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HEALTH SOLUTIONS, INC.

# The HCG Protocol Information Packet

**This packet contains everything you need to know to successfully complete the HCG Protocol. It is very important that you read through this entire packet before your next appointment.**

## HCG Diet Summary Sheet

- The diet was researched and developed by Dr. A.T.W. Simeons.
- His work and information regarding this diet can be viewed online.
- HCG stands for Human Chorionic Gonadotropin
- HCG is a hormone produced in both men and women. Women produce large amounts during pregnancy.
- This diet consists of treatments of HCG and a low calorie diet.
- When this diet method is followed precisely as directed one can expect to lose ½ to 1 pound per day.
- There are three kinds of fat stored in the body
  - o Structural or essential fat (between the organs, etc...)
  - o Normal fat (stored for energy)
  - o Abnormal fat (unwanted fat/fat locked away)
    - This fat is not available for use until the other two kinds of fat are depleted.
  - o HCG works at the metabolic level to release these abnormal fat stores to be used as fuel.

## Plan for a Normal Course

- The patient history and blood work are completed.
- Measurements and initial weight are recorded.
- Patient must weigh every day with accurate scales and maintain a log.
- Patient eats excessively the first two days while taking HCG to make sure the normal fat stores are full.
- The prescribed amount of HCG is taken daily (except during menstruation).
- On the 3<sup>rd</sup> day of taking the HCG, patient will begin the 500 calorie diet. This diet will continue until 3 days after the last dose of HCG. It may be difficult to consume the 500 calories since HCG prevents hunger, but the instructions must be followed exactly.
- For the following 3 weeks after HCG doses are completed (maintenance phase), the patient will eat only the same foods that they ate while on the 500 calorie diet, but will increase the calories to 1000-1200 and will eat a breakfast (usually melba toast and fruit).
- After the 3 weeks of maintenance is completed, the patient can very gradually add starch and sugar in small quantities, always controlled by the morning weight.
- Key to the success of this diet is to follow the directions/method exactly, no substitutions, deviation, or cheating allowed. **ANY CHEATING, EVEN THE SMALLEST AMOUNT, WILL STALL WEIGHT LOSS!!**

Note: No dose of HCG will be given during the heaviest days of menstruation, but the diet is continued. The best time to begin this diet is immediately after a period. It is advisable to have 10 days on the diet before beginning the next period.

## The Principal of the HCG Diet

HCG is produced in very large quantities during pregnancy. The purpose of HCG is to place every ounce of fat (stored energy in the form of calories) at the disposal of the growing fetus. This means that the abnormal fat will not be locked away in the fat bank. If this were not so, an obese woman, whose normal reserves of fat are already depleted, would have trouble coming to full term. This huge increase in HCG produced in the placenta brings about changes in the hypothalamus necessary to extract fat from the fat bank.

By taking HCG, we are able to increase the ability of the body to access abnormal fat. However, this does not in itself affect weight loss. HCG just transfers fat from the fat bank into normal fat reserves. To lose the weight one must use the fat that is now available. In pregnancy, the growing embryo uses some of these calories. In obesity, there is no embryo, so there has to be a severe dietary restriction for the duration of treatment. HCG brings about continual saturation of the blood with available calories which is why obese patients under treatment with HCG never feel hungry in spite of drastically reduced food intake.



As in pregnancy, we frequently see improvements in type II diabetes, rheumatism, cholesterol, gout, blood pressure, peptic ulcers, fingernails and varicose veins. Of course, obesity in itself, contributes to some of the above conditions and losing weight helps. But HCG treatment may cause positive benefits early on in the therapy.

In treating obesity with the HCG and diet method, it is extremely important to follow directions EXACTLY.

The slightest variation, even if it seems like it would be an improvement, very likely will produce disappointing results. For instance, if the diet is increased from 500 calories to 600 or even lowered to 400 calories, the weight loss will be unsatisfactory.

Glandular Theories: For years, doctors have theorized that obesity may occur secondary to problems with glands.

- The thyroid gland can cause problems with weight gain. But it is rare for the thyroid to be low enough to cause a problem. Some doctors will even give thyroid medication just in case the thyroid may be the problem. This is not an effective method.
- The pituitary gland produces many hormones but it is extremely rare that the pituitary gland causes any weight gain.
- The adrenal glands produce cortisone as well as other hormones. Dysfunction of the adrenal gland can cause weight gain but this is very different from the abnormal fat of obesity with many other signs and symptoms.

