

TIRZEPATIDE 30 MG FOR INJECTION

SELF-MIX VIAL OR PRE-FILLED PEN

PATIENT INFORMATION LEAFLET

Read all of this leaflet carefully before you start using this medicine because it contains important information for you.

- Keep this leaflet. You may need to read it again (or access it online via the hosted link provided by your supplier or healthcare provider).
- If you have any further questions, ask your doctor, pharmacist, or healthcare provider.
- This medicine has been supplied for you only. Do not pass it on to others. It may harm them, even if their signs of illness are the same as yours.
- If you get any side effects, talk to your doctor or pharmacist. This includes any possible side effects not listed in this leaflet. Report side effects online if applicable in your region.

1. What Tirzepatide is and what it is used for

Tirzepatide is a dual glucose-dependent insulinotropic polypeptide (GIP) and glucagon-like peptide-1 (GLP-1) receptor agonist used for weight management in adults with obesity or overweight with weight-related conditions, and for improving blood sugar control in adults with type 2 diabetes (as an adjunct to diet and exercise). It reduces appetite, slows gastric emptying, increases insulin secretion, helps regulate blood sugar and energy balance, and supports significant weight loss.

It is available as a self-mix vial kit (30 mg freeze-dried (lyophilised) tirzepatide powder, reconstituted with the provided 3 ml bacteriostatic water to approximately 10 mg/ml) or a pre-filled injector pen (30 mg tirzepatide dissolved in 3 ml solution; 10 mg/ml). Both are supplied for research, investigational, compounded, or off-label use under strict medical supervision only. Tirzepatide is approved in many countries (as Mounjaro® or Zepbound®) for type 2 diabetes and chronic weight management, but these specific self-mix vial and 30 mg/3 ml pen formats may align with compounded or investigational presentations. Use only as directed by a qualified healthcare professional.

2. What you need to know before you use Tirzepatide

Do not use Tirzepatide if:

- You are allergic to tirzepatide, benzyl alcohol (preservative in the bacteriostatic water and in the pen solution), or any of the other ingredients.
- You or any family member has a history of medullary thyroid carcinoma (MTC) or Multiple Endocrine Neoplasia syndrome type 2 (MEN 2).
- You have a personal or family history of certain thyroid cancers.
- You have severe gastrointestinal disease (e.g., severe gastroparesis) or a history of pancreatitis.
- You are pregnant, planning pregnancy, or breastfeeding.
- You are under 18 years of age (pre-filled pen leaflet adds: "or under 10 for certain approved indications").

Warnings and precautions – talk to your doctor before using Tirzepatide if you have:

- History of pancreatitis, gallstones, or gallbladder disease.
- Kidney problems.
- Diabetic retinopathy or other eye issues.
- Depression, suicidal thoughts, or mental health conditions.
- Heart rate issues (tirzepatide can cause increases in heart rate).
- Known allergy or sensitivity to benzyl alcohol (a preservative in the formulation), which may cause local reactions or, rarely, more serious effects in sensitive individuals.

Rapid weight loss may lead to gallstones, electrolyte imbalances, muscle loss, or excess/loose skin. Monitor closely and discuss supportive measures (e.g., nutrition, hydration, exercise). GHK-Cu is highly recommended for skin tightening due to its collagen-stimulating effects, improving skin quality, elasticity, and supporting hair/nail regrowth.

Other medicines and Tirzepatide

Tell your doctor if you are taking oral medications (absorption may be delayed), insulin, sulfonylureas or other diabetes medicines (increased risk of low blood sugar), or other weight-loss or GLP-1/GIP-based therapies.

Pregnancy and breast-feeding

Do not use if pregnant or breast-feeding. Use effective contraception during treatment and for a period after stopping (consult your doctor).

Driving and using machines

Tirzepatide may cause dizziness, fatigue, nausea, or low blood sugar (especially if combined with other glucose-lowering agents). Be cautious until you know how it affects you.

3. How to use Tirzepatide

Always use this medicine exactly as your doctor or healthcare provider has told you. Check with them if unsure.

If you have the self-mix vial: kit contents

- 1 vial containing 30 mg freeze-dried tirzepatide powder
- 1 vial containing 3 ml bacteriostatic water
- 1 × 3 ml syringe with needle (for reconstitution)
- 1 extra sterile needle (for venting)
- 5 × insulin-type syringes (for injection)



Self-mix vial: reconstitution (perform only once, before first use)

Reconstitute in a clean, sterile environment. Wash hands thoroughly and use alcohol swabs to clean vial tops.

