

# The hCG diet protocol: two case studies

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## Case I. 56-year-old male with high blood pressure and previous minor stroke

### Patient history

This male had been experiencing high blood pressure (200+/100+) prior to being prescribed Lisinopril (Prinivil®) 40 mg, 1½ tablets per day starting approximately January, 2001. Following a TIA (Transient Ischemic attack, i.e., “minor stroke”) on April 4, 2003, patient additionally was prescribed a blood thinner, Plavix (clopidogrel bisulfate) 75 mg (1 per day), Nifedipine (brand name: Procardia) 90 mg (1 per day), Hydrochlorothiazide (brand name: Microzide) 50 mg (1 per day), Lisinotril 40 mg (Brand name: Zestril/Prinivil) 1.5 per day, and Atenolol 25mg (Tenormin®) 2X per day to lower blood pressure.

In April, 2007 patient was diagnosed with diabetes which was controlled by administering daily the following medications: (1) insulin injections (Novolin® 10 units), anti-diabetic drugs Metformin 850 mg (3X per day) and Glyburide (brand names: Diabeta, Glycron, Glynase, Micronase) 5 mg (4X per day). Also to control blood sugar, patient took Actos® 15 mg (pioglitazone hydrochloride) 3X per day.

In May, 2007, patient tried dieting under the supervision of physician-referred nutritionists. Using their protocol, he lost up to 10 pounds, but this weight returned within approximately

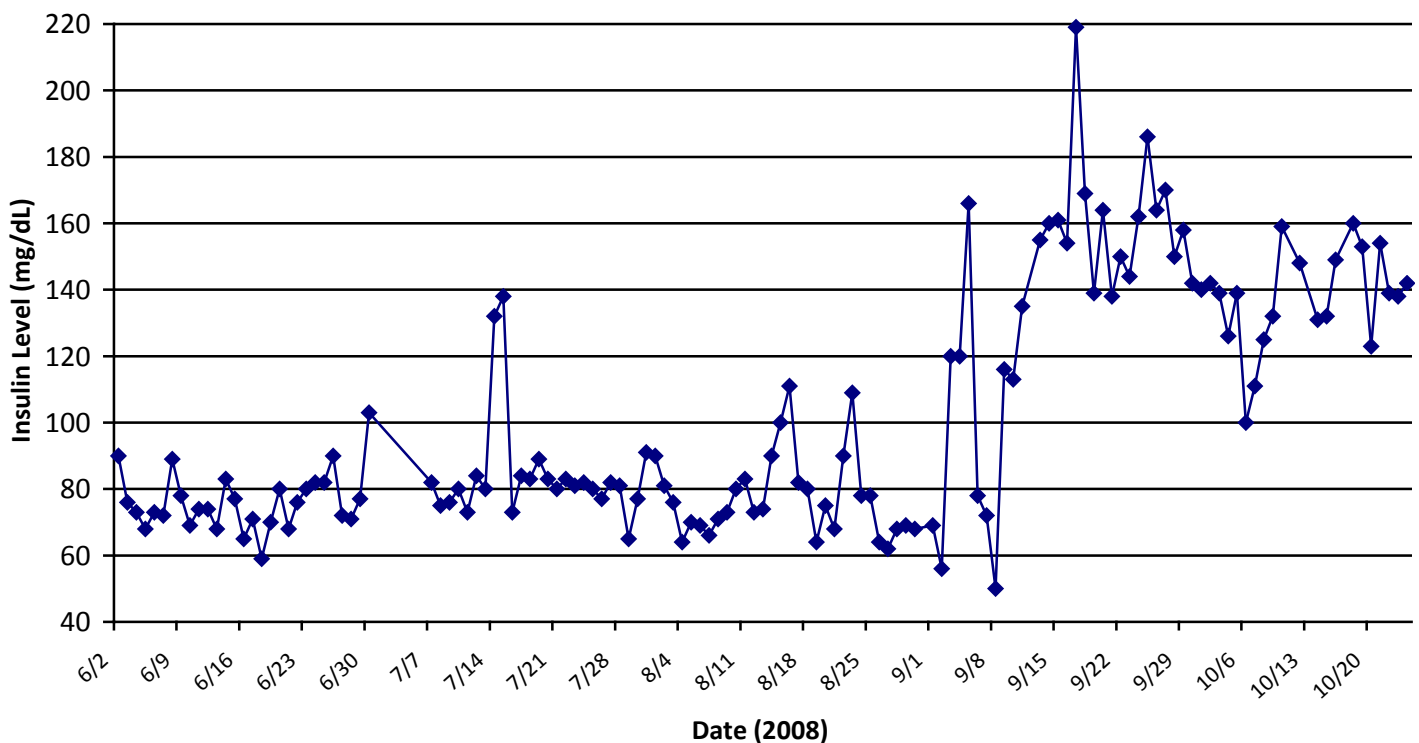
two months. Patient had been at a weight of 215 to 225 pounds for the past 3 to 5 years.

