



## **ANDLOS INSTITUTE OF PREVENTATIVE CARE**

### **WEIGHT LOSS WITH HCG**

#### **Use of HCG for Weight Loss:**

##### Background Information:

#### ***THE USE of HUMAN CHORIONIC GONADOTROPIN (HCG)***

HCG has been used since the early fifties to help people lose weight. HCG when used by itself, does not cause weight loss. It is the low calorie diet, in conjunction with the HCG that provides an accelerated fat loss. HCG is a naturally occurring substance in the human body produced by the placenta during pregnancy in very high amounts. The reason for this high production of HCG was poorly understood until Dr. A.T.W. Simeon, a British physician, studied its effects and developed a program of weight reduction. Those who have taken HCG while dieting report that it is much easier for them to stay on the diet and they seem to lose inches rapidly from the primary fat stores, in particular, the belly, buttocks, and thighs. There have been no reported adverse side effects to this substance. There is no clearly defined scientific or clinical explanation as to why or how it works.

#### **HCG Q & A:**

##### **What is HCG?**

Human Chorionic Gonadotropin (HCG) hormone is a substance that occurs naturally in pregnant women. The HCG has the effect of releasing abnormal stored fat primarily from the abdomen, buttocks, and thighs, while preserving structural fat as in the face and skin.

##### **Can it be harmful?**

No. During pregnancy it is produced daily in a quantity hundreds of thousands of times the amount used for the treatment of obesity, yet it harms neither the mother, nor the child.

### **How does HCG work?**

When Human Chorionic Gonadotropin (HCG) is used alone, injections of the HCG are provided three times per week in combination with an exact diet.

### **Can both men and women take HCG?**

Yes. It has been used with equally good results in both.

### **How does the HCG diet work?**

During pregnancy, Human Chorionic Gonadotropin (HCG) is believed to help insure that the fetus will have access to its mother's stored fat supply, regardless of the amount of food she ingests. After birth, the HCG ensures the newborn will receive nutrition for the first 72 hours if not getting proper nutrition. In overweight people, HCG seems to work by the same method - namely making available permanently stored supplies of fat, as well as making it possible to adhere to the low calorie diet.

### **Will it affect my appearance?**

Because Human Chorionic Gonadotropin (HCG) does protect the structural fat, wrinkles, if any, will be dramatically reduced. The treatment does not deplete the subcutaneous or other essential fat; therefore the face retains its freshness and natural appearance. Double chins, protruding stomachs and fat around the thighs should be the first to go. Stretching of the skin generally causes stretch marks. This can occur with weight gain, not weight loss.

### **Has this method been used before?**

Yes. When first reported in the Medical Journal Lancet in November of 1954, it had been used in thousands of cases. Since then it has been used in many more.

### **What will I feel after the injections?**

Usually a loss of appetite occurs and patients notice that the severe compulsive hunger disappears completely.

### **How long can I take the HCG?**

After 40 injections, the effectiveness diminishes due to the body's ability to develop temporary immunity to the HCG. However, if necessary, subsequent courses of injections can be resumed after a Metabolic Recovery (Phase II). In some instances, 4

or more courses have been given with continued effectiveness if the Metabolic Recovery (Phase II) interval has been allowed between them.

### **Will I gain back the weight when I stop the HCG?**

Some degree of moderation in eating will be necessary because of the tendency to gain weight after ANY type of weight loss program. However, a stabilizing program that includes counseling on lifestyle is part of the Advanced Weight Loss program. Stability of the normal weight is relatively easy because the weight loss has been from storage fat and not from structural fat.

### **What happens if an injection is missed?**

This merely delays the total effectiveness of the program.

### **Besides fat loss, are there any other actions or side effects?**

Yes, there seems to be some stimulation to the generative system. Premenstrual difficulties may be relieved. Abnormal loss of head hair in obese individuals may cease. Brittle fingernails may become normal and professional singers may note an improvement in their voices. Blood pressure tends to normalize, cholesterol readings become normal, and arthritis symptoms are lessened. No adverse reactions to the injections have been experienced.

### **Is HCG approved by the FDA?**

HCG is approved by the FDA for various medical conditions. However, it has not been specifically determined by the FDA to be effective for weight loss. That being said, several studies have been done with conclusions of its positive effects for weight loss. One study in 1954 that was published in The Lancet, was done by world renowned A. T. W. Simeons, M.D. This data is part of the basis of the Advanced Weight Loss program. Another study presented by Dr. Daniel Belluscio, also concluded HCG was effective for weight loss under specific conditions.

\*The Food and Drug Administration Has Labeled HCG as Not Being Effective in the Treatment of Obesity.

## **There are Three Kinds of Fat**

In the human body we can distinguish three kinds of fat. The first is the structural fat which fills the gaps between various organs, a sort of packing material. Structural fat also performs such important functions as bedding the kidneys in soft elastic tissue, protecting the coronary arteries and keeping the skin smooth and taut, it also provides the springy cushion of hard fat under the bones of the feet, without which we would be unable to walk.