1. Remove the plastic caps from both vials. Wipe the rubber stoppers with an alcohol swab and allow to dry.
2. Using the 3 ml syringe with needle, draw up a small amount of air (approximately 3–4 ml) and inject it into the bacteriostatic water vial to create positive pressure. This makes it easier to draw up the liquid.
3. Invert the bacteriostatic water vial and draw up the entire 3 ml of bacteriostatic water into the syringe.
4. **Vent the peptide powder vial first** (the vial has strong negative pressure/vacuum):
 - Take the **extra sterile venting needle** and insert it into the rubber stopper of the tirzepatide powder vial. This allows air to enter and eliminates the vacuum.
 - **Keep the venting needle in place** throughout the next step.
 - Insert the reconstitution syringe needle into the vial (beside the venting needle).
 - Slowly and gently inject the 3 ml of bacteriostatic water, directing the stream along the inside glass wall of the vial (not directly onto the powder).
 - Important: Do not push the venting needle in too deep — keep it just through the rubber stopper to prevent liquid from leaking out of the venting needle.
5. Once all the water has been added, remove both needles. Gently swirl or roll the vial between your palms (or on a flat surface) until the powder is completely dissolved. The solution should be clear. **Do not shake vigorously**, as this may damage the peptide or create excessive foam.
6. Once fully dissolved, the vial now contains 30 mg tirzepatide in 3 ml solution (**concentration: 10 mg/ml**).
7. Label the vial with the reconstitution date. Store in the refrigerator (2–8°C).

Self-mix vial: drawing up doses from the reconstituted vial

Before drawing any dose:

- Inject an equal volume of air into the vial first (e.g., inject 0.25 ml air before drawing 0.25 ml solution). This creates positive pressure and makes withdrawal easier.

Dosing (using insulin syringes)

Each insulin syringe is typically marked in units (U-100: 100 units = 1 ml). At 10 mg/ml concentration:

- **1 mg = 10 units** (0.1 ml)
- **2.5 mg = 25 units** (0.25 ml)
- **5 mg = 50 units** (0.5 ml)
- **7.5 mg = 75 units** (0.75 ml)
- **10 mg = 100 units** (1 ml)
- **12.5 mg = 125 units** (1.25 ml)
- **15 mg = 150 units** (1.5 ml)

Standard titration schedule – self-mix vial (approved protocol):

- **Weeks 1–4: 2.5 mg** (25 units)
- **Weeks 5–8: 5 mg** (50 units)
- **Weeks 9–12: 7.5 mg** (75 units)
- **Weeks 13–16: 10 mg** (100 units)
- **Weeks 17–20: 12.5 mg** (125 units)
- **Week 21 onward: 15 mg** (150 units) — maximum recommended dose

Your doctor may adjust the speed of titration based on tolerance.

Maintenance & Limits (both presentations)

- Self-mix vial: most patients are maintained on 10 mg, 12.5 mg, or 15 mg weekly.
- Pre-filled pen: maintenance doses commonly range from 5 mg to 15 mg weekly, individualised based on response and tolerance.
- Do not exceed 15 mg (150 units on the self-mix syringe / 150 clicks on the pen) at any time. Higher doses are not recommended due to increased risks without proportional benefits.

If you have the self-mix vial: how to inject

1. Wash your hands thoroughly with soap and water.
2. Clean the injection site (abdomen, thigh, or upper arm) with an alcohol swab and let it dry.
3. Gently swirl the reconstituted vial if needed. Do not shake.
4. Inject an equal amount of air into the vial first, then draw up the exact prescribed dose. Tap the syringe gently and push out any air bubbles.
5. Pinch a fold of skin at the cleaned injection site.
6. Insert the needle at a 45° to 90° angle (90° is usually best).
7. Slowly push the plunger to inject the solution.
8. Hold the needle in place for 5–10 seconds after injecting.
9. Withdraw the needle at the same angle.
10. Gently press the injection site with a clean cotton ball or alcohol swab if needed. Do not rub.
11. Dispose of the used syringe safely in a sharps container.
12. Rotate injection sites each week to avoid irritation or lumps.

If you have the pre-filled pen

This is a pre-filled injector pen containing 30 mg tirzepatide in 3 ml solution (10 mg/ml concentration). Administer as a once-weekly subcutaneous injection.

The pen uses a dial/click mechanism for precise dosing. Each click typically delivers 0.1 mg (based on common configurations for similar 10 mg/ml pens: 300 clicks total = 30 mg). Confirm your specific pen's calibration guide (included with the device or from your supplier/provider), as exact click-to-dose may vary slightly by design. A transparent window usually shows remaining volume.

