

Hinz Medical Foods™ / NeuroResearch Centers, Inc.™
 1150 88th Ave W Duluth, MN 55808 +1-218-626-2220 www.HinzMedicalFoods.com

Hypo-serotonergic™ conditions occur when serotonin concentrations are not enough, low, inadequate, depleted, 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.™

Bibliography for the brochure, “The hypodopaminergic condition protocol”

THE HYPODOPAMINERGIC CONDITION PROTOCOL
 THE DOPAMINE AND SEROTONIN STARTING POINT

Determining which protocol is required: hypodopaminergic or hypodopaminergic.
 The measurement based on the patient's level, and will not function exclusively by neurotransmitters. They carry out other major functions such as neurotransmission, neuromuscular, regulatory, adrenergic, and parasympathetic. Any of these functions can be compromised if a hypodopaminergic or hypodopaminergic condition is present.™

When symptoms caused by a hypodopaminergic condition (low dopamine) accompany a disease, a small percentage of patients exist where the monoamine symptoms are hypodopaminergic (low dopamine), not low serotonin.™
 Monoamine symptoms

When symptoms caused by a hypodopaminergic condition (low dopamine) accompany a disease, a small percentage of patients exist where the monoamine symptoms are hypodopaminergic (low dopamine), not low dopamine.™
 Monoamine symptoms

85% Serotonin 15% Dopamine
 85% Dopamine 15% Serotonin

Prescribing only one protocol (serotonin or dopamine) for a given set of monoamine symptoms may mean some of your patients will never achieve optimal results.

The primary goal needs to be optimization of monoamine symptoms on the proper protocol. While patient's symptoms caused by low serotonin or dopamine improve with the other protocol (dopamine or serotonin) for dopamine long-term symptom relief and stability tend to be lacking. These medical foods can stabilize serotonin, dopamine, and glutathione concentrations higher than typical with a modified normal diet. When monoamine symptoms are higher than the starting point for the hypodopaminergic condition protocol on the hypodopaminergic condition protocol is required. The protocol below the starting point for all patients (serotonin or dopamine) is a diagnostic work-out which measures protocol required. Lab testing prior to starting these medical foods is of no value. When normal lab values are reported for a patient whose results are higher than can be established with the modified normal diet, they are of no benefit.

Hypodopaminergic Condition Protocol™ Starting Point for All

Day 0	AM	NOCN	PM
Level 1	3 66A	---	3 66A
Day 7	Level 2	3 66A	3 66A
Day 14	Level 3	3 66A	4 66A

Day 21 - If symptoms are still present after seven days on level 3, submit a baseline for the serotonin and dopamine assay to: 666 Labs, 6477-676-2228

Figure 1. Starting dosing levels 1-3 of the hypodopaminergic condition protocol do not require lab testing. Do not increase to levels through medical file obtaining serotonin and dopamine assay. Only increase to the next level if symptoms are present after seven days.

NEURORESEARCH CENTERS™ is not a medical food company. These medical foods are not intended to diagnose, treat, cure, or prevent any disease. They are intended to support the management of the symptoms of the disease. These medical foods provide nutritional support specifically needed for the management of the symptoms of the disease. They are not intended to be used as a substitute for medical care.

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