The second type of fat is a normal reserve of fuel upon which the body can freely draw when the nutritional income from the intestinal tract is insufficient to meet the demand. Such normal reserves are localized all over the body. Fat is a substance which packs

the highest caloric value into the smallest spaces that normal reserves of fuel for muscular activity and the maintenance of body temperature can be most economically stored in this form. Both these types of fat, structural and reserve, are normal, and even if the body stocks them to capacity, this can be never being called obesity.

But there is a third type of fat which is entirely abnormal. It is the accumulation of such fat, and of such fat only, from which the overweight patient suffers. This abnormal fat is also a potential reserve of fuel, but unlike the normal reserves, it is not available to the body in a nutritional emergency. It is, so to speak, locked away in a fixed deposit and is not kept in a current account, as are the normal reserves.

When an obese patient tries to reduce by starving himself/herself, he/she will first lose the normal fat reserves. When these are exhausted, they begin to burn up structural fat, and only as a last resort with the body yield its abnormal reserves, though by that time the patient usually feels so weak and hungry that the diet is abandoned. It is just for this reason that obese patients complain that when they diet, they lose the wrong fat. They feel famished and tired and their face becomes drawn and haggard, but their belly, hips, thighs and upper arms show little improvement. The fat they have come to detest stays on and the fat they need to cover their bones gets less and less. Their skin wrinkles and they look old and miserable. And that is one of the most frustrating and depressing experiences a human being can have.

### **Signs and Symptoms of Obesity**

The bodily signs may be divided into such as have developed before puberty, indicating a strong inherited factor, and those which develop at the onset of manifest disorder. Early signs are a disproportionately large size of the two upper front teeth, the first incisor, or a dimple on both sides of the sacral bone just above the buttocks. When the arms are outstretched with the palm upward, the forearms appear sharply angled outward from the upper arms. The same applies to the lower extremities. The patient cannot bring his feet together without the knees overlapping; he/she is, in fact, knock-kneed.

The beginning accumulation of abnormal fat shows as a little pad just below the nape of the neck, known as the Duchess' Hump. There is a triangular fatty bulge in front of the armpit when the arm is held against the body. When the skin is stretched by fat rapidly accumulating under it, it may split in the lower layers. When these splits are large and fresh, the tears may appear as "purple" in color, but later they are transformed into white scar tissue. Such striation, as it is called, commonly occurs on the abdomen of women during pregnancy, but in obesity it is frequently found on the breasts, the hips and occasionally on the shoulders. In many cases, striation is so fine, that the small white lines are only just visible. They are always a sure sign of obesity, and though this may be slight at the time of examination such patients can usually remember a period in their childhood when they were excessively chubby.

Another typical sign is a pad of fat on the insides of the knees, a spot where normal fat reserves are never stored. There may be a fold of skin over the pubic area and another fold may stretch around both sides of the chest, where a loose roll of fat can be picked

up between two fingers. In the male, an excessive accumulation of fat in the breasts is always indicative, while in the female the breasts are usually, but not necessarily, large. Obviously excessive fat on the abdomen, hips, thighs, upper arms, chin and shoulders are characteristic, and it is important to remember that any number of these signs may be present in persons whose weight is statistically normal; particularly if they are dieting on their own with iron determination.

Common clinical symptoms which are indicative only in their association and in the frame of the whole clinical picture are: frequent headaches, rheumatic pains without detectable bony abnormality; a feeling of laziness and lethargy, often both physical and mental and frequently associated with insomnia, the patients saying that all they want is rest; the frightening feeling of being famished and sometimes weak with hunger two to three hours after a hearty meal and an irresistible yearning for sweets and starchy food which often overcomes the patient quite suddenly and is sometimes substituted by a desire for alcohol; constipation and a spastic or irritable colon are unusually common among the obese, and so are menstrual disorders.

### **RECOMMENDATIONS THAT HELP YOU REACH YOUR GOALS**

- Drink filtered or bottled spring water. Tap water is mostly loaded with chlorine and fluoride.
- Walk at least 30 minutes to one hour per day.
- Eat apples. Eating at least 2 apples every day will help to regulate blood sugar and reduce your appetite.
- Eat grapefruit. Eating at least 2 grapefruits daily are proven to help release fat.\*<sup>(20)</sup>
- Apple Cider Vinegar\*<sup>(3)</sup> and Balsamic Vinegar can be used on your salad and marinated on your daily proteins (beef, breast of chicken and white fish). This stimulates metabolism and cleansing of the internal organs. It is also powerful in helping to release stored fat cells.
- Expeller Pressed Virgin Raw Unfiltered Coconut Oil\*<sup>(6)</sup> can be used for cooking. This stimulates metabolism, improves digestion, and helps to release fat. Use sparingly.
- Use Natural Sweeteners. Stevia is highly recommended. No artificial sweeteners.
- Eating breakfast helps to increase your metabolism,\* decrease appetite and increase your morning blood sugar for energy throughout the day.
- Eat 5- 6 small meals per day. This will help to speed up your metabolism.
- Eat salad or vegetables with lunch and dinner. Eating a salad made with fresh vegetables helps to stimulate digestion and adds fiber which helps to regulate blood sugar.
- Organic food is preferred but not required and can be costly and not readily accessible in various areas. Organically grown vegetables, fruits and protein do

not contain pesticides, herbicides, antibiotics and flavor enhancers. Our physicians recommend to carefully wash all non-organic food products as thoroughly as possible.

