DNP: Musings of Conciliator

Introduction

DNP, chemical name 2,4-Dinitrophenol is sometimes used as a (very effective) fat burner by bodybuilders, other athletes, and even recreational lifters. There is one person who, over the years, has proven to have a wealth of knowledge on DNP. That person used to post on various fitness and steroid forums with the under the name Conciliator. I have heard it recommended that if one wanted to learn about DNP they should literally google it along with Conciliator's name. With this paper, I wanted to take much of what I could find that Conciliator posted over the years, and put it in one place. If it is not clear enough already, this paper is not my own primary research, but rather a collection of Conciliator's words. Much of what I have found is Conciliator responding to other forum members' posts. Be aware that some of these posts are nearly 10 years old, so some of the reference links may be broken by now. I also left them as written so unless you see black text (where I felt I needed to clarify something) everything is verbatim as it was originally posted.

The way I will lay this out will be by quoting a forum member in red, providing the link, quoting Conciliator's response in green, and providing that link.

And lastly, this is intended to be a research tool. I am in no way recommending the usage of DNP or any supplements.

Posts related to dosing

I've read Conc say in other threads that every 100mg is a 10% boost in metabolic rate, as a general rule of thumb.
https://thinksteroids.com/community/threads/dnp-boost-in-relation-to-dose.134297557/#post-725794

Conciliator's response (https://thinksteroids.com/community/threads/dnp-boost-in-relation-to-dose.134297557/#post-726185)
According to the original clinical research (Cutting and Tainter's work), every 100mg of crystal DNP per day will increase metabolic rate an average of 11%. Note that this is only an average. Individual sensitivity to it will vary greatly. Also, this assumes crystal DNP content (powder DNP, which is stronger, is about 15% per 100mg). Finally, this already takes into account the long half-life and indicates the increase in metabolic rate after the drug accumulates (so after 3-5 days at a given dose).

So, for example, a daily dose 400mg of powder DNP (after it accumulates) will increase metabolic rate an average of 60%. 400mg/day of crystal DNP will increase metabolic rate an average of 44%.

I think he also said that the increase in dose does not proportionally increase the metabolic rate.
https://thinksteroids.com/community/threads/dnp-boost-in-relation-to-dose.134297557/#post-725834

Conciliator's Response
(https://thinksteroids.com/community/threads/dnp-boost-in-relation-to-dose.134297557/#post-726186
)
I don't think I said that. It appears to be pretty proportional. Here's an image constructed from the actual clinical data (based on crystal DNP).


link unfortunately broken.

Also, if you're wondering why the 500mg/day group was found to have a reduced effect compared to the 400mg/day group, it's because the higher dose was only used in those who were tolerant to the lower doses. Thus, it underestimates the increase in metabolic rate and weight loss for a person of average tolerance to DNP.

If you have a link to where you got this graph (the graph being spoken of is the broken link above) I would much appreciate it if you posted for me
https://thinksteroids.com/community/threads/dnp-boost-in-relation-to-dose.134297557/#post-728421

Conciliator's response
(https://thinksteroids.com/community/threads/dnp-boost-in-relation-to-dose.134297557/#post-728426)
The image comes from Clapham JC. Treating obesity: pharmacology of energy expenditure. Curr Drug Targets. 2004 Apr;5(3):309-23.
Abstract: Treating obesity: pharmacology of energy expenditu... [Curr Drug Targets. 2004] - PubMed result: http://www.ncbi.nlm.nih.gov/pubmed/15058315
Full text:
[ame]http://rapidshare.com/files/425307103/Treating_Obesity_-_Pharmacology_of_Energy_Expenditure.pdf[/ame]

The underlying data for the image comes from Tainter, M. L.; Stockton, A. B. and Cutting, W. C. Dinitrophenol in the treatment of obesity: Final Report. J Am Med Assoc. 1935;105(5):332-337.
Excerpt: http://jama.ama-assn.org/cgi/content/summary/105/5/332
http://jama.jamanetwork.com/article.aspx?articleid=1154261

why would you want to do dnp ...imo its too much for too much of a risk... diet+cardio should be good enough.. and maybe add clen /eca...
but hey its ur choice
http://forums.steroid.com/anabolic-steroids-questions-answers/294461-dnp-best-article-ever.html#post3410735

