

## PHASE 3 BASICS - HCG Quick Reference Guide

Important: 1) This reference guide is for convenience only and does not take the place of the importance and value of reading the resources in entirety; 2) Some wording was altered from the original sources to clarify the differences in what is now commonly known as “phases” (as introduced by Kevin Trudeau but not defined by Dr. Simeons), and to also provide conciseness, clarity, and uniformity in explanations.

### Day of Last Injection:

- MUST follow exactly the Phase 2 very low calorie diet on the last injection day and for the next 72 hours (not days). Be sure to record your last injection weight (LIW).<sup>1</sup>
- Begin counting the 72 hours from the time of the last injection.<sup>1</sup>
- During the 72 hours, a very slight increase in diet, such as an extra apple, 150 grams of meat or two or three extra breadsticks may be allowed if a person feels much more hungry and even weak.<sup>1</sup>
- You continue to follow the low calorie food program because your body is flooded with HCG and it should take about 72 hours for it to leave the body.<sup>1</sup>

### Phase 3 - Maintenance:

- **Phase 3 is for three weeks and begins** 72 hours (not days) after the last HCG injection.<sup>1</sup>
- **In Phase 3 you eat** normally with the exception of no sugar and no starch. Continue to drink plenty of water daily.<sup>1</sup>

During this period, the so-called carbohydrates, that is sugar, rice, bread, potatoes, pastries, etc., are by far the most dangerous. If no carbohydrates whatsoever are eaten, fats can be indulged in somewhat more liberally. As soon as fats and starch are combined, things are very liable to get out of hand. This has to be observed very carefully during the first 3 weeks after the treatment is ended, otherwise, disappointments are almost sure to occur.<sup>1</sup>

- **Eat something six times per day.** It is very important to eat a full breakfast, lunch, and dinner, and have three snacks, ideally consisting of a minimum of two apples and a grapefruit per day.<sup>2 & 3</sup>
- **The goal of Phase 3** is to maintain your new weight loss, **not** to lose more weight.<sup>2</sup> Do not gain or lose more than 2 lbs. since your LIW. This is important because the hypothalamus is being reset, as is the body’s “base weight”, and any weight loss during this time frame is at the expense of normal fat which is easily regained later.<sup>1</sup>
- **Weigh yourself daily** as it takes about three weeks before the weight reached at the end of the Phase 2 treatment becomes stable (ex. does not show violent fluctuations after an occasional excess).<sup>1</sup>

**When additional courses of HCG injections are needed**, the three week maintenance period of Phase 3 is ALWAYS followed by the beginning three weeks of Phase 4 when sugar and starch are slowly added. (This second set of three weeks is now commonly known as the beginning maintenance weeks of Phase 4.)

**The maintenance interval** between Phase 2 courses increases incrementally as Phase 4 becomes increasingly longer with each additional HCG course. (See interval list below.)

**Because there is a possibility of developing immunity to HCG**, it takes about a six week pause before the HCG again becomes fully effective.

**After your goal weight is reached**, complete Phase 3 followed by the beginning three weeks of Phase 4 maintenance which is when you SLOWLY begin to add back in sugar and starch as you follow the requirement not to gain or lose more than 2 lbs. after your LIW. Weight is always controlled by morning weighing after emptying the bladder.<sup>1</sup> Going forward ‘SLOWLY’ is the key word to success.<sup>2</sup> Afterward, you stay on Phase 4 for the rest of your life.

### If You Still Need to Lose More Weight:

After completing the Phase 3 and Phase 4 maintenance interval that follows each course of Phase 2, you can then begin to use Phase 2 again. This next course of HCG injections is commonly referred to as Round 2 of Phase 2. (The first HCG course is abbreviated as R1P2, and is progressively described as R2P2, then it is R3P2, then R4P2, etc.)

### Interval List for Additional Rounds of Phase 2:

After each additional Phase 2 course, the maintenance interval should be made progressively longer.<sup>1</sup> Noteworthy, is current thinking that it can be an individual choice about adjusting this protocol’s time frames with positive outcomes. It is, therefore, highly recommended that a person thoroughly read resources and also join HCG newsgroups to discuss such variations and to learn about other people’s subsequent experiences. However, it is important to talk with and/or always follow your doctor’s instructions when under a doctor’s supervision.