- Adding fiber will help relieve constipation, reduce appetite, improve digestion and cleanse the body of toxins.\*<sup>(19)</sup> We recommend Fiber Bio Fuel which provide a daily abundant source of soluble and insoluble fiber.
- Drink tea. We recommend Oolong, Chamomile and Green tea. These teas do not need to be organic.
- Eliminate all carbonated beverages. They block calcium absorption, cause nutritional deficiencies and slow down digestion.\*<sup>(18)</sup>
- Eliminate ALL alcoholic beverages.- I feel that this is more of a guideline than a rule. Small glass wine/beer/ one mixed drink would be ok.
- Avoid high fructose corn syrup.\*<sup>(17)</sup> This is a man made highly processed sugar that can lead to obesity.
- No MSG (Monosodium Glutamate). This is a flavor enhancer which can make you overweight.\*<sup>(21)</sup>
- No Fast Food.
- Use a Colon Cleanse, We suggest a deep acting organic colon cleanse and body detoxification loaded with cleansing herbs that naturally support the detoxification process of the body. I find using Tone-De Tox daily will help control regularity and promote cleansing.

## **STARTING AN INDIVIDUALIZED PLAN**

### **STAGE 2**

#### **DAY 1 AND 2**

If the Doctor prescribes HCG, take an injection of 0.2ml( 200 units) first thing in the morning. Eat as often as you like throughout the day. This will increase your body's storage of fat to prepare you for the 800 calorie\*<sup>(5)</sup> per day limit on days 3-42. It is not necessary to gorge yourself with fatty foods. Eat healthy by eating good fats that are found in meat, poultry, fish, vegetables and fruits.

You may eat starch in moderation however whole wheat and multi grain bread, pasta and oatmeal is preferred.

**Absolutely no starches on days 3-42!**

Drink ½ to 1 gallon of filtered or bottled spring water throughout the day.

**DAY 1-16: .2 cc of HCG or 200 units.**

**Day 17-32: .3 cc of HCG or 300 units.**

**Days 33-42: .2 cc of HCG or 200 units.**

Weigh yourself in the morning when you wake up without clothing and after you have emptied your bladder. Administer the HCG injection with dosing as above. Drink ½ to 1 gallon of filtered or bottled spring water throughout the day.

You must eat everything as described in Stage 2 (see diet guide). Do not skip meals. Your total caloric intake should not exceed 800 calories per day which consists of protein, vegetables and fruit.

We recommend eating at least 5-6 times a day. Breakfast should consist of one fruit serving which will increase blood sugar and increase energy.

**DRINK:**

- Bottled or filtered spring water (no tap water)
- Black coffee (no creamer)
- Green tea
- Oolong tea
- Chamomile tea

**BREAKFAST**

Drink plenty of tea and filtered or bottled spring water. Choose one fruit from the following; green apple, grapefruit or approximately 6-7 medium size strawberries **or** egg whites **or** 1 whole egg once per week.

**LUNCH and DINNER**

(A small food scale is highly recommended)

Eat 3.5 oz of protein (about the size of the palm of your hand)

Grill your protein if possible and season with lemon, oregano, pepper, thyme, parsley, apple cider or balsamic vinegar. If grilling is not an option: use a Cooking Spray or Coconut Oil (very sparingly).

Do not use butter or margarine.

***Please be advised that you should not eat the same protein, vegetable, or fruit twice in the same day.***

**PROTEIN SELECTION:**

Choose ONE of the following proteins for lunch and dinner: Do not eat the same protein twice on the same day.

**MEAT:** Beef, Buffalo, or Veal. Filet Mignon is highly recommended as it is low in fat.

**POULTRY:** Breast of Chicken (skinless).

**WHITE FISH:** Tilapia, Cod, Halibut, Chilean Sea Bass, Sole, Flounder or Grouper or White Fish is acceptable. De-veined and de-shelled Shrimp is acceptable (remove tails before weighing on scale).

**VEGETABLE SELECTION:**

One cup of a green vegetable – These can be eaten raw, steamed, grilled (without oil). You may only

use coconut oil (organic raw unfiltered) or a cooking spray. Choose ONE vegetable for lunch and

dinner. Do not eat the same vegetable twice on the same day.

Spinach 41 calories Cabbage 32 calories

Broccoli 43 calories Asparagus 43 calories  
Brussels sprouts 60 calories Green beans 44 calories

**The above are examples of vegetables to choose from. You may have ANY green vegetable of your choice.**

You may eat a salad in between or with your meal. Use lettuce, tomatoes and celery. These vegetables are empty calories that consist of mostly water. Use Apple Cider or Balsamic Vinegar as your salad dressing that contains NO FAT. Lemon juice is an alternative choice.

