

Hcg diet overview

(please, 1 copy of diet per bottle purchased here at nature's whole food depot)

Download Dr. Simeon's original manuscript free: www.pounds-and-inches.com

It is recommended that if you have any pre-existing illness, you should seek the approval of your doctor before any diet. If you are pregnant you should not be on this diet! It is possible to lose 1-2 lbs a day on the HCG diet. It is a diet that most people have been able to lose weight on who have struggled with metabolic/endocrine challenges. Many people stall out on every diet known to mankind & gained despite following diets!

The HCG drops Protocol is 6 drops, six times a day. For optimum benefit, refrain from eating or drinking anything 15 minutes before drops and fifteen minutes after drops are administered.

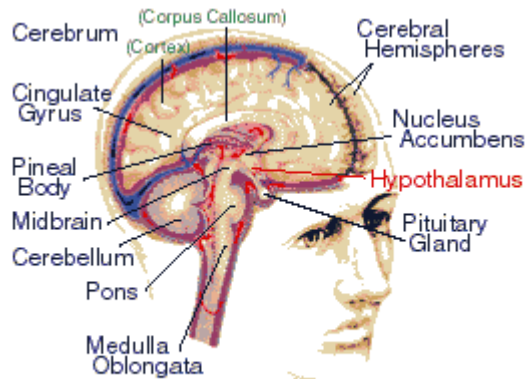
Ingredients: Human Chorionic Gonadotrophin (HCG) 6x,12x, 30x, 60x - 4 different doses for maximum effectiveness, purified water & 16% alcohol. This is HCG in a dilute amount as per homeopathic medicine manufactured by GMP standards.

Many Simeon's dieters are using full dose injectable HCG. However, it has been shown that the same results occur with homeopathic hcg. Many people who have switched from injectable hcg to homeopathic hcg have actually done better on the homeopathic! It would cost you \$1000 or more to do the Simeon's diet in a diet clinic.

It is imperative to do the diet along with the formula. The HCG Simeon's protocol is based on a very low calorie/low carb/very low fat diet with the premise that HCG forces your body to lose adipose tissue (the bad fat); while at the same time your body has access to the calories from this fat as it's shedding. It also resculpts your body at the same time - you will notice more inch loss than on many other diets. After the weight loss phase is over, another 3 weeks are added for stabilization & to reset the hypothalamus (Phase 3) in addition to another 3 weeks of introducing starches (Phase 4).

The Simeon's/HCG diet is safe for men as well as women. In fact, in fertility treatment, HCG is sometimes used to stimulate sperm production. This is not due to a direct hormonal influence. The HPA axis (hypothalamus/pituitary/adrenal) is a very strong player in influencing normal hormonal balance.

What is the Hypothalamus?



-At the center of it all-
The Hypothalamus:

The hypothalamus is involved in your metabolism "set point". With age, the hypothalamus builds up toxins & begins to malfunction. It may explain part of why our metabolism goes down with age; we have more & more sleeping difficulties, and hormonal/ovulatory disturbances as well as other symptoms.

The Hypothalamus is the control center of all autonomic regulatory activities of the body. It has been said that the hypothalamus is the brain of the brain. It is the hub for automatic and endocrine homeostatic systems such as cardiovascular, temperature, and abdominal visceral regulation. It manages all endocrine hormonal levels, sensory processing, and organizing body metabolism, as well as ingestive behaviors. It appears that almost everything the Hypothalamus does is related in some way to the management of brain and body connection, linking the psyche (mind) to the body.

The hypothalamus controls:

- Pituitary gland regulation
- Blood Pressure regulation
- Hunger & Salt cravings
- Feeding Reflexes
- Thirst
- Body temperature regulation
- Hydration
- Heart rate
- Bladder function (hcg can remedy prostate problems)
- Water preservation
- Hormonal/neurotransmitter regulation
- Ovarian function
- Testicular function
- Mood & behavioral functions
- Wakefulness
- Metabolism
- Sleep cycles

Energy levels

In addition, before the resurgence of the HCG diet, homeopathic hcg on its own was used for:

Increasing energy

Increasing muscle tone

Reducing excess body fat

Rejuvenation of necessary structural fat

Lowering cholesterol levels

Improving adrenal gland function

Maintaining progesterone levels during the luteal phase

I now use a few drops day of this homeopathic hcg 2 days before ovulation & one drop every other day during first 5 days of luteal phase & have not had to use my progesterone cream, and have perfect cycles - better than with progesterone cream ! It has also improved the "strength" of ovulation, which increases progesterone levels further.

