

Retatrutide 10mg – FOR WEIGHT LOSS



Glacier Aminos. – Code: NIKKI10 (10% OFF)

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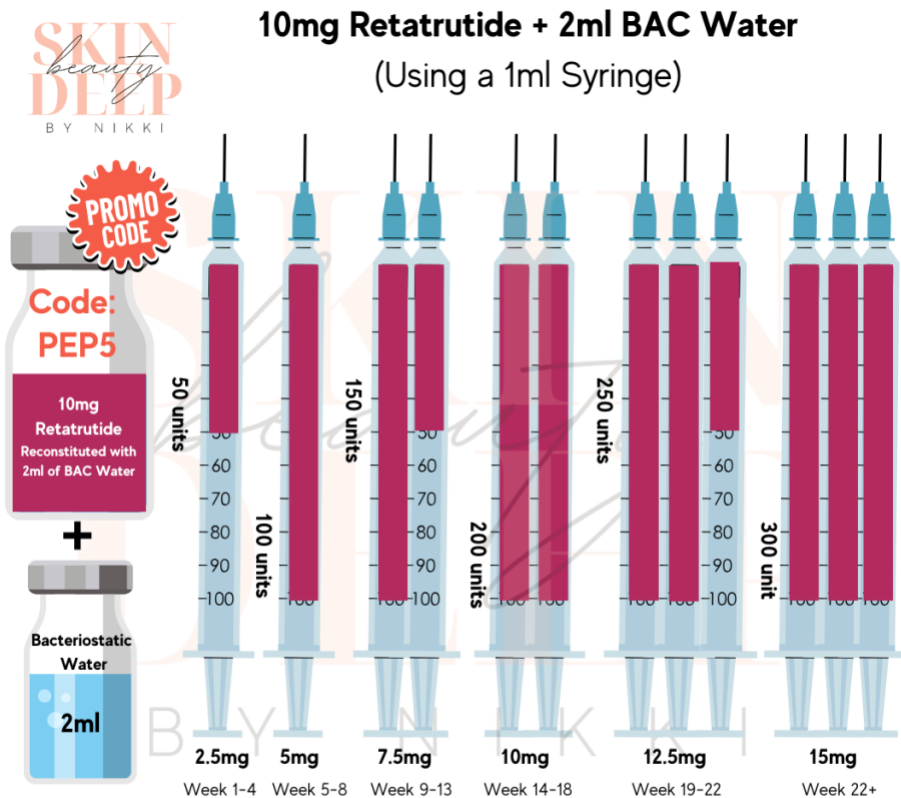
WEIGHT LOSS PEPTIDE: Retatrutide + BAC Water

Code: NIKKI10

There are a couple of Dosing strategies in the Peptide Community. Below are a couple of ways to dose. Dosage 1, is a good way to move from Tirzepatide to Retatrutide.

Dosage 1:

Peptide	Vial Strength	Benefits	Protocol
Retatrutide	10mg	Weight Loss	<p>Reconstituted with 2ml of BAC Water</p> <ul style="list-style-type: none"> · Month 1: 2.5mg once weekly (.5ml or 50th line) = <i>Purchase 1 – 10mg Vial per month</i> · Month 2: 5mg once weekly (100th line) = <i>Purchase 2 – 10mg Vials per month</i> · Month 3: 7.5mg once weekly (150th line) = <i>Purchase 3 – 10mg Vials per month</i> · Month 4: 10mg once weekly (200th line) = <i>Purchase 4 – 10mg Vials per month</i> · Month 5: 12.5mg once weekly (250th line) = <i>Purchase 5 – 10mg Vials per month</i> · Month 6: 15mg once weekly (max dose) (300th line) = <i>Purchase 6 – 10mg Vials per month</i> <p><i>Establish maintenance after 6 months onwards</i></p>



It is important that you do your own research. The information provided in this document was attained by countless hours of research but used for my health issues and goals. Please seek medical advice from a professional regarding any questions and concerns you may have.