- Round 1 – 6 week break (3 weeks of P3 and 3 weeks of P4)
- Round 2 – 8 week break (P3 and 5 weeks of P4)
- Round 3 – 12 week break (P3 and 9 weeks of P4)
- Round 4 – 20 week break (P3 and 17 weeks of P4)
- Round 5 – 6 months (P3 followed by P4)

In this way, it is possible to bring about a 100 lb. and more of weight loss, if required, without hardship to the person.<sup>1</sup>

**When you have reached your desired goal weight, and after successfully completing the maintenance interval, you continue using Phase 4, which will be followed for the rest of your life.** You will have been cured of the main causes of obesity. Your metabolism will be high so you easily burn for fuel the food you consume. Your hunger and food cravings will be low. You will no longer abnormally store fat in the abnormal secure fat reserves. Your hunger will be normalized and will no longer be intense and constant. You will eat normal, small amounts of food and be perfectly satisfied and full. You will no longer have uncontrollable urges and desires to eat. You will no longer have food cravings, causing you to eat when you are not hungry. You will not gain any more weight. Your energy levels will be high. You will sleep deeply and soundly. ...You will find yourself more energetic, doing things and exercising more than you ever imagined. ...Phase 4 is for the rest of your life.<sup>3</sup> *Read about Phase 4 in entirety through other resources.*

#### **Helpful Phase 3 Suggestions:**

- Continue to keep a food journal.
- It may help to eat two apples and one grapefruit per day.
- Be careful with very sweet fruit.<sup>1</sup>
- It may be helpful to sparingly eat nuts, seeds, cheese, milk, and yogurt, having a maximum of only one serving per day.
- It may be helpful to eliminate or limit starches (bread, rice, potatoes sweet potatoes, and yams).
- It may be helpful to eliminate or limit carrots, corn, beets, bananas, and any other type of starchy vegetable.

#### **When People Have a Hard Time on [Phase 3] It Is Usually:**

- 1) Not eating enough food, especially protein – you should be eating a minimum of 1500 calories. In general, we do not encourage counting calories, but if you are a lifetime dieter, you may try to keep eating too little to avoid gaining back the weight you just lost. This is a major, common mistake. In these circumstances we encourage someone to add up the calories to make sure they are eating enough (not to limit what they are eating). According to Dr. Simeons, HCG is releasing 1500 to 4000 calories into your system and you are eating another 500 calories, so theoretically your system has been revved up to handle 2000-4500 calories PER DAY. You can see how going into the maintenance phase and ‘cutting back’ to 800 or 1200 would send your body back into the ‘grab everything and hold on to it’/starvation mode (p. 32).<sup>2</sup>
- 2) Eating sugars and starches (intentionally or not) – ex. Pizza is a starch!.... (p. 32).<sup>2</sup>
- 3) Staying on the 500 calories diet a little too long – per Dr. Simeons.... (p. 32).<sup>2</sup>

#### **Important Phase 3 Information:**

- **PROTEIN need not be watched carefully**, while dairy and higher carbohydrate fruits and vegetables should be watched very carefully.<sup>2</sup> **Unless an adequate amount of protein is eaten as soon as the Phase 2 treatment is over, protein deficiency is bound to develop**, and this inevitably causes the marked retention of water known as hunger-edema. A protein deficient diet makes the body retain water.<sup>1</sup>

In Phase 2, the patient has been only just above the verge of protein deficiency and has had the advantage of protein being fed back into his system from the breakdown of fatty tissue. Once the treatment is over, there is no more HCG in the body and this process no longer takes place.<sup>1</sup>

- **Retention of water, known as hunger–edema**, occurs when an adequate amount of protein is not eaten. The treatment is simple.

**STEAK & CHEESE DAY: The person is told to eat two eggs for breakfast and a huge steak for lunch and dinner followed by a large helping of cheese.** When this treatment is followed, two lbs. can vanish overnight, the swollen ankles are normal but sleep was disturbed, owing to an extraordinary need to pass large quantities of water.<sup>1</sup>

- **You should never gain more than 2 lbs. without immediately correcting this, but it is equally undesirable that more than 2 lbs. be lost after treatment** because a greater loss is always achieved at the expense of normal fat. Any normal fat that is lost is invariably regained as soon as more food is taken, and it often appears that this rebound overshoots the 2 lb. maximum limit.<sup>1</sup>
- **You MUST weigh everyday** to make sure you have not gained more than 2 pounds since your last injection weight date. *After a course of HCG, as much as 10 lbs. can be regained without any noticeable change in the fit of clothes.* This occurs because you have lost pounds and inches. After treatment, newly acquired fat is at first evenly distributed and does not show the former preference for certain parts of the body.<sup>1</sup>