It has been said that the hypothalamus "stores emotions" (sometimes to our detriment). I can also say that a lot of emotional "crud" came out during the diet. I have a feeling of well being I haven't had in a very long time. This diet has changed my life in many more ways than weight loss. It is very easy to stick to, because seeing the weight come off immediately is the ultimate motivator. What would have taken someone months to lose, takes weeks to lose. And for those who have tried in vain to lose weight and STUCK to a diet but stalled out, or even worse - GAINED and who have been completely discouraged & at their wits end...this WORKS.

Although 7-10 lbs. or more may seem like the rapid weight loss your doctor may warn you about losing too fast, remember this is different. You are resetting the hypothalamus & metabolism. This weight will not pile back on...as long as you follow the diet properly and do ALL the phases correctly!!

~Thank you & praying you the best on your journey into leanness and detoxification!~

Drinks and Seasonings

The juice of one lemon daily is allowed for all purposes. Salt, pepper, vinegar, mustard powder, garlic, sweet basil, parsley, thyme, marjoram, etc., may be used for seasoning, but no oil, butter or dressing.

Tea, coffee, plain water, or mineral water (2 liters of water per day is recommended) are the only drinks allowed, but they may be taken in any quantity and at all times.

The fruit or the breadstick may be eaten between meals instead of with lunch or dinner, but not more than than four items listed for lunch and dinner may be eaten at one meal.

No cosmetics other than lipstick, eyebrow pencil and powder may be used without special permission.

Portions and specially prepared unsweetened, low calorie foods

"In many countries specially prepared unsweetened and low Calorie foods are freely available, and some of these can be tentatively used... the total daily intake must not exceed 500 Calories if the best possible results are to be obtained, that the daily ration should contain 200 grams of fat-free protein and a very small amount of starch." From Dr Simeon's "Pounds and Inches."

The manuscript can be found here:
www.pounds-and-inches.com

Important Highlights:

- The 500 calorie limit must always be maintained.
- 2 small apples are not an acceptable exchange for "1 apple."
- Very occasionally we allow egg - boiled, poached or raw - to patients who develop an aversion to meat, but in this case they must add the white of three eggs to the one they eat whole.
- Cottage cheese made from skimmed milk is available 100 grams may occasionally be used instead of the meat

Personal Care and Beauty Products on the hCG Diet:

- We do permit the use of lipstick, powder and such lotions as are entirely free of fatty substances. We also allow brilliantine to be used on the hair but it must not be rubbed into the scalp. Obviously sun-tan oil is prohibited.
- Aspirin and birth control are allowed on the Simeons hCG Diet.
- No massage of any kind.

A short list of hCG Diet-friendly personal care and beauty products are available here: <http://www.hcgdietinfo.com/HCG-Diet-Products.htm>

Dr. Simeons: Pounds and Inches

Important: If you have been accustomed to eating highly processed foods, you may benefit by a 7-10 cleanse protocol. This has been helpful in increasing the efficacy of the HCG diet protocol. Ask about this.

Preparation and Pre-500 calorie Protocol

Before you begin the following HCG drop diet protocol (21 with drops followed by two days without drops), it is imperative that you do two days of gorging accompanied with the HCG drop protocol. I strongly encourage you to eat as much high quality, (organic, non-GMO, unprocessed, whole, REAL food) high fat foods during this time to feed your structural fat store. This will help you with over hunger when your body transitions into the 500 calorie regime. Remember, you must do the drops for 23 days, two days during your gorging session and 21 days with the 500 calorie protocol.

The Diet

Breakfast:

Tea or coffee in any quantity without sugar. Only one tablespoonful of milk allowed in 24 hours. Stevia, truvia, or a stevia product may be used. Aspartame is very toxic and would work against the detoxification process the drops allow. (casf)

Lunch:

1.
100 grams of veal, beef, chicken breast, fresh white fish, lobster, crab, shrimp, or water-packed tuna. All visible fat must be carefully removed before cooking, and the meat must be weighed raw. It must be boiled or grilled without additional fat. Salmon, eel, herring, dried or pickled fish are not allowed.

2.
One type of vegetable only to be chosen from the following: spinach, chard, chicory, beet-greens, green salad, tomatoes, celery, fennel, onions, red radishes, cucumbers, asparagus, cabbage. (personal note: we did a mild amount of mixing and the diet was not hindered but the scale will let you know what your body will tolerate. (casf)

3.
One breadstick (grissini) or one Melba toast.

4.
An apple or an orange or a handful of strawberries or one-half grapefruit.

Dinner:

The same four choices as lunch.