The most likely cause: the hypothalamus, buried deep in the human brain, is a huge mass of nervous tissue with which we think with reason and voluntarily move our body. This part of the brain controls our central nervous system which regulates the entire automatic animal functions of the body such as breathing, heart rate, digestion, sleep, sex, urination, and via the anterior pituitary, the whole interplay of the endocrine glands. It is thought that this complex operation also controls storing and issuing fuel for the body, a so called fat bank. When the body assimilates from the intestinal tract more fuel than is needed at the moment, the surplus is deposited in a current account, normal fat. Energy can readily be withdrawn from this account. This control of where fat is to be stored into the normal fat account is controlled by the hypothalamus. When deposits of fat grow too rapidly and small withdrawals are being made, a point is reached beyond the capacity of the hypothalamus. Surplus fat is then stored in a fixed deposit into which all

surplus fats go but from which can no longer be withdrawn from by the usual dieting and exercise. Once the abnormal fat deposit has been established the normal fat reserves are held at a minimum while all surpluses are locked away in fixed deposit and are taken out of circulation. This abnormally functioning hypothalamus is most likely due to inheritance. But we know that the hypothalamus can be reset with the HCG diet.

### **HCG Diet Program**

This is a summary of the book POUNDS AND INCHES, A NEW APPROACH TO OBESITY, by A.T.W. Simeons.

Obesity is a disorder: Obesity is due to an abnormal functioning of some part of the body. Persons suffering from obesity will get fat regardless of whether they eat excessively or not. Another who is free of the disorder will never get fat even if he/she overeats. Losing weight by dieting, taking diet medications, exercising, laxatives, etc. is temporary. This basic disorder has to be corrected.



Three kinds of fat: Structural fat fills in the gaps between various organs, a sort of packing material. This type of fat protects the kidneys, coronary arteries, and other organs. This is the spongy cushion of hard fat under the bones of the feet which, without this we would not be able to walk.

Reserve fat is the way the body stores energy from which we can freely draw upon to meet the demands between meals. Fat is a substance which packs the highest caloric value into the smallest space so that normal reserves of fuel for muscular activity and maintenance of body temperature can be stored.

Structural fat and normal reserve fat are normal. This is never obesity. Abnormal fat is also a potential reserve of fuel but unlike normal reserves, it is not readily available to the body. It is locked away in a secure deposit and not kept in a current account as is the normal reserve fat. When an obese person tries to reduce by starving he/she will lose their normal fat reserves. When these are exhausted he will begin to burn up structural fat, finally, the body begins to use the abnormal fat, the ugly fat we don't like. By this time, the patient is feeling hungry and weak and the diet is usually stopped. This is the problem with dieting...we lose the wrong fat, we feel famished and tired. The face is haggard and we cannot lose the fat over the belly, hips, thighs and upper arms.

### **Starting treatment**

In menstruating women, the best time to start treatment is immediately after a period. Treatment may also be started later, but it is advisable to have at least ten days in hand before the onset of the next period. Similarly, the end of a course should never be made to coincide with onset of menstruation. If things should happen to work out that way, it is better to give the last dose of HCG three days before the expected date of the menses so that a normal diet can be resumed at onset.

Alternatively, at least three doses of HCG should be given after the period, followed by the usual three days of dieting. This rule need not be observed in such patients who have reached their normal weight before the end of treatment and are already on a higher caloric diet.

## **The Usual Plan Is**

Blood will be drawn and the patient will meet with the PA for a brief history and physical. The RN will go over instructions and measurements and weight will be recorded.

DAY 1 and 2: The first 2 days of taking HCG, the patient will eat at will, even to the point of gorging. This is to make sure the normal fat stores are full.

DAY 3: On the 3<sup>rd</sup> day of taking HCG, the patient will begin the 500 calorie diet and continue for the entire treatment, as well as for 3 more days after the last dose.

## **The Diet**

The 500 calorie diet contains two meals a day. It must be understood that the actual diet...the foods eaten...are chosen specifically for a reason. If the diet calls for an apple and it is known that a breadstick is exactly the same number of calories, a substitution cannot be made. This is known after thousands of experiences in weight loss. When on the HCG diet method, we are living to a far greater extent on the abnormal fat that is now free in the circulation than of the food eaten that day.

By the 3<sup>rd</sup> dose of HCG (the 1<sup>st</sup> day of the 500 calorie diet), most will feel full and be anxious to begin the diet. On the 4<sup>th</sup> day, most will declare they are feeling fine except for a mild headache for which an aspirin can be taken. By then, the usual weight loss is 2 pounds or more. By the 2<sup>nd</sup> and 3<sup>rd</sup> day...that is, the 5<sup>th</sup> day and 6<sup>th</sup> day of taking HCG...the minor complaints will improve. It is usual by this time to feel remarkable well, no hunger, nor tempted when others are eating normally. They feel lighter, more clearheaded and notice a desire to move quite contrary to their previous lethargy.

## **Water**

Drinking water is encouraged. Drinking more water does not put on weight. The more you drink the more you will void. Also, water softens the bowels. Since the diet calls for such a low calorie count each day, the bowels may act only every 3 or 4 days. This is acceptable. Tea, coffee, plain water, or mineral water are the only drinks allowed, but they may be taken in any quantity and at all times. Carbonated or flavored water is not allowed.