### **FRUIT**

You may have 2 fruit servings daily. You may only choose from the list below. There are no substitutions.

1 Grapefruit (medium) **66 calories**

1 Green Apple (medium) **125 calories**

1 handful of Strawberries (medium) **57 calories** (approximately 6-7)

## **STAGE 2**

### **SAMPLE MENU 800 calories**

**Calories Protein Carbs. Fat Sodium**

**Breakfast** (1 protein and 1 fruit choice)

Tone de tox 2 capsules/ Saba weight loss formula- 1 oz

(Please contact office for acquiring Tone-de-Tox. In future will try and send with ordering of HCG protocol)

6 Medium Strawberries 57.5 1.2 13.5 0.7 1.5

1 scoop Whey Protein 90.0 16.0 4.0 1.5 40.0

**Totals** 200.5 20.2 20.5 5.2 41.5

**Morning snack** (1 protein and 1 fruit choice)

2 Large Egg White 33.0 7.0 0.7 0 110.0

½ Large Apple with Peel 62.4 2.0 16.2 0.4 2.0

**Totals** 95.4 9.0 16.9 .4 112.0

**Lunch** (1 protein and 1 vegetable choice)

3.5 oz. Chicken (No Skin) 195.5 29.6 0 7.7 50.1

6 oz. Asparagus 40.0 6.0 7.0 1.0 3.0

**Totals** 235.5 35.6 7.0 7.8 50.4

**Afternoon snack** (Salad)

3 oz. Lettuce

2 oz. Tomato

2 oz. Cucumber

2 oz. Celery

2 tbs Vinegar – Balsamic

**Dinner** (1 protein and 1 vegetable choice )

3.5 oz. Fish/Flounder

6 oz. Broccoli

## **STAGE 3**

### **STAGE 3 MAINTENANCE:**

Duration is for 3 weeks and begins on day 45.

In Stage 3 you eat normally with the exception of no sugar and no starch. Continue to drink plenty of water daily. Increase your calories daily by following the Calorie Calculation Guide/formula provided in this book. You may have eggs, any fruit or vegetable with the exception of corn and yams; any type of meat, fish, shellfish or poultry desired. You may use extra virgin olive oil in moderation. A cooking spray is preferred. Seasonings may be used that are low in sodium. Low moisture skim cheese in moderation is acceptable. Yogurt and milk are prohibited. During this period, the complex carbohydrates such as sugar, rice, bread, potatoes, pasta, pastries, etc., are by far the most risky. Other carbohydrates that are prohibited are nuts, legumes, cereal and oatmeal. If no carbohydrates whatsoever are eaten, fats can be indulged more liberally. As soon as fats and starch are combined, it may increase the potential for weight gain. This must be observed very carefully during the first 3 weeks after the treatment has ended, otherwise, disappointments are almost sure to occur. Eat five to six times per day. It is very important to eat breakfast, lunch, and dinner, and have three snacks throughout the day. This will promote an increase in metabolism.

When additional courses of HCG injections are needed, the three week maintenance period of Stage 3 is ALWAYS followed by the beginning three weeks of Stage 4 when sugar and starch are slowly added. Also, increasing your calories will help to raise your body's metabolic needs. Because there is a possibility of developing immunity to HCG, it takes about a six week pause before the HCG again becomes fully effective with your first refill. Please see the refill chart below.

1<sup>ST</sup> ROUND NO LESS THAN 6 WEEKS OFF  
 2<sup>ND</sup> ROUND 8 WEEKS OFF  
 3<sup>RD</sup> ROUND 12 WEEKS OFF  
 4<sup>TH</sup> ROUND 20 WEEKS OFF  
 5<sup>TH</sup> ROUND 6 MONTHS

