Tirzepatide + B6

Dual GIP/GLP-1 agonist with Pyridoxine 10 mg/mL · 12.5 mg/mL tirzepatide · Weight / glycemic management

SubQ Injection | Once Weekly | 12.5 mg/mL + B6 | FCC Anti-Nausea Formulation

INDICATION & FCC FORMULATION

Compounded tirzepatide for chronic weight management or T2DM. Tirzepatide's dual GIP/GLP-1 mechanism produces greater weight loss than GLP-1 alone; titration is more aggressive given strong appetite suppression. Eligibility: BMI ≥ 30, or ≥ 27 with weight-related comorbidity. For T2DM, typically used as adjunct after metformin.

FCC Formulation Note: Compounded with **Pyridoxine HCl 10 mg/mL (Vitamin B6)** to reduce nausea — the leading cause of treatment discontinuation in the GLP-1 class. B6's antiemetic effect is well-established and does not affect the pharmacology of the active agent. Each volume below delivers the listed mg of active drug plus 10 mg of pyridoxine per mL drawn.

STANDARD TITRATION SCHEDULE

WEEKS 1–4	WEEKS 5–8	WEEKS 9+	MAXIMUM
2.5 mg	**5 mg**	**7.5–10 mg**	**15 mg**
Once weekly	Once weekly	Once weekly	Once weekly

TITRATION PRINCIPLES

Increase by 2.5 mg every 4 weeks as tolerated, up to 15 mg weekly maximum. The 2.5 mg starting dose is for tolerability — not therapeutic effect. Most patients see meaningful weight loss at 5–10 mg; 15 mg reserved for plateau or partial response. Hold or step down for significant GI side effects. Re-titrate from lower step if therapy is interrupted >2 weeks.

VOLUME REFERENCE (TIRZEPATIDE 12.5 MG/ML · WITH PYRIDOXINE 10 MG/ML)

TIRZ DOSE	VOLUME TO DRAW	U-100 SYRINGE	B6 CO-DELIVERED	NOTES
2.5 mg	**0.20 mL**	**20 units**	2.0 mg	Starting dose
5 mg	**0.40 mL**	**40 units**	4.0 mg	Step 2
7.5 mg	**0.60 mL**	**60 units**	6.0 mg	Step 3
10 mg	**0.80 mL**	**80 units**	8.0 mg	Common maintenance
15 mg	**1.20 mL**	**120 units**	12.0 mg	Max · 1-mL syringe or split

15 mg requires >1 mL — split into 2 injections or use 1-mL syringe. B6 co-delivery shown per dose drawn.

CAUTIONS & COUNSELING

CONTRAINDICATIONS & CAUTIONS

- Personal/family hx of MTC or MEN-2
- Hx of pancreatitis — caution
- Severe gastroparesis or GI motility disorders

COUNSELING

- SubQ abdomen, thigh, or upper arm — rotate sites
- Same day weekly; flexible by ±2 days
- Refrigerate; do not freeze