



Hinz Medical Foods™ / NeuroResearch Centers, Inc.™
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Hypo-serotonergic™
conditions occur when serotonin concentrations are not enough, low, inadequate, depleted, deficient, or suboptimal on a modified normal diet.™

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

Hypo-glutathionemia™
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.

WHEN PILLS QUIT WORKING

THE PROBLEM

The patient obtains the relief of nutrient-related symptoms, then a few weeks or months later (3 to 4 months seems to be common); the patient presents in the clinic complaining that the symptoms have returned and the pills are no longer working.

THE CAUSE

99% of these cases stem from patient compliance, where the patient has missed one or more doses of pills. In some patients missing one dose of pills can lead to symptom relapse for up to five days. 1% of these cases stem from an abrupt change in amino acid dosing needs, with the patient requiring laboratory testing to straighten out.

MANAGEMENT

On questioning, most patients who experience the pills no longer working and symptoms returning claim they have missed no pills in the previous week. Further investigation reveals this is not true. The first step in sorting things out is sending patients home and having them journal (write down) all times with pills taken for a minimum of 10 days. With proper pill-taking, 99% of patients will achieve relief of symptoms again within five days.

Some patients can be very convincing in their attempts to make the physician believe that missing pills never occurs. No matter how convincing the patients seem to be, have each patient journal (write down all pills taken for ten days).

It is not uncommon for patients to experience a relapse of symptoms after missing only one pill dose. With proper pill-taking, it may take 3 to 5 days for symptoms to come back under control. If the patient misses a dose of pills again in 3 days, then misses another dose, then in 4 days, it does not take long until it appears that the pills have not been working for two weeks.

Patients who return to the clinic with a perfect journal and symptoms have not resolved to submit a urine sample for serotonin and dopamine OCT-2 analysis.

These statements have not been evaluated by the Food and Drug Administration (FDA). These nutrients are not intended to diagnose, treat, cure, or prevent



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