



**Hypo-serotonergic™ conditions** occur when serotonin concentrations are not enough, low, inadequate, depleted, deficient, or suboptimal on a modified normal diet.™

**Hypo-dopaminergic™ conditions** occur when dopamine concentrations are not enough, low, inadequate, depleted, deficient, or suboptimal on a modified normal diet.™

**Hypo-glutathionemia™ conditions** occur when glutathione concentrations are not enough, low, inadequate, depleted, deficient, or suboptimal on a modified normal diet.™

- Giving only *serotonin precursors* can deplete dopamine and glutathione.™
- Giving only *dopamine precursors* can deplete serotonin and glutathione.™
- Giving only *glutathione or glutathione precursors* can deplete serotonin and dopamine.™

The centrally acting monoamines (monoamines) are serotonin, dopamine, norepinephrine, and epinephrine.

For the management of **hypodopaminergic™ conditions or states** that may accompany

## Parkinson's disease

A **hypodopaminergic** condition or state often accompanies Parkinson's disease (see the right column).

After diagnosing Parkinson's disease, formulate a differential diagnosis to rule out accompanying issues, including a **hypodopaminergic** condition or state.

Identify the presence of a **hypodopaminergic** condition or state with an empirical trial of the **hypodopaminergic** condition or state protocol (see page 2).

Management of the **hypodopaminergic** condition or state which may accompany symptoms that require establishing dopamine concentrations higher than are possible with modification of the normal diet.

In this case (Parkinson's disease), the **hypodopaminergic** state would be associated with decreased cortical physiological efficiency in information processing; that is, a larger neuronal pool may be required to carry out the task in the dopamine depleted state than during the dopamine-replete state.

Mattay, V. et al. Dopaminergic Modulation of Cortical Function in Patients with Parkinson's Disease Ann Neurol 2002;51:156-164

**Hypodopaminergic** states are hypothesized to be associated with apathy, depression, and anxiety.

Getz, S. et al. Cognitive and Neuropsychiatric Features of Early Parkinson's Disease Archives of Clinical Neuropsychology 32 (2017) 769-785

The imaging data revealed a robust bilateral amygdala response in NCs (normal controls) that was absent in PD (Parkinson's disease) patients during the **hypodopaminergic state**. Tessitore A., et al. Dopamine Modulates the Response of the Human Amygdala: A Study in Parkinson's Disease J of Neuroscience, October 15, 2002, 22(20):9099-9103

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### Mucuna Medical Food™

Active ingredient L-dopa

**Contains no carbidopa**

For the management of **hypodopaminergic** conditions when the modified normal diet does not meet the system's needs.



**R&R Medical Food** is for managing **hypo-serotonergic™** conditions or states which may accompany Parkinson's disease or be induced by L-dopa when the modified normal diet does not meet system needs. The recommended starting dose is one pill per day with Mucuna Medical Food.

**TO ORDER FOR THE CLINIC, PHARMACY, OR INITIATE PATIENT ONLINE**  
**ORDERING CONTACT NEURORESEARCH CENTERS +1-218-626-2220 1150**  
**88TH AVE W, DULUTH, MN | [BRENDA@NEUROASSIST.COM](mailto:BRENDA@NEUROASSIST.COM)** Mucuna Medical Food and R&R are medical food administered enterally under the supervision of a healthcare professional for the specific dietary management of **hypodopaminergic** or **hypo-serotonergic** conditions or states.