

WHAT IS GLP?

GLP-1 (Single Agonist)

The original (e.g., Ozempic/Wegovy, semaglutide). Mimics one gut hormone to boost insulin release, slow stomach emptying, and signal fullness to the brain

GLP-2 (Dual Agonist)

The upgrade (e.g., Mounjaro/Zepbound, tirzepatide). Activates two receptors, GIP and GLP-1, for stronger appetite control and blood sugar improvement

GLP-R (Retatrutide, Triple Agonist)

Activates GIP, GLP-1, **AND** glucagon receptors. Reduces appetite, food intake, and increases metabolism, signaling the body itself to use more energy. Currently finishing last trial of human testing

Phase 3 result: People on 12mg GLP-R lost an average of **28.3%** of body weight over 80 weeks, the largest weight loss reported for any obesity drug in phase 3



RECONSTITUTION

Reconstitution

- **Mixing:** Freeze-dried powder is mixed with bacteriostatic water. Wipe vial tops with alcohol. Inject water slowly down the inside glass wall. Swirl gently until dissolved. **Never shake**
- **Storage:** Keep refrigerated and away from light after mixing

Sample Dosage Math Example

Step 1: Vial has **10 mg** of powder.
Step 2: Add **100 units** water (1 mL).
Step 3: Now every **10 units = 1 mg**.
2 mg = draw to the **20** line.
4 mg = the **40** line.

Injection Sites

- **Subcutaneous only:** Into the fat just under the skin
- **Where:** Abdomen (2+ inches from navel), thigh, or upper arm
- Stomach injection does **NOT** target belly fat; it works body-wide

Where to start?

Retacorelabs.com

We provide free consultations whether you buy from us or not

contact@retacorelabs.com
(505) 535-4840

DOSAGE PROTOCOL

As Studied in Phase 3 Trials

- **Starting dose:** 1 mg once weekly.
- **Escalation:** Increase every 4 weeks. Do not increase if side effects are not tolerated.

Frequency: Once weekly, same day each week, with or without food.

Duration

- Main trials ran 80 weeks; weight loss was still occurring late in that window. 12 week cycles are recommended
- 12mg max studied dosage
- Stopping GLP medications is commonly followed by weight regain. Plan for maintenance with a prescriber

Equipment

- 1 mL (U-100) insulin syringe, 30–31G, 5/16" needle. **New syringe every time**

Do Not Use / Stop & Seek Care

- Personal or family history of medullary thyroid cancer or MEN2
- Pregnant, planning pregnancy, or breastfeeding
- Severe stomach pain spreading to the back (possible pancreatitis), gallbladder pain, persistent vomiting, or signs of allergic reaction
- Taking insulin or a sulfonylurea: low blood sugar risk