Safe and Effective
The NeuroResearch treatment protocol is safe and effective when administered by a properly trained doctor.

NeuroResearch maintains a patient treatment database with over 2,000 patient years of treatment, which demonstrates the safety and effectiveness of the NeuroResearch amino acid protocols (see below).

Side Effect Profile
Safety similar to a sugar pill.
Incidence of side effects
All other reported side effects occur at the rate of less than 1 in 500 patients (0.002%) when properly managed by a caregiver.

<table>
<thead>
<tr>
<th>Side Effect</th>
<th>Incidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dry mouth</td>
<td>2.1%</td>
</tr>
<tr>
<td>Headache</td>
<td>0.7%</td>
</tr>
<tr>
<td>Dizziness</td>
<td>0.4%</td>
</tr>
<tr>
<td>Insomnia</td>
<td>0.9%</td>
</tr>
<tr>
<td>Nausea</td>
<td>0.6%</td>
</tr>
<tr>
<td>Constipation</td>
<td>0.4%</td>
</tr>
</tbody>
</table>

Effectiveness Second to None
When used under the Guidance of a Trained Licensed Health Care Provider.

- Average group weight loss of 16.9 pounds in the first month.
- Protocols have a 100% response in the treatment of depression.
- A 90%+ success rate with Migraine Headaches.
- For more information of the effectiveness and safety of the NeuroResearch amino acid protocols, see our web site below:

Prescription Drugs Versus Amino acids
THE DIFFERENCE IS REAL

Neurotransmitters are natural chemicals found in the nervous system of the body. Neurotransmitters facilitate and regulate the transfer of electrical energy between the nerve cells (neurons) of the nervous system.

Levels of neurotransmitters that are too low to facilitate the proper transfer of electrical energy between neurons will cause disease and illness.

At present, the standard in medicine for treatment of neurotransmitter diseases is prescription drugs.

NeuroResearch's laboratory and clinical work has demonstrated that prescription drugs can further deplete neurotransmitters in most patients, making the real cause of the problem worse.
How Drugs Further Deplete Neurotransmitters

The two primary mechanisms of actions on neurotransmitters
1. Enzymes (MAO and COMT) breakdown neurotransmitters.
2. They are excreted by the kidneys into the urine.

Neurotransmitters are taken in by neurons (the nerve cells of the nervous system) and are put in the store of the pre-synaptic neuron. While in the store, neurotransmitters are safe from enzyme breakdown and excretion by the kidneys.

Prescription drugs work by moving neurotransmitters out of the safety of the store into the synapse. As the number of neurotransmitter molecules increases, there is also an increase in the enzyme breakdown of neurotransmitters.

If the nutrients needed to build neurotransmitters are not properly increased when patients are treated with prescription drugs, the net effect results in the further depletion of the neurotransmitters. This causes patients who are already suffering from diseases caused by low levels of neurotransmitters to further suffer.

Neurotransmitter dysfunction diseases (previously listed in this brochure) are caused by neurotransmitter levels that are too low to keep symptoms under control. Prescription drugs work by moving neurotransmitters from one place in the system to another place. They do not increase the overall number of neurotransmitter molecules in the system.

Prescription drugs move molecules from one place in the system to another place. They do not change the low number of molecules in a system.

What occurs when prescription drugs further deplete neurotransmitters

Drugs become ineffective  Disease symptoms return

If neurotransmitter levels are too low at the start of treatment, prescription drugs will be ineffective.

(Prescription drugs that use neurotransmitters will not be effective if there are not enough neurotransmitters available for use.)

Prescription drugs can make the symptoms of neurotransmitter diseases appear better, while actually making the real cause of the problem worse by further lowering neurotransmitter levels.
How Do You Increase Neurotransmitter Levels in the Brain (Central Nervous System)?

Prescription drugs do not increase the overall number of neurotransmitter molecules in the brain (central nervous system). They merely move the neurotransmitters around, which eventually causes neurotransmitter levels to further drop.

The Blood Brain Barrier

The blood brain barrier surrounds the central nervous system. It protects the brain by only allowing specific molecules to pass into the brain from the blood. Neurotransmitters do not cross the blood brain barrier into the brain. This means that taking neurotransmitters orally or by IV will not allow them to pass into the brain. Administering neurotransmitters is not an option for raising neurotransmitter levels in the brain.

NeuroResearch's Protocols with 5-HTP, Tyrosine, and L-dopa as Guided by Lab Testing

The only way to truly raise the overall neurotransmitter levels in the brain (central nervous system) is provide the nutrients (amino acids, vitamins, and minerals) needed by the body to build neurotransmitters. These nutrients will cross the blood brain barrier into the brain. They are then synthesized into neurotransmitters which will raise the number of neurotransmitter molecules in the brain. Thus, providing the proper nutrients accomplishes what prescription drugs are unable to do.

NeuroResearch's research has shown that improperly used amino acids (unbalanced use of amino acids) can actually deplete other neurotransmitters in the system. The patented and patent pending formulas of NeuroResearch, as guided by lab testing, provide the balance needed to prevent further depletion of neurotransmitters and to optimize outcomes.
Drugs that Can Deplete Neurotransmitter Levels in the System
(Partial listing)

Prozac
Zoloft
Paxil
Celexa
Lexapro
Luvox
Trazodone (Deseryl)
Sinequan (Doxepin)
Serzone
Effexor
Meridia
Phendimetrazin (Bontril)
Phentermine (Adipex)
Phenylpropanolamine (Dexatrim)
Tenuate
Mazindol

Fenfluramine (racemic)
D-fenfluramine
Amphetamines
Alcohol (ETOH)
Nicotine
Imitrex
Zomig
Maxalt
Amerge
Amitriptyline (Elavil)
Nortriptyline (Norpramin)
Remeron
Wellbutrin (Zyban)
Thioridazine (Mylan)

Primary Neurotransmitter Depletion Diseases
(A partial listing of diseases caused by low levels of neurotransmitters)

- Parkinsonism
- Obesity
- Bulimia
- Anorexia
- Depression
- Anxiety
- Panic Attacks
- Migraine Headaches
- Tension Headaches
- Premenstrual Syndrome (PMS)
- Menopausal Symptoms
- Obsessive Compulsive Disorder (OCD)
- Impulsivity
- Obsessionality
- Insomnia
- Inappropriate Aggression
- Inappropriate Anger
- Psychotic Illness
- Fibromyalgia
- Chronic fatigue syndrome
- Adrenal fatigue/burnout
- Hyperactivity
- ADHD/ADD
- Hormone dysfunction
- Adrenal dysfunction
- Dementia
- Alzheimer's disease
- Traumatic Brain Injury
- Phobias
- Chronic Pain
- Nocturnal Myoclonus
- Irritable Bowel Syndrome
- Crohn's Disease
- Ulcerative Colitis
- Cognitive Deterioration
- Organ System Dysfunction
- Management of
- Chronic Stress
- Cortisol Dysfunction

The NeuroResearch amino acid program provides the nutrients needed to build neurotransmitters.