In fact, the patient should drink about 2 liters of these fluids per day. Many patients are afraid to drink so much because they fear that this may make them retain more water. This is a wrong notion as the body is more inclined to store water when the intake falls below its normal requirements.



## **Concluding the course**

The patient continues the 500 calorie diet for 3 days after the last dose of HCG. After 3 days, the patient must eat only the same foods that they ate while on the 500 calories, but they will increase the calorie count to 1000-1200. No simple carbohydrates are eaten (sugar, rice, bread, potatoes, pastries, etc. are the most dangerous).

The reason the treatment is limited to 40 days is after this time the body begins to show signs of hunger which is due to immunity to HCG. This requires a period of time to regain sensitivity to HCG. If the goal weight is not reached in 40 days, there has to be a minimum of 6 weeks HCG free break.

A SECOND COURSE: A second course can be resumed after an interval of not less than 6 weeks. When a 3<sup>rd</sup> or 4<sup>th</sup> or 5<sup>th</sup> course is needed, the interval between courses should be progressively longer. Between the 2<sup>nd</sup> and 3<sup>rd</sup> would be 8 weeks, between the 3<sup>rd</sup> and 4<sup>th</sup> 12 weeks, between 4<sup>th</sup> and 5<sup>th</sup> 20 weeks and between the 5<sup>th</sup> and 6<sup>th</sup> 6 months. In the manor, it is possible to lose 100 pounds or more.

You must record your weight each morning and accurate scales must be used. These records will be reviewed by the medical staff every week.

It is imperative that the patient follow the instructions to the letter. It may even be difficult to eat 500 calories a day as HCG prevents hunger.

MENSTRUATION: during menstruation no HCG will be given, but the diet is continued. As soon as the period stops, the HCG dose is resumed. The best time to begin is immediately after a period. It is advisable to have 10 days on the diet before beginning of the next period.

Every item in the list is gone over carefully, continually stressing the point that no variations other than those listed may be introduced. **All things not listed are forbidden**, and the patient is assured that nothing permissible has been left out. The 3.5 of meat must be weighed raw after all visible fat has been removed. To do this accurately the patient must have a digital scale, as kitchen scales are not sufficiently accurate and the butcher should certainly not be relied upon. In the beginning patients are advised to check every meal against their diet sheet before starting to eat and not to rely on their memory.

It is also worth pointing out that any attempt to observe this diet without HCG will lead to trouble in two to three days. We have had cases in which patients have proudly flaunted their dieting powers in front of their friends without mentioning the fact that they are also receiving treatment with HCG. They let their friends try the same diet, and when this proves to be a failure — as it necessarily must — the patient starts raking in unmerited kudos for superhuman willpower.

The most tiresome patients are those who start counting calories and then come up with all manner of ingenious variations which they compile from their little books. When one has spent years of weary research trying to make a diet as attractive as possible without jeopardizing the loss of weight, culinary geniuses who are out to improve their unhappy lot are hard to take.



**The do's**



**The don'ts**

**Do's** - Drink lots of water.

One can take a good multi-vitamin/mineral, although it is not required. Make sure all vitamins are NOT fat soluble. No fish oils, vitamin E or A. We recommend you buy high quality products such as those carried by health food stores. They will help with energy and regularity.

One can do light exercise such as walking, although studies have shown that light exercise does not speed up the weight loss and heavy exercise can slow weight loss down.

**Don'ts** - Do not use oils or lubricants. This includes oil based cosmetics- fats, oils, creams, lotions and ointments. When applied to the skin they are absorbed and interfere with weight reduction by HCG just as if they had been eaten. The body will stop burning fat and digest the oils instead. Stay away from these while on this program. Mineral oil (baby oil) may be used if needed. Lipsticks and powders are fine. Oil free foundation and mineral powder is a good substitute. Alba oil free lotion from your local health food store is a great alternative. Not abiding by this can stall weight loss for 1-3 days.

Don't add any foods or liquids of any kind that are not on the food list.

No coffee creamer (only 1 tablespoon of skim milk can be used per day)

Avoid eating out

No artificial sweeteners

No Sugar! Read all the labels on seasonings and food. No sugar or starch.

No gums or mints.

No cold medicines (Nyquil, cough drops, etc.)

No diet drinks or flavored water (diet soda, diet/sugar-free powdered drinks).

No butter, oil, Pam spray, or dressing.

## Low Calorie Diet Breakdown

- One serving of fruit (2/day)
- 3.5oz of lean meat (2/ day)
  - o 3.5 oz. if weighed raw, 3.0 oz. if cooked
- Vegetables (2/day)
  - o 3.5 oz. if weighed raw, 3.0 oz. if cooked
- Drink water (1/2 to 1 gallon per day), brewed tea (black or herbal), or coffee (unflavored) in any quantity without sugar. Only 1 tablespoon of skim milk allowed in a 24 hour period. Stevia may be used as a sweetener. Green tea is also great to help with energy and even helps to burn more fat.
- Grissino breadsticks or Melba toasts are allowable starches.