These are recommendations.

Retatrutide can also start at 0.5 and titrated to 12mg depending upon patient's needs and tolerance.

Dosage 2:

Retatrutide

Dosage and Administration: (Dilute 10mg Vial with 2ml BAC Water)

- Week 1-2, 0.5mg (10 units on insulin syringe)
- Week 3-4, 1mg (20 units)
- Week 5-8, 2mg (40 units)
- Week 9-12, 4mg (80 units)
- Week 13-15, 8mg (160 units)
- Week 15+, 12mg (24 units)

The FDA-recommended dosing schedule for Retatrutide does not yet exist, but trials have focused, particularly for weight loss, on different dosage than prior GLP-1 agonist-type drugs that involve a gradual increase in dosage over several weeks. This schedule is designed to help the body adjust to the medication while minimizing side effects.

What is Titration? And Why Do We Use It?

In medical terms, titration refers to the process of adjusting the dosage of a medication based on an individual's response to treatment. This involves starting with a low dose and gradually increasing it until the desired therapeutic effect is achieved while minimizing side effects.

Dose titration is recommended with Retatrutide to improve tolerability. In other words, you give your body a little bit of time to get used to it. Starting with a lower dose also allows healthcare providers/you to assess your response to the medication and minimize the risk of adverse effects.

In the case of Retatrutide, you may titrate up monthly, typically increasing the dose every four weeks until you reach the optimum dosage for your body. This could be anywhere from 5 mg to 15 mg, depending on how your body reacts. However, as stated above, most patients reach their optimal level at 5mg or 7.5 mg.



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The mg must be converted into mcg for this Peptide Calculator. Since Week 1 Dosage is 2.5mg - mg to mcg Converter Calculator: <https://www.rapidtables.com/convert/weight/mg-to-mcg.html>

Milligrams to Micrograms conversion

Milligrams (mg) to micrograms (μg or mcg) weight (mass) conversion calculator and how to convert.

- [Milligrams to Micrograms conversion calculator](#)
- [How to convert Milligrams to Micrograms](#)
- [Milligrams to Micrograms conversion table](#)


Milligrams to Micrograms conversion calculator

Enter the weight (mass) in milligrams and press the *Convert* button:


Milligrams:	<input type="text" value="2.5"/>	mg
	<input type="button" value="Convert"/> <input type="button" value="Reset"/>	
Micrograms:	<input type="text" value="2500"/>	μg
Calculation:	$2.5 \text{ mg} \times 1000$ $= 2500 \mu\text{g}$	

Additionally, tools like a [peptide calculator](#) can assist in precise measurements, contributing to the overall handling and stability of peptides in various applications. Peptides Dosage Calculator: <https://www.peptides.org/peptide-dosage-calculator/>


Total syringe volume:



Peptide amount in vial(mg):




Amount of bacteriostatic water(ml):



Peptide dose amount(mcg):

To have a dose of 2500mcg, pull the syringe to 50...

