The Compounding Lab
AOD 9604 (advanced Obesity Drug)

MOLECULAR FORMULA $C^{78}H^{123}N^{23}O^{23}S^{2}$

MOLECULAR WEIGHT 18115.1

SEQUENCE Tyr-Leu-Arg-Ile-Val-Gln-Cys-Arg-Ser- Val-Glu-Gly-Ser-Cys-Gly-Phe

AOD 9604 is a modified form of amino acids 176-191 of the GH polypeptide.

Investigators at Monash University discovered that the fat-reducing e ects of GH appear to be controlled by a small region near one end of the GH molecule. This region, which consists of amino acids 176-191, is less than 10% of the total size of the GH Molecule and appears to have no e ects on growth or insulin resistance.

This hypothesis was proven in animals to a tremendous degree with specimen losing a significant amount of fat mass. However, in phase three clinical trials the peptide didn't mean its confidence interval. Instead, it is now being studied for its e ect on bone and cartilage.
AOD 9604 possesses many other regenerative properties associated with growth hormone. Currently trials are underway to show the application of AOD 9604 in osteoarthritis, Hypercholesterolemia, bone and cartilage repair. AOD 9604 has an excellent safety profile, recently obtaining Human GRAS status in the USA.

PROTOCOL

CONTENT & POTENCY
INJECTABLE: 1200mcg/ml subcutaneous injectable provided in a 5ml vial.

SUGGESTED DOSAGE
INJECTABLE: Inject 0.25ml subcutaneously once daily for 20 days.

CLINICAL RESEARCH

Safety and Tolerability of the Hexadecapeptide AOD 9604 in Humans

Heike Stier, Evert Vos, David Kenley

Background: The human growth hormone (hGH) has fat loss properties making it a potential candidate to treat obesity. AOD 9604 is a peptide fragment of the C-terminus of hGH (Tyr-hGH177-191), which harbors the fat reducing activity of hGH, without its negative effects. In this paper the safety data of AOD 9604 obtained in clinical trials are summarized.

Methods: Six randomized, double-blind, placebo-controlled trials were performed with AOD 9604. Special focus was given to undesired effects associated with hGH treatment: increases in IGF-1 levels, insulin resistance, and impaired glucose tolerance. Blood samples were analyzed for presence of antiAOD 9604 antibodies to exclude immunogenicity.

Results: AOD 9604 had no effect on serum IGF-1 levels, which confirms the hypothesis that AOD 9604 does not act via IGF-1. Results of oral glucose tolerance test demonstrated that, in contrast with hGH, AOD 9604 has no negative effect on carbohydrate metabolism. There were no anti-AOD 9604 antibodies detected in any of the patients selected for antibody assay. In none of the studies did a withdrawal or serious adverse event occur related to intake of AOD 9604.

Conclusion: AOD 9604 displayed a very good safety and tolerability profile indistinguishable from placebo. AOD 9604 did not result in any of the adverse effects associated with full-length hGH treatment.

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