

DISCLAIMER: This document is for practitioners only. Indications and dosing recommendations are guidelines based on research. It is up to the healthcare practitioner to decide for their individual patient what is optimal.

INGREDIENTS

Methylene Blue USP: 50 mg per troche

DELIVERY MECHANISM

Troscriptions' buccal troches are scored for easy titration and are typically placed between the upper cheek and gums. However, due to the dose of methylene blue in Tro+ Blue, this troche should be swallowed.

MECHANISMS OF ACTION

Methylene Blue: See full information on Tro+ Blue with references here

See Webinar on Tro+ Blue here

INDICATIONS

Calibrated formula for:

- 1 Immediate or significant need for mitochondrial support
- 2 Acute and/or severe Inflammation
- 3 Infection: Viral, Fungal, Bacterial, and Protozoal
- 4 Infection prophylaxis
- 5 Biofilms
- 6 Trauma
- 7 Ischemia
- 8 Headaches
- 9 Interstitial Cystitis
- 10 Chronic Inflammatory conditions

DOSING

Range of 25mg QOD to 200mg daily.

Consider starting at Just Blue dosing in those very sensitive

Examples*

- 1 Acute viral, fungal, or bacterial infection: 25-100mg BID X 5 days, consider in conjunction with photodynamic therapy (600- 680nm). Higher dosing may be needed for some infections.
 - A. Ex. Bartonella: 25-100mg BID
- 2 Infection Prophylaxis: 25mg QOD to 25-50mg BID X 5 days
 - A. Ex. UTI prophylaxis: 4mg daily to 25-50 mg QOD
 - B. Ex. Viral syndrome: 25-50mg BID X 5 days



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- 3 Acute ischemic or traumatic episodes (as an abortive and/or mitigation strategy): 100 to 200mg X 1 dose, repeat in 4 to 6 hours depending on severity. Post-event, 25 to 50mg BID X 5 to 7 days
- 4 Chronic conditions: Chronic Fatigue Syndrome/Myalgic Encephalitis, Fibromyalgia, Lyme, Mold, Long COVID, and others. Most common dose is 25 50mg daily but may need to start lower (i.e. Just Blue dosing) and work up to higher dosing.
 - A. Ex. Interstitial Cystitis: 25 to 50mg BID
 - B. Ex. Mold, Long Covid, CFS: Start at 25mg QOD for the first week, then increase to daily the following week, titrating up weekly from there to a max dose of up to 200mg per day.

*Note the above ranges are guidelines only based on research, much of it in animals, and clinical experience from practitioners on the Troscriptions team and their colleagues around the globe. Please take them as guidelines only and if you find different dosing works more optimally, please let us know at buccalup@troscriptions.com. We appreciate your feedback!

INTERACTIONS

- 1 SSRI and SNRI medications: Symptoms are unlikely but should be monitored closely.
- 2 Serotonergic pyschedelics (LSD, psilocybin). Abstain from Tro+Blue for 24 hours prior and after
- 3 Caution with dopaminergic drugs (Sinement for PD) as MB increases dopamine slightly, symptoms unlikely.
- 4 Caution with serotonergic supplementation (i.e. high dose 5HTP), symptoms unlikely
- 5 See full list linked here.

POSSIBLE SIDE EFFECTS

- 1 Blue urine: Methylene Blue concentrates in the urine. This is a benign side effect.
- 2 Headaches (typically means need to start at a lower dose)
- 3 Normal Biofilm disruption
- 4 Gastric Ulceration
- 5 Oxidative stress
- 6 G6P Deficiency and induced hemolysis (very unlikely at this dosing)
- 7 HTN: Some patients will have increase in their blood pressure transiently althoug those with an an inflammatory component to their HTN may see an improvement.
- 8 The presence of methylene blue in the blood may result in an underestimation of the oxygen saturation reading by pulse oximetry

*We recommend short-term use of Tro+ Blue due to the above under most circumstances.

CONTRAINDICATIONS

- 1 Pregnant or Breastfeeding
- 2 Hepatic or renal impairment
- 3 Any known sensitivity to methylene blue or thiazine dyes



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INACTIVE INGREDIENTS

Inactive ingredients: Polyethylene Glycol (PEG), stevia extract, luo han extract, peppermint, silica, Bitter-Bloc $^{\text{TM}}$

- 1 Polyethylene Glycol: See full article here
 - A. Suspends active ingredients in the buccal troche for slow release
 - B. Very low dose (< 500 mg/troche)
 - C. Not absorbed out of the GI system (fully excreted)
 - D. Pharmaceutical grade and tested
- 2 Silica: Food Grade Silica. See more information here
- 3 Bitter Bloc: See more information here
 - A. Non-GMO
 - B. Preservative and Dye Free
 - C. GRA Status/Organic
 - D. Mushroom derived
- 4 Luo han: Monk Fruit
- 5 Stevia: Natural sweetener
- 6 Peppermint