### **WEIGHT MAINTENANCE STAGE 3**

#### **SAMPLE GOAL MENU FOR FEMALE 130 LBS.**

**130 X 12 = 1,560 calories (allowed per day)**

**Calories Protein Carbs. Fat Sodium**

**Breakfast** (1 protein and 1 fruit choice)

Tone de tox 2 capsules/ Saba weight loss formula- 1 oz

3 egg whites 51.0 10.5 0.6 0.3 164.25

4 tsp. olive oil 159.0 - - 18 -

1 banana 72.0 0.9 18.5 - 0.8

**TOTALS: 335.0 14.4 22.1 21.3 165.05**

**Morning Snack** (1 protein)

6 oz. cottage Cheese 134.0 21.0 4.6 2.0 686.0

**TOTALS: 134.0 21.0 4.6 2.0 686.0**

**Lunch** (1 protein, 1 vegetable and 1 fruit choice)

5 oz. chicken breast 148.0 33.75 - 2.5 71.25

4 tsp. olive oil 159.0 - - 18.0 -

6 oz. broccoli 50.0 5.0 9.0 - 29.0

1 small orange 45.0 0.9 11.3 0.1 -

**TOTALS: 402.0 39.65 20.3 20.6 100.25**

**Afternoon Snack** (fruit choice)

1 small grapefruit 32.0 0.6 8.1 0.1 -

**TOTALS: 32.0 0.6 8.1 0.1 -**

**Dinner** (1 protein, 1 vegetable, and salad)

5 oz. swordfish 167.0 27.5 - 6.25 -

4 tsp. olive oil 159.0 - - 18.0 -

6 oz. asparagus 48.0 6.0 7.0 1.0 3.0

**TOTALS: 374.0 33.5 7.0 25.25 3.0**

**Salad**

3 oz. lettuce 11.0 0.5 2.4 - 7.5

2 oz. tomato 12.0 0.6 2.5 - 1.6

2 oz. cucumber 8.0 0.3 2 - 3.3

2 oz. celery 9.0 - 2.6 - 26

1 oz. apple cider vinegar - - 2.3 - -

**TOTALS: Evening Snack**

Tone de tox-2 tabs -

2 oz. mozzarella cheese (skim)

### **WEIGHT MAINTENANCE STAGE 3**

(Refer to high protein diet guide and calorie chart)

**SAMPLE GOAL MENU FOR MALE 180 LBS.**

**180 X 13 = 2,340 calories (allowed per day)**

**Calories Protein Carbs. Fat Sodium**

**Breakfast** (1 protein and 1 fruit choice)

**Tone de tox 2 tabs™** (optional) -

2 slices bacon

4 tsp. olive oil 159.0 - - 18.0 -

1 cup grapes 110.0 1.2 29.0 0.3 3.2

**TOTALS: 670.0 27.0 33.2 29.3 635.2**

**Morning Snack** (1 protein choice)

6 oz. white tuna 210.0 45.0 - 1.0 190.0

**TOTALS: 210.0 45.0 - 1.0 190.0**

**Lunch** (1 protein, 1 vegetable, and 1 fruit choice)

10 oz. lean beef 342.5 53.5 - 12.5 165.0

4 tsp. olive oil 159.0 - - 18.0 -

6 oz. mushrooms 48.0 2.0 8.0 - 25.0

1 small pear 81.0 0.5 21.5 0.2 1.5

**TOTALS: 630.5 56.0 29.5 36.7 191.5**

**Afternoon Snack** (fruit choice)

1 cup blueberries 83.0 1.1 21.0 0.5 1.5

**TOTALS: 83.0 1.1 21.0 0.5 1.5**

**Dinner** (1 protein, 1 vegetable, and salad)

8 oz. chicken no skin 266.0 54.0 - 4.0 114.0

6 oz. carrots 71.0 2.0 16.0 - 80.0

1 tsp. olive oil 40.0 - 4.6 4.5 -  
**TOTALS: 377.0 56.0 20.6 8.5 194.0**

### **Salad**

3 oz. lettuce 11.0 0.5 2.4 - 7.5  
2 oz. tomato 12.0 0.6 2.5 - 1.6  
2 oz. cucumber 8.0 0.3 2.0 - 3.3  
2 oz. celery 9.0 - 2.6 - 26.0  
1 tsp. olive oil 40. - 4.6 4.5 -  
1 tsp. balsamic vinegar 7.0 - 3 - -

### **Evening Snack**

Tone de tox 2capsules/ Saba weight loss formula- 1 oz  
2 oz. Mozzarella skim cheese

## **STAGE 3 CALORIE COUNTING**

### **Tone de tox 2 tabs.**

**Lean Meat** Calories per 1 oz.

Top Sirloin Steak 62 cal  
Extra Lean Hamburger 48 cal  
London Broil 52 cal  
Chuck Steak 54 cal  
Veal 61 cal  
Lean Bison 49 cal  
Lamb 52 cal

### **Shell Fish**

Clams 41 cal  
Lobster 28 cal  
Mussels 48 cal  
Oysters 19 cal  
Scallops 23 cal  
Shrimp 22 cal  
Crab 31 cal

### **Fish**

Bass 41 cal  
Bluefish 45 cal  
Cod 29 cal  
Grouper 33 cal  
Halibut 31 cal  
Herring 39 cal  
Mackerel 74 cal  
Orange Roughy 29 cal  
Red Snapper 36 cal  
Salmon 51 cal  
Shark 50 cal  
Tilapia 42 cal  
Trout 53 cal  
Tuna 52 cal  
Mahi-Mah 37 cal

### **Dairy & Eggs**

Cottage Cheese (4 oz.)  
(low fat or fat free only) 80 cal  
Skim Milk (6 oz.) 90 cal  
Eggs (1 egg only)  
Whites Only 70 cal

### **Fruits**

Apple (1 small) 55 cal  
Apricot (4 small) 64 cal  
Banana(1 small) 89 cal  
Blackberries(1/4 cup) 15 cal  
Blueberries(1/4 cup) 21 cal  
Cranberries(1/4 cup) 21 cal  
Figs(4 small) 74 cal  
Grapes(12 reg.) 40 cal  
Guava(1/4 cup) 37 cal  
Honeydew Melon(1/2 cup) 45 cal  
Kiwi(2 small) 92 cal  
Mango(1/2 small) 67 cal  
Peach(1small) 50 cal  
Watermelon(1 cup) 70 cal

### **Beverages**

Water – flavored  
(Crystal Light 2 per day) 10 cal  
Tea - unsweetened  
2 (8 oz.) glasses per day 0 cal  
Orange Juice  
1(8 oz.) glass 120 cal

### **Lean Poultry** calories per 1 oz

Chicken Breast (white meat) 47 cal  
Turkey Breast (white meat) 48 cal .