The juice of one lemon daily is allowed for all purposes. Salt, pepper, vinegar, mustard powder, garlic, sweet basil, parsley, thyme, marjoram, etc., may be used for seasoning, but no oil, butter or dressing.

Tea, coffee, plain water, or mineral water are the only drinks allowed, but they may be taken in any quantity and at all times.

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.

The fruit or the breadstick may be eaten between meals instead of with lunch or dinner, but not more than four items listed for lunch and dinner may be eaten at one meal.

No cosmetics other than lipstick, eyebrow pencil and powder may be used. 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 100 grams of meat must be scrupulously weighed raw after all visible fat has been removed. To do this accurately the patient must

have an ounce/gram scale, as kitchen scales are not sufficiently accurate. Those not uncommon patients, who feel that even so little food is too much for them, can omit anything they wish. There is no objection to breaking up the two meals. For instance, you may have a breadstick and an apple for breakfast or an orange before going to bed, provided they are deducted from the regular meals. The whole daily ration of two breadsticks or two fruits may not be eaten at the same time, nor can any item saved from the previous day be added on the following day. 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.

It should also be mentioned that two small apples weighing as much as one large one nevertheless have a higher caloric value and are therefore not allowed, though there is no restriction on the size of one apple. Some people do not realize that a tangerine is not an orange and that chicken breast does not mean the breast of any other fowl, nor does it mean a wing or drumstick.

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.

Making up the Calories:

The diet used in conjunction with HCG must not exceed 500 Calories per day, and the way these Calories are made up is of utmost importance. For instance, if a patient drops the apple and eats an extra breadstick instead, he will not be getting more Calories but he will not lose weight. There are a number of foods, particularly fruits and vegetables, which have the same or even lower caloric values than those listed as permissible, and yet we find that they interfere with the regular loss of weight under HCG, presumably owing to the nature of their composition. Pimiento peppers, okra, artichokes and pears are examples of this.

While this diet works satisfactorily in Italy, certain modifications have to be made in other countries. For instance, American beef has almost double the caloric value of South Italian beef, which is not marbled with fat. (NOTE: FREE RANGE, GRASS-FED BEEF IS ACCEPTABLE -casf) This marbling is impossible to remove. In America, therefore, low-grade veal should be used for one meal and fish (excluding all those species such as herring, mackerel, salmon, eel, etc., which have a high fat content, and all dried, smoked or pickled fish), chicken breast, lobster, crawfish, prawns, shrimps, crabmeat or kidneys for the other meal. Where the Italian breadsticks, the so-called grissini, are not available, one Melba toast may be used instead, though they are psychologically less satisfying. A Melba toast has about the same weight as the very porous grissini which is much more to look at and to chew.

In many countries specially prepared unsweetened and low Calorie foods are freely available, and some of these can be tentatively used. When local conditions or the feeding habits of the population make changes necessary, it must be borne in mind that the total daily intake must not exceed 500 Calories if the best possible results are to be obtained, that the daily ration should contain 200 grams of fat-free protein and a very small amount of starch. Just as the daily dose of HCG is the same in all cases, so the same diet proves to be satisfactory for a small elderly lady of leisure or a hard working muscular giant. Under the effect of HCG the obese body is always able to obtain all the Calories it needs from the abnormal fat deposits, regardless of whether it uses up 1500 or 4000 per day. It must be made very clear to the patient that he is living to a far greater extent on the fat which he is losing than on what he eats.

Many patients ask why eggs are not allowed. The contents of two good sized eggs are roughly equivalent to 100 grams of meat, but fortunately the yolk contains a large amount of fat, which is undesirable. Very occasionally we allow egg - boiled, poached or raw - to patients who develop an aversion to meat, but in this case they must add the white of three eggs to the one they eat whole. In countries where cottage cheese made from skimmed milk is available 100 grams may occasionally be used instead of the meat, but no other cheeses are allowed.

Vegetarians:

Strict vegetarians such as orthodox Hindus present a special problem, because milk and curds are the only animal protein they will eat. To supply them with sufficient protein of animal origin they must drink 500 cc. of skimmed milk per day, though part of this ration can be taken as curds. As far as fruit, vegetables and starch are concerned, their diet is the same as that of non-vegetarians; they cannot be allowed their usual intake of vegetable proteins from leguminous plants such as beans or from wheat or nuts, nor can they have their customary rice. In spite of these severe restrictions, their average loss is about half that of non-vegetarians, presumably owing to the sugar content of the milk.

