete dopamine (catecholamines), glutathione (thiols), and their associated metabolites.
 - a. Specially formulated, R&R contains the nutrients required to address the depletion of dopamine and glutathione by serotonin-related nutrients.
 - b. Specially formulated, R&R provides concomitant administration of properly balanced nutrients required to optimize serotonin, dopamine, and glutathione concentrations higher than is possible by modifying a normal diet.

R&R POTENTIAL INDICATIONS:

- 1. R&R is for the management of SSRI-induced serotonin depletion.
- 2. R&R manages depleted, low, not enough, deficient, suboptimal, or inadequate serotonin concentrations.
- 3. R&R addresses serotonin precursor-induced dopamine and glutathione depletion.
- 4. R&R is for the management of suboptimal or depleted glutathione concentrations.

SYMPTOMS OF SSRI-INDUCED SEROTONIN DEPLETION

- 1. Inadequate serotonin concentrations may cause SSRI drugs to quit working.
- 2. Serotonin depletion may cause a relapse of serotonin-related symptoms.
- 3. Low or depleted serotonin may cause SSRIs to not work at the initiation of care.
- 4. SSRI-induced serotonin depletion may cause coagulopathy (increased bleeding times).

R&R DOSING: Recommended daily dosing is two tablets three times a day with or without SSRI medication.

SIDE EFFECTS: There are no known irreversible side effects associated with R&R. When properly managed, there are no known side effects that require permanent discontinuation of R&R. The SSRI prescribing information posted on the FDA website reveals no serotonin syndrome warnings relating to concomitant SSRI administration with R&R or any its ingredients. In addition, with over twenty years of experience in multiple medical clinics, there have been no reported cases of serotonin syndrome with concomitant administration of SSRI drugs and R&R or the ingredients found in R&R. For side effect management assistance, call +1-218-626-2220.