### **Vegetables** calories per 6 oz.

Brussel Sprouts 48 cal  
Cabbage 138 cal  
Artichoke 126 cal  
Asparagus 59 cal  
Broccoli 60 cal  
Cauliflower 37 cal  
Celery 42 cal  
Collards 49 cal  
Cucumber 30 cal  
Eggplant 90 cal  
Endive 36 cal  
Green Onions 36 cal  
Kale 48 cal  
Lettuce (green) 30 cal  
Mushrooms 42 cal

Peppers (all varieties) 50 cal

Spinach 41 cal

Tomato 30 cal

Turnips 40 cal

Watercress 22 cal

### **Cooking Oils**

Coconut Oil

(1 serving – 2 tsp) 78 cal

Olive Oil Extra Virgin

(1 serving – 1 Tbsp) 120 cal

Sunflower Oil

(1 serving – 1 Tbsp) 120 cal

Safflower Oil

(1 serving – 1 Tbsp) 120 cal

When you have reached your desired goal weight, and after successfully completing the maintenance interval, you continue on Stage 4, which will be followed for the rest of your life.

Sugars and starches are slowly added into your diet in Stage 4. Those starches consist of

healthy whole grain or wheat pasta and bread, brown rice and sweet potatoes.

Avoid white flour

starches as much as possible. Try to limit yourself to one starch serving daily.

Exercising

regularly, taking the Fiber BioFuel™ daily and eating well will promote a healthier lifestyle for a

lifetime!

### **STEP 1**

Calculate your daily calorie intake with the following equation: Active males can determine the number of calories needed to maintain body weight by multiplying their weight in pounds by 15,

while active females should multiply their weight by 12. Inactive males should calculate daily

caloric intake by multiplying their body weight by 13, and inactive females should multiply their weight by 10.

Example: Male  $175 \times 13 = 2275$  daily calories Female  $140 \times 12 = 1680$  daily calories

### **STEP 2**

Determine how many of your calories should be derived from fat by using the number of calories

determined through the first equation and multiply the number by 30, or 30 percent for the

number of fat calories you need daily.

Example: Male  $2275 \times .30 = 682.50$  fat calories/day Female  $1680 \times .30 = 504$  fat calories/day

### STEP 3

Figure the number of grams that constitute the number of fat calories needed each day to maintain body weight by dividing the number of fat calories by nine. The resulting number is the amount of fat grams you should take in daily.

Example: Male  $682.50/9 = 75.83$  fat grams/day Female  $504/9 = 56$  fat grams/day

### STEP 4

Lose one pound per week by creating a calorie deficit of 500 calories daily. For example, if your body requires 2,000 calories to maintain your body weight, you should take in only 1,500 calories per day to lose a steady pound per week. Gain one pound per week by adding an additional 500 calories to your determined daily calorie intake. Then re-calculate your fat calories and fat grams.

### STAGE 4 FOOD SUBSTITUTES

Protein Carb Fat Calories Sodium  
Grams Grams Grams Mg

Tone de tox 2capsules/ Saba weight loss formula- 1 oz

#### PROTEINS

Chicken (no skin) 27 0 2 133 57

Turkey 28 0 2 132 58

Tuna (white canned in water) 30 0 1 140 127

Tuna (blue fin) 28 0 5 165 0

Beef (95% lean) 25 0 5 153 73

Tofu (firm) 18 4 9 164 16

Lobster 19 0.5 2 103 0

Shrimp 21 2 1 103 0

Crab 20 0 2 105 0

Scallops 17 4 0 92 289

Swordfish 22 0 5 134 0

Egg whites (4) 14 1 1 68 220

Whey Protein (1) 16 1 1 78 40

Cottage Cheese 1% 14 4 1 90 350

**\*4oz. portions unless specified.**

Protein Carb Fat Calories Sodium  
Grams Grams Grams Mg

#### STARCH

Brown Rice 2 22 0.5 103 2.5

White Rice 2 23 0 103 1.5

Oatmeal 5 23 3 132 2

Cream of Rice Cereal 2 24 0 105 0

Popcorn (air) 3 22 1.5 109 4

Sweet Potato (4oz.) 2 30 0 130 11

White Potato (4oz.) 2 20 0 86 4  
 Corn (4oz.) 3.5 22 0.5 93 1  
 Peas (4oz.) 6 15 0 83 146  
 Multigrain Bread (sl) 2.5 18 1 90 170  
 Wheat Shredded 3 23 0 83 1