### Patient outcomes on hCG diet

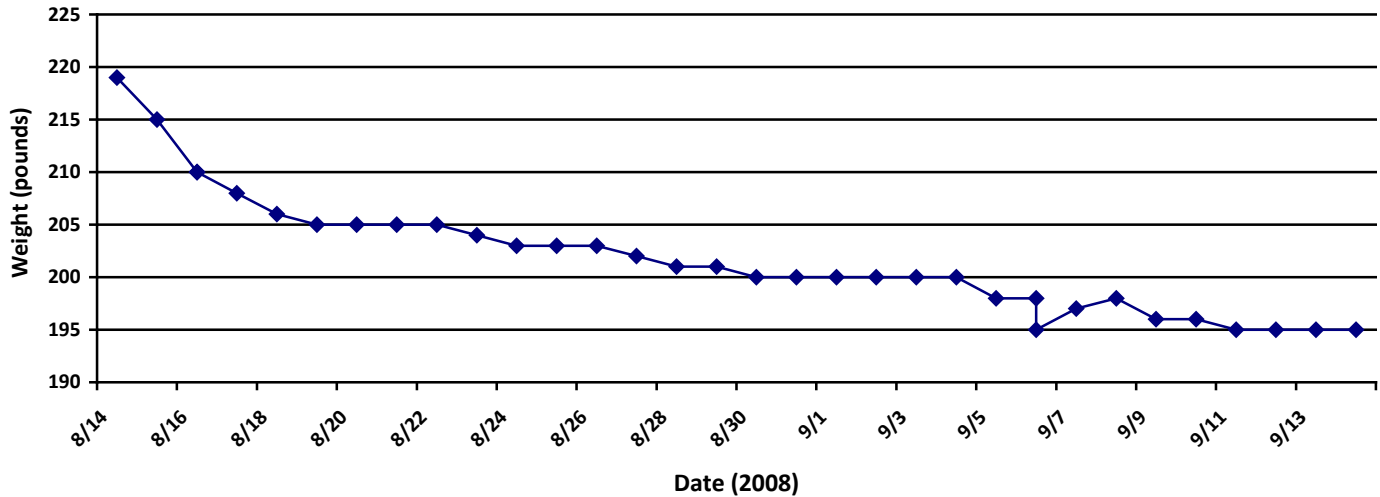
Patient initiated once daily a subcutaneous hCG injection (with 5/16”-long syringe) in stomach area on August 8, 2008 and continued through September 13, 2008. Following a physician visit and blood test on September 8, the physician exclaimed, “I cannot believe it, but your pancreas seems to be functioning again.” The patient was taken off all diabetic medicines (which included Novolin® injections, Metformin, and Glyburide) except for Actos® 15 mg which was reduced to 1X per day. Patient has continued to remain on all medications to control blood pressure. Insulin levels prior to, during, and immediately following the hCG diet are shown in Table 1. Patient experienced a 24-pound weight loss (from 219 to 195) shown in Table 2.

Patient has subsequently started a second round of the hCG protocol on November 4, 2009 and after 40 injections on this round is currently at 181 pounds, for a total weight loss of 38 pounds during the past 4 months. Patient reports a blood pressure of 129/69, pulse 47 beats per minute. Physician took patient off of Atenolol and Hydrochlorothiazide; Nifedipine was reduced from 90 mg to 60 mg (1 per day), and Lisinotril reduced from 40 mg to 20 mg (1 per day).

**Table 1. Daily Insulin Levels for 56-year-old Male**



**Table 2. Daily Weight during hCG injections 08/11 through 09/13**



**Case II. 49-year-old Female with Hashimoto’s Thyroiditis (Thyroid Dysfunction)**

**Patient history**

Patient presented to a physician with a goiter and was diagnosed with Hashimoto’s Thyroiditis at 18-years old. Patient started on Synthroid to control the goiter and weighed approximately 120 pounds. After having two children, patient’s weight was 160 pounds at age 33-years. Patient was experiencing heart arrhythmias and was taken off Synthroid for a period of one week. Patient was started back on Synthroid at ½ the prior dose and gained 40 pounds in 4 weeks (weight now at 200 pounds). During third pregnancy, patient gained 23 additional pounds which was never lost following the birth. Gradual weight gain over the next 15 years resulted in a current weight of 258-pounds at age 49 years.

Patient had tried several times over the past 16 years, weight loss programs such as Jenny Craig, NutriSystem, Weight Watchers, etc. Patient tried walking 5 miles per day, seven days a week for 1½ years and succeeded losing 43 pounds at which time she went on the Atkins Diet. Patient experienced a severe case of gout-like conditions involving both feet after 3 weeks of that diet, developed plantar faciitis (a painful inflammation of

the foot and in particular, the arch). Patient gained back 43-pounds due to inability to exercise during the two-year duration of this condition.

Patient had a total knee replacement (left knee) on March 26, 2008. Patient’s blood pressure 8 weeks later rose to 180+/108; cholesterol level was 200+ prior to initiating hCG protocol.

**Patient outcomes on hCG diet**

Patient started Round I of hCG protocol on July 21, 2008 and after 40 days lost 37 pounds (from 252 to 215). After approximately 3 weeks (the recommended wait between rounds I and II is 6 weeks; between rounds II and III, 8 weeks; and between rounds III and IV, 12 weeks) patient began Round II on Sept. 20 and after 29 days lost an additional 13 pounds for a total weight loss of 50 pounds during the past 4 months. Without blood pressure medication, the Patient’s blood pressure is currently 108/68 following the hCG. At the conclusion of Round II, Synthroid medication was reduced from 0.25 mg (1X per day) to 0.125 mg (1X per day) and cholesterol was 159.

**Table 3. 49-year-old female daily weight during Round I (40 days) and Round II (29 days) of hCG Protocol**