Pre-filled pen: dosing and use

Standard titration schedule – pre-filled pen (based on approved protocols for weight management/type 2 diabetes):

- Weeks 1–4: 2.5 mg (25 clicks)
- Weeks 5–8: 5 mg (50 clicks)
- Weeks 9–12: 7.5 mg (75 clicks) — if additional control needed and tolerated
- Weeks 13–16: 10 mg (100 clicks) — if needed
- Weeks 17–20: 12.5 mg (125 clicks) — if needed
- Week 21 onward: 15 mg (150 clicks) — maximum recommended dose

How to inject: Inject subcutaneously (e.g., abdomen, thigh, or upper arm). Rotate injection sites each week. Inject on the same day and time each week (with or without food). Prime the pen if required (follow pen instructions). Dial/click to your dose, inject, and hold for a few seconds after injection.

If you miss a dose: Administer as soon as possible if within 4 days (96 hours); otherwise, skip and resume on the next scheduled day. Do not double dose.

4. Possible side effects

Like all medicines, Tirzepatide can cause side effects, although not everybody gets them. Most are gastrointestinal, dose-related, and often improve with time or slower titration.

Very common (may affect more than 1 in 10 people): Nausea, vomiting, diarrhoea, constipation, abdominal pain or discomfort.

Common: Decreased appetite, indigestion, fatigue, headache, dizziness, increased heart rate, injection site reactions (redness, itching, irritation—may be influenced by the preservative benzyl alcohol in some individuals).

Serious (rare but seek immediate medical help): Severe persistent abdominal pain (possible pancreatitis or gallbladder issues); signs of low blood sugar (shakiness, sweating, confusion—if combined with diabetes meds); allergic reactions (rash, swelling, difficulty breathing—including potential reactions to benzyl alcohol); gallbladder problems (upper abdominal pain, jaundice, fever); mood changes or suicidal thoughts (rare—report immediately); thyroid tumours (boxed warning: risk in animal studies; monitor for neck lumps/swelling).

In clinical trials, side effects were mostly mild to moderate, with higher incidence during escalation. Discontinuation rates varied but were generally low with gradual titration. Heart rate increases were observed but often transient.

Report any side effects to your doctor.

5. How to store Tirzepatide

- Keep out of sight and reach of children.
- Do not use if the solution is cloudy, discoloured, or contains particles.
- If you have the self-mix vial: Before reconstitution, store the powder vial and bacteriostatic water at room temperature or as per label, protected from light. After reconstitution, refrigerate the vial (2–8°C). Do not freeze. Use within 4–8 weeks (ideally 4 weeks for best stability). Dispose of used syringes safely in a sharps container.
- If you have the pre-filled pen: Store the pen in a refrigerator (2–8°C). Do not freeze. Protect from light and keep in the original packaging. If needed for short periods (e.g., travel), it may be stored at room temperature (below 30°C) for a limited time—check pen label or supplier instructions. Do not use after the expiry date. Dispose of used pens safely (follow local regulations for sharps disposal).

6. Contents of the pack and other information

What Tirzepatide contains:

- Self-mix vial – active substance: Tirzepatide 30 mg (lyophilised powder).
- Self-mix vial – diluent: 3 ml bacteriostatic water containing benzyl alcohol as preservative.
- Pre-filled pen – active substance: Tirzepatide 30 mg in 3 ml solution (10 mg/ml).
- Pre-filled pen – other ingredients: Benzyl alcohol (preservative), and other excipients as per formulation (e.g., buffers, stabilisers—refer to pen label or supplier for the complete list).

Pack: Self-mix vial kit with 1 powder vial, 1 bacteriostatic water vial, 1 reconstitution syringe + needle, 1 extra venting needle, and 5 insulin syringes; or pre-filled injector pen (multi-dose design, total capacity 30 mg / 300 clicks at 0.1 mg per click).

Supplier / Hosting Note: This leaflet is hosted online for easy access and updates. Always refer to the latest version at the provided link. This is not a marketed product in this exact format; supplied for investigational/research use or compounded presentation.

This leaflet was last revised in September 2026.

Important note: This leaflet is informational and not a substitute for professional medical advice. Always consult a healthcare provider before starting, continuing, or adjusting treatment. Regular monitoring (e.g., blood tests) is essential. Stay hydrated, follow a balanced diet, and incorporate physical activity as advised.

If symptoms persist, worsen, or you experience severe side effects, contact your doctor or seek emergency care immediately.