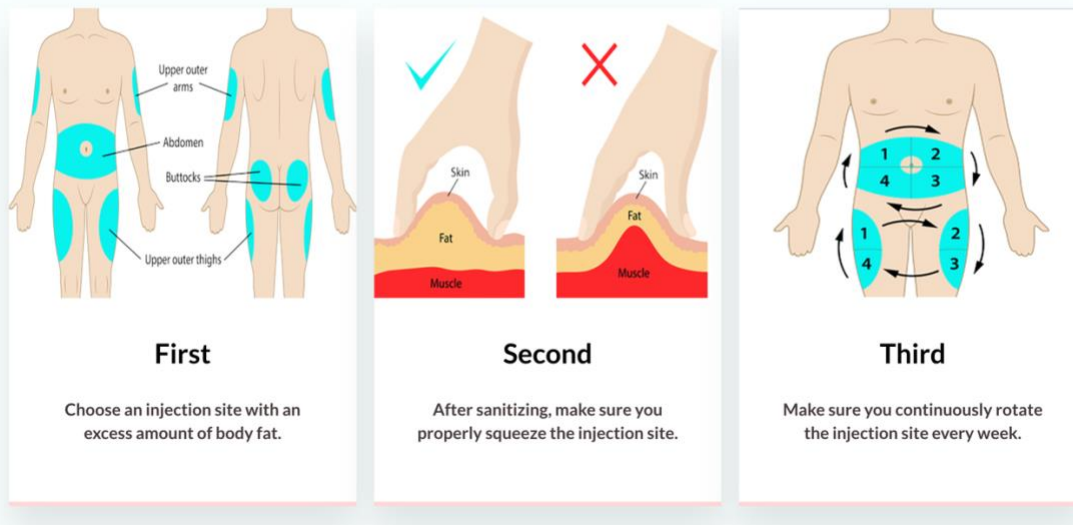


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Where to Administer:

Retatrutide is administered subcutaneously (SubQ) into the fatty tissue just beneath the skin, typically in the abdomen area. Researchers are advised to rotate the injection site with each administration.

What to keep in mind when administering your Peptide injection



Using Bacteriostatic Water as the diluent:

Step 1 – Remove the plastic cap from the 10mg peptide vial to expose the rubber stopper.

Step 2 – Remove the plastic cap from the sterile water vial to expose the rubber stopper.

Step 3 – To prevent bacterial contamination, swab the rubber stoppers with alcohol.

Step 4 – Extract 2ml (milliliters) of water from the sterile water vial.

Step 5 – Insert the 2ml (milliliters) of sterile water into the peptide vial, letting the water slowly enter the vial.

Step 6 – Gently swirl the solution until all peptides are dissolved – do not shake the vial.

To reconstitute a peptide, watch here [“peptide reconstitution”](https://www.youtube.com/watch?v=T00QEDDm8H8)

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Handle peptides with care! Lyophilized peptides can be volatile. Some peptides can be toxic for humans, animals, or the environment. The use of laboratory personal protective equipment, such as gloves, masks, and safety glasses is mandatory. It is very important to handle peptides in a clean and well-ventilated room.



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Retatrutide, also known as LY3437943, is an up-and-coming novel peptide compound with agonist activity at three receptors:

glucose-dependent insulintropic polypeptide (GIP),
 glucagon-like peptide-1 (GLP-1), and
 glucagon (GCG).^{1,2}

While semaglutide is a GLP-1 receptor agonist, and tirzepatide is a GLP1/GIP dual agonist, retatrutide is considered a triagonist due to its activity at GIP, GLP-1, and glucagon.¹⁻³ Triagonists like retatrutide, and glucagon-based strategies in general, hold great promise for future research.

	Wegovy	Mounjaro	retatrutide
Drug	semaglutide	tirzepatide	retatrutide
Owner	Novo Nordisk	Eli Lilly	Eli Lilly
Receptor(s)	GLP-1	GLP-1, GIP	GLP-1, GIP, Gcg
Weight loss (approx)	15%	21%	24%
HbA1c reduction (approx)	1.9%	2.2%	2.0%
Dose amount	0.25 - 2.4 mg	2.5 - 15 mg	0.5 - 12 mg
Dose method	injection 1x/wk	injection 1x/wk	injection 1x/wk

Retatrutide, an investigational molecule by Eli Lilly and Company, is emerging as a promising therapeutic agent in the field of obesity management. Revealed in phase 2 trials, retatrutide has demonstrated significant efficacy in weight reduction among participants with obesity or overweight, achieving a mean weight loss of up to 17.5% over 24 weeks and 24.2% over 48 weeks. These results were highlighted at the American Diabetes Association's 83rd Scientific Sessions and published in The New England Journal of Medicine.