The following information is taken from Dr. Simeon's original manuscript. We have edited it for homeopathic protocol rather than the HCG shot protocol when useful)

Faulty Dieting

Few clients will take one's word for it that the slightest deviation from the diet has under HCG disastrous results as far as the weight is concerned. This extreme sensitivity has the advantage that the smallest error is immediately detectable at the daily weighing but most patients have to make the experience before they will believe it. Persons in high official positions such as embassy personnel, politicians, senior executives, etc., who are obliged to attend social functions to which they cannot bring their meager meal must be told beforehand that an official dinner will cost them the loss of about three days treatment, however careful they are and in spite of a friendly and would-be cooperative host. We generally advise them to avoid all-round embarrassment, the almost inevitable turn of conversation to their weight problem and the outpouring of lay counsel from their table partners by not letting it be known that they are under treatment. They should take dainty servings of everything, hide what they can under the cutlery and book the gain which may take three days to get rid of as one of the sacrifices which their profession entails. Allowing three days for their correction such incidents do not jeopardize the treatment, provided they do not occur all too frequently, in which case treatment should be postponed to a socially more peaceful season.

Vitamins and anemia

Sooner or later most patients express a fear that they may be running out of vitamins or that the restricted diet may make them anemic. On this score the physician can confidently relieve their apprehension by explaining that every time they lose a pound of fatty tissue, which they do almost daily, only the actual fat is burned up; all the vitamins, the proteins, the blood, and the minerals which this tissue contains in abundance are fed back into the body. Actually, a low blood count not due to any serious disorder of the blood forming tissues improves during treatment, and we have never encountered a significant protein deficiency or signs of a lack of vitamins in patients who are dieting regularly.

The First Days of Treatment

On the first day, after the two day gorge with drop, it is almost routine to hear two remarks. One is: "You know I'm sure it's only psychological, but I already feel quite different". So common is this remark, even from very skeptical patients, that we hesitate to accept the psychological interpretation. The other typical remark is: "Now that I have been allowed to eat anything I want, I can't get it down. Since yesterday I feel like a stuffed pig. Food just doesn't seem to interest me anymore, and I am longing to get on with the diet". Many patients notice that they are passing more urine and that the swelling in their ankles is less even before they start dieting.

On the day of the fourth dose most patients declare that they are feeling fine. They have usually lost two pounds or more, some say they feel a bit empty but hasten to explain that this does not amount to hunger. Some complain of a mild headache of which they have been forewarned and for which they have been given permission to take aspirin.

During the second and third day of dieting, these minor complaints improve while the weight continues to drop at about double the usually overall average of almost one pound per day, so that a moderately severe case may by the fourth day of dieting have lost as much as 8-10 lbs.

It is usually at this point that a difference appears between those patients who have literally eaten to capacity during the first two days of treatment and those who have not. The former feel remarkably well; they have no hunger, nor do they feel tempted when others eat normally at the same table. They feel lighter, more clear-headed and notice a desire to move quite contrary to their previous lethargy. Those who have disregarded the advice to eat

to capacity continue to have minor discomforts and do not have the same euphoric sense of well-being until about a week later. It seems that their normal fat reserves require that much more time before they are fully stocked.

Fluctuations in weight loss:

After the fourth or fifth day of dieting the daily loss of weight begins to decrease to one pound or somewhat less per day, and there is a smaller urinary output. Men often continue to lose regularly at that rate, but women are more irregular, in spite of faultless dieting. There may be no drop at all for two or three days and then a sudden loss which reestablishes the normal average. These fluctuations are entirely due to variations in the retention and elimination of water, which are more marked in women than in men.

The weight registered by the scale is determined by two processes, not necessarily synchronized. Under the influence of HCG fat is being extracted from the cells, in which it is stored in the fatty tissue. When these cells are empty and therefore serve no purpose, the body breaks down the cellular structure and absorbs it, but breaking up of useless cells, connective tissue, blood vessels, etc., may lag behind the process of fat-extraction. When this happens, the body appears to replace some of the extracted fat with water which is retained for this purpose. As water is heavier than fat the scales may show no loss of weight, although sufficient fat has actually been consumed to make up for the deficit in the 500-Calorie diet. When then such tissue is finally broken down, the water is liberated and there is a sudden flood of urine and a marked loss of weight. This simple interpretation of what is really an extremely complex mechanism is the one we give those patients who want to know why it is that on certain days they do not lose, though they have committed no dietary error.