An interesting feature of the HCG method is that, regardless of how fat a patient is, the greatest circumference – abdomen or hips as the case may be is reduced at a constant rate which is extraordinarily close to 1 cm. per kilogram of weight lost. At the beginning of treatment the change in measurements is somewhat greater than this, but at the end of a course it is almost invariably found that the girth is as many centimeters less as the number of kilograms by which the weight has been reduced. I have never seen this clear cut relationship in patients that try to reduce by dieting only.<sup>1</sup>

- **STEAK DAY:** As long as the weight stays within two pounds of the weight reached on the day of the last injection, one should take no notice of any increase. However, the moment the scale goes beyond 2 lbs., even if this is only a few ounces, they must on that same day entirely skip breakfast and lunch but take plenty to drink. In the evening, they must eat a huge steak with only an apple or a raw tomato. This rule applies only to the morning weight. It is of the utmost importance that this be done on the same day as the scale registered an increase of more than two pounds from the weight you achieved on the last injection day. You must NOT postpone this protocol until the next day.<sup>1</sup>

- **TO AVOID A STEAK DAY:** This method is not meant to take the place of a steak day. It is only intended to drop some weight when you are getting close to a required Steak Day.

If you see a Steak Day drawing near, you can do the following, which will usually bring your weight down a pound or so the next day. 1) Drink lots of water that day; 2) Don't eat until lunch; 3) Have a whole can of tuna (water packed), or chicken with mayo on either lettuce or celery for lunch; 4) Have a big portion of protein for dinner with a small salad and 0-1 carbohydrate dressing (ex. Ranch); 5) If you are extremely hungry, you could also have 2 eggs for breakfast.<sup>2</sup>

- **Most patients hardly ever need to skip a meal.** If they have eaten a heavy lunch they feel no desire to eat dinner, and in this case no increase in weight takes place. If they keep their weight at the point reached at the end of Phase 2, even a heavy dinner does not bring about an increase of two pounds on the next morning and does not, therefore, call for any special measures.<sup>1</sup>

Most patients are surprised how small their appetite has become and yet how much they can eat without gaining weight. They no longer suffer from an abnormal appetite and feel satisfied with much less food than before. In fact, they are usually disappointed that they cannot manage their first normal meal after completing Phase 2, which they have been planning for weeks.<sup>1</sup>

- **Beware of over enthusiasm. When doing the maintenance interval, some people cannot believe that they can eat fairly normally without regaining weight.** They disregard the advice to eat anything they please except sugar and starch (only eliminated during Phase 3) and they want to play it safe. They try more or less to continue the 500-Calorie diet and make only minor variations. To their horror, they find their weight goes up.<sup>1</sup>
- **Though a person can only consider oneself really cured** when reduced to the statistically normal weight, we do not insist on commitment to that extent. Even a partial loss of overweight is highly beneficial.<sup>1</sup>

#### Information on Developing Immunity to HCG:

- **Patients who need only 23 injections during Phase 2** may be injected daily during Phase 2, including Sundays, as they never develop immunity.<sup>1</sup>
- **If one is taking 40 injections during Phase 2**, the onset of immunity can be delayed if they are given only six injections a week, leaving out Sundays or any other day they choose, provided that is always the same day.<sup>1</sup>
- **The maximum Phase 2 course is 40 injections, nor as a rule is it allowed to lose more than 34 lbs. at a time.** The treatment is stopped when either 34 lbs. have been lost or 40 injections have been given. The only exception is in the case of grotesquely obese patients who may be allowed to lose an additional 5-6 lbs. if this occurs before the 40 injections are up.<sup>1</sup>

#### Helpful Phase 3 Recommendations:

Using organic is suggested **ONLY** by Kevin Trudeau and some other current resources.

- Eat a large breakfast.<sup>3</sup>
- Finish your dinner 3½ hours before bedtime.<sup>3</sup>
- Daily take 1-3 teaspoons (or 2 Tbsp.) of raw apple cider vinegar, diluted with water. Many resources claim extensive benefits, particularly increased weight loss.<sup>2&3</sup>
- No highly refined and super highly refined foods, including white sugar and white flour.<sup>3</sup>
- Strongly suggested not to use products with propylene glycol, sodium laureth sulfate, and mineral oil.<sup>3</sup>
- Organic is recommended so that you avoid consuming all of the things that are designed to overtax your hypothalamus and create the conditions of obesity. In real life, in the real world, eating only 100% organic food can be next to impossible. Basically then, what you work to achieve is to avoid, as best you can, the man-made ingredients that cause obesity. Remember, obesity and weight gain is generally not caused by calories, fat, simple or complex carbohydrates, foods with a high glycemic index rate, or sodium. Obesity and weight gain is caused by the man-made ingredients, chemicals, and food processing techniques employed in the growing, producing, and manufacturing of food (p. 106).<sup>3</sup>

#### REFERENCES

<sup>1</sup> "Pounds & Inches: A New Approach To Obesity", Manuscript by A.T.W. Simeons, M.D.