**\*1oz. portions unless specified.**

Protein Carb Fat Calories Sodium  
 Grams Grams Grams Mg

**FRUITS**

Banana (1 Med.) 0.9 18.5 0.3 72 0.8  
 Apple (1 Small) 0.3 14.6 0.2 55 1.1  
 Grapes (1 Cup) 1.2 29 0.3 110 3.2  
 Strawberries (1 Cup) 1 11.1 0.5 46 1.5  
 Orange (1 Small) 0.9 11.3 0.1 45 0  
 Melon (1 Small) 1.3 12.7 0.3 53 25  
 Pear (1 Small) 0.5 21.5 0.2 81 1.5  
 Grapefruit (1 Small) 0.6 8.1 0.1 32 0  
 Blackberries 1 Cup) 2 13.8 0.7 62 1.4  
 Blueberries (1 Cup) 1.1 21 0.5 83 1.5  
 Peaches (1 Cup) 1.5 16.2 0.4 66 0  
 Kiwi (1 Med.) 0.9 11.1 0.4 46 2.3  
 Cherries (1 Cup w/out pits) 1.2 18.7 0.2 74 0

Pineapple (1 Cup) 0.8 19.6 0.2 74 1.6  
 Protein Carb Fat Calories Sodium  
 Grams Grams Grams Mg

**VEGETABLES**

Fibrous

Green Beans 3 10 0 44 2  
 Broccoli 5 9 0 50 29  
 Asparagus 6 7 1 40 3  
 Carrots 2 16 0 71 80  
 Mushrooms 4 8 0 48 25  
 Peppers, green 2 8 0 38 22  
 Romaine (2 cups) 2 3 0 16 0  
 Celery 0 8 0 29 214  
 Cucumbers 1 6 0 26 10  
 Cauliflower 4 8 0 46 22  
 Spinach 5 6 0 40 97  
 Iceberg Lettuce 1 5 0 22 15  
 Cabbage 2 9 0 40 34  
 Tomatoes 2 8 0 37 5

**6oz. portions unless specified.**

**WHAT IS THE GLYCEMIC INDEX?**

Not all carbohydrate foods are created equally: in fact they behave quite differently in our

bodies. The glycemic index (GI) describes this difference by ranking carbohydrates according to their effect on our blood glucose levels. Eating a lot of high GI foods can be detrimental to your health because it pushes your body to extremes. This is especially true if you are overweight and sedentary. Switch to eating mainly low GI carbs (the ones that produce only small fluctuations in our blood glucose and insulin levels) is the secret to long-term health; thus reducing your risk of heart disease and diabetes which is the key to sustainable weight-loss.

- Low GI means a smaller rise in blood glucose levels after meals
- Low GI diets can help people lose weight
- Low GI diets can improve the body's sensitivity to insulin
- High GI foods help re-fuel carbohydrate levels after exercise
- Low GI can improve diabetes control
- Low GI foods keep you fuller for longer

### **WHAT IS GLYCEMIC LOAD?**

The glycemic index compares the potential of foods containing the same amount of carbohydrate to raise blood glucose. However, the amount of carbohydrate consumed also affects blood glucose levels and insulin responses. The **glycemic load** of a food is calculated by multiplying the glycemic index by the amount of carbohydrate in grams provided by a food and dividing the total by 100. Dietary glycemic load is the sum of the glycemic loads for all foods consumed in the diet. The concept of glycemic load was developed by scientists to simultaneously describe the quality (glycemic index) and quantity of carbohydrate in a meal or diet.

- Glycemic load builds on the GI to provide a measure of total glycemic response to a food or meal
- Glycemic load =  $GI (\%) \times \text{grams of carbohydrate per serving}$  and dividing the total by 100
- One unit of GL ~ glycemic effect of 1 gram glucose
- You can sum the GL of all the foods in a meal, for the whole day or even longer
- A typical diet has ~ 100 GL units per day (range 60 - 180)
- The GI database gives both GI & GL values

### **OBESITY**

In the first two hours after a meal, blood glucose and insulin levels rise higher after a highglycemic load meal than they do after a low-glycemic load meal containing equal calories.

However, in response to the excess insulin secretion, blood glucose levels drop lower over the next few hours after a high-glycemic load meal than they do after a low-glycemic load meal.

This may explain why 15 out of 16 published studies found that the consumption of lowglycemic index foods delayed the return of hunger, decreased subsequent food intake, and

increased satiety (feeling full) when compared to high-glycemic index foods. The results of several small short-term trials (1-4 months) suggest that low-glycemic load diets result in significantly more weight or fat loss than high-glycemic load diets. Although long-term randomized controlled trials of low-glycemic load diets in the treatment of obesity are lacking, the results of short-term studies on appetite regulation and weight-loss suggest that low glycemic-load diets may be useful in promoting long-term weight-loss and decreasing the prevalence of obesity.