Patients, who have previously regularly used diuretics as a method of reducing, lose fat during the first two or three weeks of treatment which shows in their measurements, but the scale may show little or no loss because they are replacing the normal water content of their body which has been dehydrated. **Diuretics should never be used for reducing.**

Interruptions of Weight Loss:

We distinguish four types of interruption in the regular daily loss. The first is the one that has already been mentioned in which the weight stays stationary for a day or two, and this occurs, particularly towards the end of a course, in almost every case.

The Plateau:

The second type of interruption we call a "plateau". A plateau lasts 4-6 days and frequently occurs during the second half of full course, particularly in patients that have been doing well and who's overall average of nearly a pound per effective dose has been maintained. Those who are losing more than the average all have a plateau sooner or later. **A plateau always corrects, itself**, but many patients who have become accustomed to a regular daily loss get unnecessarily worried and begin to fret. No amount of explanation convinces them that a plateau does not mean that they are no longer responding normally to treatment.

In such cases we consider it permissible, for purely psychological reasons, **to break up the plateau**. This can be done in two ways. One is a so-called "apple day". **An apple-day begins at lunch and continues until just before lunch of the following day. The patients are given six large apples and are told to eat one whenever they feel the desire though six apples is the maximum allowed.** During an apple-day no other food or liquids except plain water are allowed and of water they may only drink just enough to quench an uncomfortable thirst if eating an apple still leaves them thirsty. Most patients feel no need for water and are quite happy with their six apples. Needless to say, an apple-day may never be given on the day on which there is no dose. The apple-day produces a gratifying loss of weight on the following day, chiefly due to the elimination of water. This water is not regained when the patients resume their normal 500-Calorie diet at lunch, and on the following days they continue to lose weight satisfactorily. The other way to break up a plateau is by using a homeopathic or mild herbal diuretic * for one day.

This is simpler for the patient, but we prefer the apple-day, as we sometimes find that though the diuretic is very effective on the following day it may take two to three days before the normal daily reduction is resumed, throwing the patient into a new fit of despair. It is useless to give either an apple-day or a diuretic unless the weight has been stationary for at least four days without any dietary error having been committed.

Reaching a Former Level:

The third type of interruption in the regular loss of weight may last much longer than and even as long as ten days to two weeks. Fortunately, it is rare and only occurs in very advanced cases, and then hardly ever during the first

course of treatment. It is seen only in those patients who during some period of their lives have maintained a certain fixed degree of obesity for ten years or more and have then at some time rapidly increased beyond that weight. When then in the course of treatment the former level is reached, it may take two weeks of no loss, in spite of HCG and diet, before further reduction is normally resumed.

Menstrual Interruption:

The fourth type of interruption is the one which often occurs a few days before and during the menstrual period and in some women at the time of ovulation. It must also be mentioned that when a woman becomes pregnant during treatment - and this is by no means uncommon - she at once ceases to lose weight.

Dietary Errors:

Any interruption of the normal loss of weight which does not fit perfectly into one of those categories is always due to some possibly very minor dietary error. Similarly, any gain of more than 100 grams is invariably the result of some transgression or mistake, unless it happens on or about the day of ovulation or during the three days preceding the onset of menstruation, in which case it is ignored. In all other cases the reason for the gain must be established at once.

The patient who frankly admits that he has stepped out of his regimen when told that something has gone wrong is no problem. He is always surprised at being found out, because unless he has seen this himself he will not believe that a salted almond, a couple of potato chips, a glass of tomato juice or an extra orange will bring about a definite increase in his weight on the following day.

Very often he wants to know why extra food weighing one ounce should increase his weight by six ounces. We explain this in the following way: Under the influence of HCG the blood is saturated with food and the blood volume has adapted itself so that it can only just accommodate the 500 Calories which come in from the intestinal tract in the course of the day. Any additional income, however little this may be, cannot be accommodated and the blood is therefore forced to increase its volume sufficiently to hold the extra food, which it can only do in a much diluted form. Thus it is not the weight of what is eaten that plays the determining role but rather the amount of water which the body must retain to accommodate this food.

This can be illustrated by mentioning the case of salt. In order to hold one teaspoonful of salt the body requires one liter of water, as it cannot accommodate salt in any higher concentration. Thus, if a person eats one teaspoonful of salt his weight will go up by more than two pounds as soon as this salt is absorbed from his intestine.