<sup>2</sup> *HCG Weight Loss Cure Guide by Pounds and Inches Away*, LLC, author Linda Prinster.

<sup>3</sup> *The Weight Loss Cure "They" Don't Want You to Know About* by Kevin Trudeau.

## EXPERIENCES & TIPS

Please send your Phase 2 HCG experiences and tips that you have discovered would be of benefit for others to know to be included in this section. Category topics will be created to organize the information. Send them to Sunlight at [sunlight\\_smiles\\_cat99@yahoo.com](mailto:sunlight_smiles_cat99@yahoo.com)

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Jeanette Shouse and jointly edited with Sunlight/ada

## Constipation

*Experiencing constipation while using the HCG protocol is not uncommon. Some remedy options are listed.*

Reference: Used with permission from Laurie Ghiz.

The product "**Natural Calm**" was recommended to me by an acupuncturist. It comes unflavored and in raspberry-lemon with Stevia. It is magnesium citrate and it helps to move the bowels without causing cramping, which is important to me because I have Irritable Bowel Syndrome (IBS) and am lactose and gluten intolerant as well.

There are directions on the back, but what I do is divide the dosage throughout the day. If you take too much, it can give you diarrhea. It's better to start slow to see how the body reacts and then increase your intake until the bowels are loose enough, but not too loose. It has more of a lemony taste and it is made with boiling water.

- 1) Add a small amount of water to mix it because it bubbles up and over if you put too much water in at one time;
- 2) Stir until dissolved and then add more hot water to it;
- 3) Add enough cool water to drink immediately, but you can drink it like a hot tea if preferred.

It can be purchased in a large container from Vitamin Shoppe for about \$26 and is also available at other stores, or online. It can last 4-6 weeks depending upon the dosage. I know it helped me greatly on Phase 2 and moved the bowels on average every day. Once in a while I would skip a day. There is no cramping for me when I use this product.

## Other Constipation Recommendations

1. Dr. Simeons recommends suppositories for constipation.
2. **Smooth Move**®, a herbal tea Stimulant Laxative by Traditional Medicinals. This is a sweet tasting herbal laxative tea for use in relieving occasional constipation. This product generally produces bowel movements in six to twelve hours.
3. **Dr. Schulze's Intestinal Formula #1**, an organic and wild harvested herbal supplement, by American Botanical Pharmacy. [www.herbdoc.com](http://www.herbdoc.com) (*as recommended by an alternative M.D.*).

## Flour substitute

Reference: Used with permission from Chris who welcomes contact and questions as she oversees a group of people using the sublingual form of HCG. Chris can be reached at: [mehere@charter.net](mailto:mehere@charter.net)

Sprouted grain breads are not made using flour but are made using only the sprouts from the whole grains. Those of us who tried this type of sprouted grain bread who are using the sublingual form of HCG have been able to eat it during Phase 3 without negative consequences to our weight.

You can find these sprouted breads at Whole Food type stores or Costco, and sometimes even a local grocery store. Just be sure to read the labels. The ones in Washington State are made by **Healthy Way** ([www.healthywaybread.com](http://www.healthywaybread.com)) which is a Canadian company. The only sweetener in them is to feed the yeast and it is raisin juice and little cane syrup. Another brand is **Alvarado Street Bakery** and this one is sweetened with a smidge of honey and/or molasses. For those of us who have tried it during Phase 3, it sure has been fun to have some toast with eggs! I don't think you should have this bread for every meal as that would cut down the vital protein that is needed, but a treat a couple times a day is fine.

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## Foods

During P3 and P4, it's a good idea to keep a close eye on your reaction foods. Even if you have never had difficulty with certain foods, it's possible that the ability of a person's body to handle certain foods at certain times may change depending on how much fatty tissue is left.

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## Meat Substitutes for A Steak Day

Chicken or fish have been used successfully as a meat substitute for a Steak Day.

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## Exercise

There are a variety of exercise recommendations ranging from not doing any exercise while on Phase 2 while others exercise faithfully. However, one will lose weight on this protocol without exercise.