#### **LOWGLYCEMIC INDEX FOODS:**

##### **Less Than 55**

Artichoke 15  
Asparagus 15  
Broccoli 15  
Cauliflower 15  
Celery 15  
Cucumber 15  
Eggplant 15  
Green beans 15  
Lettuce, all varieties 15  
Peppers, all varieties 15  
Snow peas 15  
Spinach 15  
Young summer squash 15  
Zucchini 15  
Tomatoes 15  
Cherries 22  
Peas, dried 22  
Plum 24  
Grapefruit 25  
Pearled barley 25  
Peach 28  
Canned peaches, natural juice 30

Dried apricots 31  
Soy milk 30  
Baby lima beans, frozen 32  
Fat-free milk 32  
Fettuccine 32  
M&M's Chocolate Candies, Peanut 32  
Low-fat yogurt, sugar sweetened 33  
Apple 36  
Pear 36  
Whole wheat spaghetti 37  
Tomato soup 38  
Carrots, cooked 39  
Mars Snickers Bar 40  
Apple juice 41  
Spaghetti 41  
All-Bran 42  
Canned chickpeas 42  
Custard 43  
Grapes 43  
Orange 43  
Canned lentil soup 44  
Canned pinto beans 45  
Macaroni 45  
Pineapple juice 46  
Banana bread 47  
Long-grain rice 47  
Parboiled rice 47  
Bulgur 48  
Canned baked beans 48  
Grapefruit juice 48  
Green peas 48  
Oat bran bread 48  
Chocolate bar, 1.5 oz 49  
Old-fashioned oatmeal 49  
Cheese tortellini 50  
Low-fat ice cream 50  
Canned kidney beans 52  
Kiwifruit 52  
Orange juice, not from concentrate 52  
Banana 53  
Potato chips 54  
Pound cake 54  
Special K 54  
Sweet potato 54

## **TIPS**

Thank you for reviewing Andlos weight management informational document focused on the HCG Weight Program first written about by Dr. Simeons' Pounds and Inches medical study that was done in the 60's. "Since his report there have been many independent studies such as this one from The American Journal of Clinical Nutrition. In the 70's it was the most popular weight management program in the 70's. Even though it has not been approved by the FDA for weight loss it is approved by the FDA for other medical conditions so it must be prescribed by a doctor after the proper testing, exams, and documents are completed. Even recently a new book was written selling millions of copies and becoming a best seller.

BUT - HCG (Human Chorionic Gonadotrophin) alone will not make you lose weight, it is only one small piece of a specialized weight loss program which when followed properly has produced up to 40 pounds of healthy weight loss for thousands of people. With most, the weight stays off, and their quality of life drastically improves. This happens because we focus on finding the reason for their weight management issues and help our patients to properly understand the program that will work for them.

This is why we wrote this summary which is easy to read and understand. You will find easy to prepare recipes, cooking ideas, supplements, cleanses, foods to eat and avoid, and a guide with stages that will promote maximum weight loss before, during, and after your 6 week HCG injection process. This book was written for informational purposes only and is not intended to diagnose, treat, cure, or prevent any disease or illness.

Some more info about HCG :

HCG, which stands for human chorionic gonadotropin is a pregnancy hormone that is produced by the embryo soon after it is conceived. As the pregnancy progresses, this peptide hormone begins to be produced by a special part of the placenta called the syncytiotrophoblast. As such, testing for levels of HCG in a woman's body is used as a reliable test for pregnancy.

While HCG is most commonly associated with pregnancy, it may also be produced when the body becomes infected with certain types of tumors. Therefore, testing for elevated levels of HCG can also help doctors recognize the existence of tumors in a patient's body.

When produced during pregnancy, HCG is meant to help the corpus luteum intact. The corpus luteum, which is part of the ovary, is integral in maintaining production of the progesterone that is an important component of human pregnancy. In addition to preventing the disintegration of the corpus luteum, researchers believe that HCG provides pregnant women with extra immunity during pregnancy.

The high levels of HCG that are produced during pregnancy have no negative effects on the pregnant woman's body. In fact, doctors have used HCG for many years in order to help women

experiencing hormonal issues or fertility problems. More recently, however, researchers have found that HCG can actually help the body burn more fat and can be used to aid in weight loss when combined with a healthy low calorie diet and a moderate exercise routine.

Several other positive side effects have also become associated with HCG therapy. These include:

- Increased energy without experience a sense of nervousness
- Clearer thought processes
- Improved sleep at night
- Feeling less irritable

While there are some potential negative side effects to HCG therapy, these are generally mild and are not very troublesome to most people. These include

- Headaches
- Breast tenderness
- Edema
- 

Problems encountered with interruption of weight loss:

**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 a full course, particularly in patients that have been doing well and who's overall average of nearly a pound per effective injection 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 liquid except plain water is allowed and of water they may only have 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 injection. 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 giving a diuretic for one or two days. 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—ten days to two weeks. Fortunately, it is rare and only occurs in very advanced stages, 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 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. An unexplained arrest of reduction has on several occasions raised our suspicion before the first period was missed. If in such cases menstruation is delayed, we stop injecting and do a urine pregnancy test later. No pregnancy test should be carried out earlier than five days after the last injection, as otherwise the HCG may give a false positive result.

Although HCG is associated with pregnancy, it can safely be used by both men and women that are looking to get their weight under control. If you would like to learn more, please feel free to contact us at 1-941-955-1815. Robert G Carlson, MD, FACS