To this explanation many patients reply: "Well, if I put on that much every time I eat a little extra, how can I hold my weight after the treatment?" It must therefore be made clear that this only happens as long as they are under HCG. When treatment is over, the blood is no longer saturated and can easily accommodate extra food without having to increase its volume. Here again the professional reader will be aware that this interpretation is a simplification of an extremely intricate physiological process which actually accounts for the phenomenon.

Salt and Reducing:

While we are on the subject of salt, I can take this opportunity to explain that we make no restriction in the use of salt and insist that the patients drink large quantities of water throughout the treatment. We are out to reduce abnormal fat and are not in the least interested in such illusory weight losses as can be achieved by depriving the body of salt and by desiccating it. Though we allow the free use of salt, the daily amount taken should be roughly the same, as a sudden increase will of course be followed by a corresponding increase in weight as shown by the scale. An increase in the intake of salt is one of the most common causes for an increase in weight from one day to the next. Such an increase can be ignored, provided it is accounted for. It does not influence the regular loss of fat.

Water:

Patients are usually hard to convince that the amount of water they retain has nothing to do with the amount of water they drink. When the body is forced to retain water, it will do this at all costs. If the fluid intake is insufficient to provide all the water required, the body withholds water from the kidneys and the urine becomes scanty and highly concentrated, imposing a certain strain on the kidneys. If that is insufficient, excessive water will be withdrawn from the intestinal tract, with the result that the feces become hard and dry. On the other hand if a patient drinks more than his body requires, the surplus is promptly and easily eliminated. Trying to prevent the body from retaining water by drinking less is therefore not only futile but even harmful.

Constipation:

An excess of water keeps the feces soft, and that is very important in the obese, who commonly suffer from constipation and a spastic colon. While a patient is under treatment we never permit the use of any kind of laxative taken by mouth. We explain that owing to the restricted diet it is perfectly satisfactory and normal to have an evacuation of the bowel only once every three to four days and that, provided plenty of fluids are taken, this never leads to any disturbance. Only

in those patients who begin to fret after four days do we allow the use of a suppository. Patients who observe this rule find that after treatment they have a perfectly normal bowel action and this delights many of them almost as much as their loss of weight.

Investigating Dietary Errors:

When the reason for a slight gain in weight is not immediately evident, it is necessary to investigate further. A patient who is unaware of having committed an error or is unwilling to admit a mistake protests indignantly when told he has done something he ought not to have done. In that atmosphere no fruitful investigation can be conducted; so we calmly explain that we are not accusing him of anything but that we know for certain from our not inconsiderable experience that something has gone wrong and that we must now sit down quietly together and try and find out what it was. Once the patient realizes that it is in his own interest that he plays an active and not merely a passive role in this search, the reason for the setback is almost invariably discovered. Having been through hundreds of such sessions, we are nearly always able to distinguish the deliberate liar from the patient who is merely fooling himself or is really unaware of having erred. (THE PREVIOUS INSTRUCTIONS ARE TAKEN FROM THE ORIGINAL DR. SIMEONS MANUSCRIPT)

The HCG homeopathic drops bought here are prepared from the Chorionic Gonadotropin Human Hormone, obtain from human pregnancy urine. This ingredient is the base of homeopathic dilutions which are prepared according to HPUS, Hahnemannian Attenuation method using multiple flask preparation.

The hCG is not a blood-borne ingredient; the extraction process occurs in a pharmaceutical lab.

hCG Diet Dangers - Side Effects of the hCG Diet When followed correctly, the low dosages of hCG (125-200 IU) in Dr. Simeons hCG Diet Protocol has proven to be beneficial for weight loss and lowering the severe risks that come with being obese.

You may have seen the recent articles published claiming there are dangers associated with the use of hCG when used for weight loss. Some of these articles reference general studies done using hCG. Others simply refer to general warnings regarding hCG overdoses or misuse. It's time to clarify these claims.

When used correctly, there is no evidence that the minimal amounts of hCG used for weight loss are dangerous.

While hCG has not been approved by the FDA for weight loss treatments, it has been approved, and in much larger dosages, for many other medical treatments.

We have yet to find any study showing negative side effects of hCG when used in the treatment of weight loss under the precise protocols described by Dr. Simeons or Kevin Trudeau.

AS ALWAYS, IT IS ALWAYS BEST TO CHECK WITH YOUR PHYSICIAN BEFORE YOU EMBARK ON A WEIGHT LOSS JOURNEY.