One personal recommendation for doing exercise at home is the DVD by Ravi Singh and Ana Brett, "**Fat Free Yoga: Lose Weight & Feel Great.**" You can find great reviews of this DVD on Amazon. (Sunlight, 2008)

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## **A Plan for Surviving P3, P4, and Lifelong Maintenance**

Reference: Excerpt taken from the posted file: **“A Plan for Surviving P3, P4, and Lifelong Maintenance.”** Used with permission from Jeanette Shouse and jointly edited with Sunlight/ada. Please see the file in its entirety which includes the P4 and Lifelong Maintenance sections as posted in the “File” section in the HCG newsgroups.

In my opinion we must figure out what works for us as an individual. Some people may not need any P3 at all and can continue on P2 indefinitely. Some of us may need a full six weeks or more between rounds. However, after following the newsgroup posts for quite some time, I feel that we might need to continue P3 for a few weeks AFTER the weight becomes stable. In other words, if your weight only stabilizes (no ups and downs to speak of) at or near the end of the 3 weeks, it might be very beneficial for long-term success if we continue maintaining that weight for an extra week or so before moving into a new P2 or on to the extended and lifelong maintenance of P4.

### **P3 is not just something we have to live through to get to P4.**

Take it very seriously folks, and learn from the experience of others who DID NOT do it right the first time around and are doing it over again.

### **The Purpose of P3**

The three weeks of strict P3 must be done because the ultimate purpose of P3 is to RESET and lock-in your new base weight (the weight you recorded as your LIW). If you fail to follow the protocol during these weeks, your experience when you begin adding back other foods in P4 **WILL** be to regain weight up to your former base weight (*the weight you were before you began using the HCG protocol or the level you set on the previous round*).

Personally, I feel that P3 is the most difficult and most important part of the whole process. Not only must it be done correctly to establish the new base weight, there are many other things that have to be learned in P3.

- You have to learn how individual foods affect your weight as they are added back into the diet. Continuing to keep a daily food journal will help you pinpoint problem foods and discover which ones work well for you.

- You have to learn to identify the foods that cause you to gain weight. Once you know which ones do this, you can decide when to eat them and what to do when the gain comes.
- You have to learn what portion sizes you can eat without gaining weight.
- You have to learn how to make adjustments to your food choices and portion sizes to maintain this new base weight.
- If you do not do this in P3, you will gain weight in P4.

One way to approach P3 is to keep your vegetable and fruit choices (but not quantities) the same for the first several days to a week and to add additional proteins and fats. **Your protein intake should at least double or triple and you should not be trying to limit fat intake.**

**If you are still losing weight**, then increase your vegetable consumption. Add back green beans, broccoli, cauliflower, Brussels sprouts, and other low glycemic veggies. (See the Glycemic Index Chart in the HCGDIETERS YAHOO GROUP files.) If you are still losing or maintaining nicely, then add some new fruits and berries, such as blueberries and cantaloupe.

**If you gain weight or your weight begins to fluctuate**, reduce the amounts consumed or eliminate the latest foods added for a few more days to a week and then try them again.

As you add new choices to your diet, keep a food record and note what reactions you had to the new items. Did you gain weight? Did you retain fluid? Did you have stomach upsets, gas, bloating or indigestion? Did you feel more hunger after eating, stay satisfied for shorter periods of time, have food cravings? Use these notes to develop your own personal list of foods that are OK, should be limited, or should be avoided.

### **Analyzing a Gain in P3**

Many people NEVER have to resort to calorie counting or analyzing the intake percentages of protein, fat, and carbohydrates. However, there are some of us who do not experience an easy stabilization of weight in P3. If you are gaining weight in P3, try the following in the order listed:

1. Check all the foods and beverages you are consuming for hidden sugar and starch.
2. Count calories!! OH NO!! Just for a little while, until you find your individual intake level.

3. Use a site like [www.FitDay.com](http://www.FitDay.com) to check your calorie count and your intake percentages of protein, fats, and carbohydrates (carbs). If your calorie level is where it should be to maintain your weight and you are still showing a gain, you may need to adjust the percentages of the nutrients you are eating.
  4. During P3 your protein and fat intake needs to be higher than normal. **Many people find that their protein intake needs to be around 65% in order to maintain.**
  5. After you have stabilized and maintained for a while, you can adjust the protein downward and the carb intake upward until you find a good balance for you.
  6. Eliminate the fruits for a few days to a week. Add them back slowly after the weight stabilizes.
  7. Are you exercising too much, too soon? Try cutting back or cutting out any new routines you have added until P4.
  8. Has your elimination routine (BM's) returned to a normal pattern?
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