**Sweeteners and Seasonings:** Stevia can be used in your recipe for dressing, teas, on top of fruit, etc. Stevia comes in liquid and powder form and is highly recommended by previous HCG diet participants. Truvia is a great Stevia product that is a safe sugar substitute without any aftertaste. The juice of one lemon is allowed for all purposes and recommended to alkalize the body. Sea salt (include it in your diet everyday), pepper, vinegar, mustard, garlic, sweet basil, parsley, thyme, chives, cilantro, etc. may be used for seasoning. Sugar-free salsa/Pico de Gallo may be used in moderation (must not contain artificial sweeteners or sugar). No oil, butter, sugar or dressing.

## Plan for a Normal Course

- Prescribed amount of HCG daily (except during menstruation).
- The day of 3<sup>rd</sup> taking HCG, begin 500 calorie diet. Continue this diet until 3 days after the last dose.
- For the following 3 weeks (the maintenance phase), the patient continues the 500 calorie diet for 3 days after the last dose of HCG. After 3 days, the patient must eat only the same foods that they ate while on the 500 calories, but they will increase the calorie count to 1000-1200. **During the maintenance phase, breakfast is eaten** (Melba toast and fruit for example). No simple carbohydrates are eaten (sugar, rice, bread, potatoes, pastries, etc. are the most dangerous).
- After the 3 weeks of maintenance is completed, very gradually add starch and sugar in small quantities, always keeping an eye on your morning weight.
- If more weight needs to be lost, there is a waiting period of 6 weeks before the HCG injections can be resumed and another cycle started.



## Cheat Sheet

We've broken down a list of allowed foods for the HCG diet. **ANY FOODS NOT ON THIS LIST ARE NOT ALLOWED!**

**This list should be used as a reference for the approximate calorie amount in the allowable foods, based on the weight. ALWAYS READ LABELS and adjust the weight if need be. It is best to prepare ahead and add up all calories you will eat each day, to make sure they total as close to 500 as possible. If you find your total is a little less than 500 calories after adding up your snack, lunch, dinner, and snack, it is best to add from the allowable vegetables in order to get the total calories up to 500. COUNT YOUR CALORIES!**

### Beef 3.5 ounces/100 grams

Lean Ground Beef 97% lean= 150 calories  
Cube Steak = 160 calories  
Sirloin Tip Steak = 130 calories  
Top Round Steak = 166 calories  
Veal = 110 calories  
Veal Chop = 117 calories

### Fowl 3.5 ounces /100 grams

Lean Ground Chicken 93% Lean = 180 calories  
Chicken Breast = 87 calories  
Jennie O Lean Turkey Burgers = 180 calories  
Lean Ground Turkey 93% lean = 150 calories

### Seafood 3.5 ounces/100 grams

Cod = 83 calories  
Crab Meat (not imitation) = 100 calories  
Flounder = 90 calories  
Haddock = 88 calories  
Halibut = 110 calories  
Lobster = 98 calories  
Red Snapper = 110 calories  
Shrimp = 110 calories  
Tilapia = 94 calories  
Lemon Sole =116 calories  
Monk Fish = 96 calories  
Whiting = 87 calories

### Vegetables 3.5 ounces/100 grams

Asparagus = 20 calories  
Broccoli =34 calories  
Celery = 15 calories  
Cabbage = 24 calories  
Cauliflower = 22 calories  
Cucumber = 12 calories  
Lettuce all varieties = 20 calories  
Red Radishes = 12 calories  
Spinach raw = 20 calories  
Spinach frozen = 23 calories  
Tomato = 20 calories  
Sweet Onion = 32 calories  
Green Onion = 32 calories

### Fruit average 76.5 calories

Apple (s) = 55 calories  
Apple (m) = 72 calories  
Apple (l) = 110 calories  
Navel Orange = 69 calories  
Florida Orange = 65 calories  
Strawberries 12 (l) = 72 calories  
Strawberries 20(m) = 80 calories  
Pink California Grapefruit = 92 calories  
Pink Florida Grapefruit = 74 calories

### Bread 1 piece = 1 serving

1 Grissini Bread stick = 20 calories  
1 Melba Toast Piece = 20 calories

## Additional Information

**\*You will need a digital food scale to weigh your food\***

**Approved Vinaigrette Dressing Recipe- Use sparingly on salad**

1 tbsp. fresh squeezed lemon juice

1 tbsp. vinegar

3 tbsp. water

Pinch of minced garlic

2 tsp. Stevia sweetener (optional)