



# CAGRILINTIDE

an amylin analogue

Amino Acid Sequence: KCNTATCATQRLANFLVHSSNNFGAILSSTNVGSNTY (1-37)

## Dosage Recommendations

- Weekly
- 5Days/Week
- Daily

### Stand Alone Protocol

#### Starting Dose:

0.25 mg subcutaneously once a week for 4 weeks, then 0.5 mg subcutaneously once a week.

If additional glycemic control is needed after at least 4 weeks receiving 0.5 mg dose subcutaneously once a week, may increase to 1 mg subcutaneously once a week

#### Maintenance Dose:

1 to 2 mg subcutaneously once a week

#### Maximum Dose:

2 mg/week

### Best Combined with GLP-1 Agonist

#### Starting Dose:

250 mcg subcutaneously once to twice a week (away from GLP dosage). Research suggest this protocol may help jump start a stall, or reactivate the satiety sensor.

#### Maximum Dose:

2 mg/week.

#### Don't Exceed:

a concentration that yields more than six doses per vial for individual patients, as this may compromise the stability of BAC water. This guideline is intended for clinical settings where lower dosages are administered across multiple uses.\* Clinicians are advised that rapid titration may not be necessary, as a slower, more gradual increase in dosage can allow for better monitoring of patient tolerance and response. This approach minimizes potential side effects and provides a safer experience for patients, especially for those new to peptide therapy.

MG	BAC Water/ML	Dosage (mg)	Insulin Needle Units	Total per vial
8	3	0.25	10	32*
		0.5	20	16*
		1	40	8*
		1.5	55	5
		2	75	4

### Useful Information

Class: Long-acting amylin analogue

#### Mechanism of Action:

Cagrilintide is a synthetic amylin receptor agonist designed to mimic the endogenous hormone amylin, which is co-secreted with insulin from pancreatic  $\beta$ -cells. It works by slowing gastric emptying, reducing food intake, and increasing satiety through central appetite-regulating pathways. When used alone—or especially in combination with GLP-1 agonists like Semaglutide—it promotes significant and sustained weight reduction and improved metabolic control.

### Constipation Relief

Adding 200 mg of magnesium glycinate at night is recommended by some users to relieve constipation, a potential side effect.

The provided units may be adjusted slightly for practical administration purposes. Minor variations in dosage are not expected to significantly impact the patient's response.