Distinctive in its mechanism, retatrutide combines glucagon receptor agonism with GIP and GLP-1 receptor agonism. This novel approach may account for the notable weight reduction observed in trials, surpassing many current treatments. The TRIUMPH phase 3 development program is further exploring retatrutide's efficacy in chronic weight management and associated conditions like obstructive sleep apnea (OSA) and knee osteoarthritis (OA) in individuals with obesity and overweight.

In comparison to Semaglutide and Tirzepatide, Retatrutide's unique inclusion of glucagon receptor agonism alongside GIP and GLP-1 receptor agonism offers a distinct pharmacological profile. While Semaglutide is a GLP-1 receptor agonist and Tirzepatide combines GLP-1 and GIP receptor agonism, Retatrutide's triple mechanism could potentially provide broader metabolic benefits. The phase 2 study, involving various doses and dose-escalation regimens, underscores Retatrutide's safety profile, similar to other incretin-based therapies, with gastrointestinal side effects being the most common adverse events.

The ongoing research and trials will determine Retatrutide's place in treating obesity and its complications, potentially broadening the spectrum of effective pharmacotherapeutic options for this chronic disease.

Side Effects

The most common side effects of Retatrutide, based on clinical trials and patient reports, include:

Nausea: This is often experienced when first starting the medication or after a dose increase.

Vomiting: Some individuals may experience vomiting, particularly in the initial stages of treatment.

Diarrhea: Gastrointestinal disturbances, including diarrhea, are common.

Abdominal Pain: Patients may report stomach aches or general abdominal discomfort.

Constipation: Altered bowel habits, including constipation, can occur.

These side effects are typically most pronounced when first starting the medication or following a dose increase and may decrease over time as the body adjusts to the drug. It's important for patients to discuss any side effects with their healthcare provider, as they can provide guidance on how to manage them and determine whether Retatrutide is the right treatment option for them.

Short-term storage

Lyophilized peptides are stable at room temperature and can be kept in their initial packaging for several days to weeks. Otherwise, peptides can be stored at 39 °F or colder for up to 3 months, according to your preference and to experimental requirements. Peptides should be protected from intense light.

- **Store diluted peptides in a refrigerator at 2C to 8C (36F to 46F)**
- **Store in the original carton to protect from light.**

Long-term storage

- It is recommended to store peptides at < -4 °F or -112°F for a period longer than 4 months.
Retatrutide can be stored in a freezer in powder form for up to 2 years.

Storage of peptides in solution

When preparing stock solutions, it's recommended to use dry (anhydride) organic solvents to prevent premature hydrolysis. The stability of peptide aliquots can vary, lasting from weeks to months. A widely accepted guideline is that peptides in solution remain generally stable for 1-2 weeks at +39°F, 3-4 months at -4°F, and up to 1-2 year at -112°F. Understanding these considerations is vital for researchers.

More Information: <https://ro.co/weight-loss/what-is-retatrutide/>

Research Studies:

Rosenstock J, Frias J, Jastreboff AM, et al. Retatrutide, a GIP, GLP-1 and glucagon receptor agonist, for people with type 2 diabetes: a randomised, double-blind, placebo and active-controlled, parallel-group, phase 2 trial conducted in the USA. *Lancet*. 2023;402(10401):529-544. doi: [10.1016/S0140-6736\(23\)01053-X](https://doi.org/10.1016/S0140-6736(23)01053-X)

Urva S, O'Farrell L, Du Y, et al. The novel GIP, GLP-1 and glucagon receptor agonist retatrutide delays gastric emptying. *Diabetes Obes Metab*. 2023;25(9):2784-2788. doi: [10.1111/dom.15167](https://doi.org/10.1111/dom.15167)

Sinha B, Ghosal S, Mukhopadhyay S, et al. Glucagon-related advancements in diabetes therapy. *J Diabetol*. 2023;14:S16-S18. doi: [10.4103/jod.jod_96_23](https://doi.org/10.4103/jod.jod_96_23)



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