How to Use the Wiley Protocol Testosterone for Women®

You have received one mylar package.

The orange mylar package contains the Wiley Protocol Testosterone for Women Prescription: 3 syringes of Testosterone with gray plungers and orange lines on the barrel. The syringes hold a total of 3cc's or 30 "lines" or 30 mg meaning each 0.1cc or line is 1mg of testosterone in a cream base.

On the back of the bag, you will see the Dosing Schedule which has been prescribed by your physician for each hormone daily amount.

Which Calendar to Use?

There are two calendars that apply to your experience with The Basic Wiley Protocol®: Lunar Calendar® and Personal Calendar. If you are on the estrogen and progesterone Basic Wiley Protocol® you already have a schedule.

• The doses shown on each day of this calendar are for Testosterone hormone only.
• You will begin this medication on day one of your cycle.
• If you are not on The Wiley Protocol® Estrogen and Progesterone, you will follow the Lunar Calendar Days or own Personal Cycle corresponding to 28 doses.
• Should your regular cycle occur early prior to "Day One" of the next Personal Calendar Day, you will start your testosterone rhythm over again at Day One as well.

Effective Application of the Creams

Place the plunger on the palm of your hand and place your first and second fingers on the barrel. Push the plunger carefully with the thumb of the same hand. The plunger can be sticky and unpredictable. You can give the plunger a quarter twist in either direction. Do not use your thumb to push out the cream.

Measure out the lines for your first application of Testosterone. Make a dot of cream on your hand for each line of hormone that you measure out to practice controlling the plunger in the syringe.

Note: Each tiny line on the syringe is 0.1ml. Testosterone is used morning and night.

Deposit the Testosterone cream in your hand and use your hand to work into your skin in the location shown at left.

Rub the cream into your skin well, until it disappears. DON'T MIX the Testosterone cream, or layer over with other creams of any kind.

IMPORTANT:

• Do not bathe for forty minutes after applying the hormones.
• Do not exercise for two hours after applying your hormones; doing so might cause you to sweat the hormones back out of your fat base.

• Cover the area of application with clothing after application if you are in direct skin-to-skin contact children, animals, or others until most of it is absorbed (1 hour).

The First Three Months

There is an adjustment period as your system adapts to the prescription.

Precautions:

Testosterone treatment for longer than 6 months has not been studied. The side-effects for the Wiley Protocol Testosterone for Women® are unknown. These common side effects have been reported for the leading pharmaceutical combination oral product Estratest:

Abdominal cramps, acne, allergic reactions, anxiety, bladder problems, cervical changes, clotting disorders, deepening of the voice, depression, dizziness, enlarged clitoris, enlarged fibroids, gallbladder disease, hair loss on scalp, hair growth on face, headache, high blood sugar, high cholesterol, liver, high blood pressure, disorders, menstrual problems, migraine, nausea, sex drive changes, skin eruptions, male-pattern hair loss from the scalp, male-pattern hair growth on the face and body, anger and hostility problems, shrinking breast size.
**PRECAUTIONS:**

- Androgens may DECREASE blood glucose, and therefore lowering insulin requirements in diabetic patients as well as LOWERING blood pressure, changing dosages of all classes of blood pressure medication over time.
- Androgens may increase hemoglobin and hematocrit, reflective of increases in red blood cell mass, may require lowering or discontinuation of testosterone. Higher red blood cell mass may increase the risk for a thromboembolic event.
- Use of testosterone with ACTH or corticosteroids may result in increased fluid retention, particularly in patients with cardiac, renal, or hepatic disease.
- Changes in anticoagulant activity may be seen with androgens. More frequent monitoring of INR and prothrombin time is recommended.
- Androgens may decrease levels of thyroxin-binding globulin, resulting in decreased total T4 serum levels and increased resin uptake of T3 and T4. Free thyroid hormone levels remain unchanged.

**KEEP HORMONES AWAY FROM PREGNANT OR BREAST FEEDING WOMEN. TESTOSTERONE MAY CAUSE FETAL HARM**

Any serious “Adverse Events” such as newly diagnosed illnesses occurring while taking the Wiley Protocol for Women® must be reported to oncologist@thewileyprotocol.com

By month two, it is time to start adjusting the dose for your individual needs. Blood testing is in order at this juncture to give your doctor the information to correlate any remaining symptoms with the amounts of hormone you are receiving.

**Blood Testing Procedure**

By month two and every six months, or as needed thereafter, you are to get your blood tested. Blood testing is done always on day 13 or 14. There are cream application issues with regard to blood testing, and we have two options for making sure the tests are accurate and comparable from test to test.

Option 1: First Thing in the Morning
Get up and go straight to the lab before you put on any hormones.

Option 2: Three to four hours after hormone application

**Contraindicated Medicines and Supplements**

FYI: All prescription medications and supplements, available to the public, work across hormone receptors to be effective.

Therefore, all medications, supplements, and herbs can have an effect on hormone receptors.

- Lignans, Red Clover, Flax, Chrysin, oral DHEA, Selenium, Zinc, Ginsing, Mawaung, Ephedra, Ginkgo, Grapefruit juice, high fiber herbs such as Fennel Seed, St. John’s Wort, isoflavones, Stinging Nettle, and Rye Pollen. Some plant extracts that have also been studied include Beta Sitosterol, Genistein, Daidzein, Quercitin, Rosaminic acid, Lycopene, Licorice root, Yohimbe Bark, Damiana, Sarsaparilla, Muira Puama, Horny Goat Weed, Suma, Schizandra, tribulis, Ashwagandha, Korean Red Ginseng, Capsicum, Codonopsis, Gotu Kola, Cinnamon, Cocculus root, Vamsa Rochna, Wisa, and Catuaba all have hormonal effects and could interfere with the Protocol.
- Check constituents of all “combination” products from health food stores, naturopathic, chiropractic and Oriental Medicine practitioners.

Medications that are contraindicated on the Wiley Protocol include:

Medroxyprogesterone acetate, Megace, Ketoconazole and Aminogluthethimide. Abarelix is an example of a GnRH antagonist, while the GnRH agonists include Leuprolide (Lupron), Goserelin (Zolade), Antiandrogens: Triptorelin, Buserelin, Casodex, Diethystilbesterol (DES), Ethinyl Estradiol. Testosterone may enhance the effects of Clodipogrel (Plavix®) including Indomethacine and Warfarin.

The following products have been shown to present no problems with the Wiley Protocol: Magnesium, B-vitamins, Omega 3’s and 6’s, Lithium, Anti-psychotic drugs, Anti-epilepsy drugs, and common sleep medications like Ambien, Tylenol PM, Melatonin, Restoril, Xanax, and Zantac.

**IN CHOOSING THE WILEY PROTOCOL® YOU HAVE CHOSEN AN INDIVIDUALLY STANDARDIZED, COMPOUNDED, NATURAL HRT REGIMEN PRESCRIBED BY YOUR DOCTOR AND MADE WITH FDA APPROVED PHARMACEUTICAL GRADE INGREDIENTS.**

**DISCUSS ALL QUESTIONS AND DECISIONS ABOUT YOUR HEALTH WITH YOUR DOCTOR.**

**DO NOT MAKE CHANGES TO YOUR WILEY PROTOCOL WITHOUT DISCUSSING WITH YOUR PHYSICIAN FIRST.**

[http://www.thewileyprotocol.com](http://www.thewileyprotocol.com)

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