Conciliator's Response
(http://forums.steroid.com/anabolic-steroids-questions-answers/294461-dnp-best-article-ever.html#post3412054)
The risk is proportional to the dosage. At a low dosage of 300mg/day, metabolic rate is increased, on average, an impressive 30%. Side effects at this dose are few to none. DNP also provides the benefit of fat loss without appreciable muscle loss. By lowering insulin levels and mobilizing FFA's, DNP likely works as a repartitioning agent (much like clen).

When you're on a non-retarded dosage, the only real risk is catracts, which were reported in the 1930's only 3 times in men. With proper anti-oxidant and hepatic function, they shouldn't be a problem. Supplemental antioxidants would be expected to help prevent them in those few who are susceptible. It's a risk, but a remote risk in my mind.

I agree with you, It shouldn't be done at more than 300mg/day
do you have a list of those "supplemental antioxidants?"
http://forums.steroid.com/anabolic-steroids-questions-answers/294461-dnp-best-article-ever.html#post3412443

Conciliator's Response
(http://forums.steroid.com/anabolic-steroids-questions-answers/294461-dnp-best-article-ever.html#post3412539
I wouldn't give absolute numbers due to the great degree of variation in personal sensitivity, but that range (200-400mg/day of actual DNP) seems about right for most people.

First, I want make clear that DNP has been shown to REDUCE the formation of mitochondrial free radicals. People often have the false idea that with high rates of fat oxidation, mitochondrial oxidative stress is heightened. However, as an uncoupler, DNP decreases the mitochondrial membrane potential, which in turn reduces the "crowding" of electrons and the genesis of free radicals. The research on this is clear.

So why do we take antioxidants with DNP? Because a rare second order metabolite of DNP (a semiquinone) can cause cataracts. Most people (99%-99.9%) are able to neutralize this pro-oxidant without any problems. The other few probably have some deficiency or genetic mutation that makes them susceptible. Antioxidants can be thought of as insurance against this for those unlucky few who are susceptible. They're hardly mandatory though. Thousands of people have taken DNP without antioxidants and have done just fine. My typical recommendation is simple: a normal daily dose of the commons - vit C, vit E, and if you have them ALA and coQ10. DO NOT SUPERDOSE.

But there's lot a more that might confer some protection... A substance called selenite is used in animal studies to cause oxidative stress and initiate cataract formation. If one asssumes that DNP promotes cataracts through a similar oxidative mechanism, studies assessing preventative measures can be helpful.

Many of these are common in DNP users' guides (though for the wrong reasons), but others are new (taurine, green tea, lycopene, etc)

Substances found to prevent selenite-induced cataract formation include:
Vitamin C
Vitamin E
Glutathione (think NAC)
Taurine, which has been shown to be decreased in the lens
Alpha-ketoglutarate
Lycopene
Green tea
Propolis, Diclofenac, Vitamin C, and Quercetin
Pantethine (pantothenic acid/B5 is converted to pantethine, but both can be purchased)
Pyruvate
Vitamin C, Vitamin E, and Pyruvate

I found it interesting that both quercetin and pyruvate were on the list. These are recommended for use while on DNP, but for completely different reasons, namely as an anti-histimine (to prevent rash) and to promote fat loss. Looks like they may help to prevent cataracts as well.

Posts Related to Cycle Length

I can't search for "DNP" it has to be four letters, what BS!

I have used DNP many times and I have always thought the 14 day cycle is to short. I was reading up today and found a post that stated 3-4 week DNP cycle. OMG, better be cold weather to stay cool!

So, has anyone ever tried a cycle of 3 weeks or more?
What foods did you eat, would you eat?
What do you feel is the ideal carb ratio, 33%, higher, or lower?

And don't post post to say it's dangerous! A lot of things are dangerous.
http://anabolicminds.com/forum/steroids/109869-dnp-nuff-said.html Post #1

Conciliator's Response (Post #15)
I've run low dose cycles for 3-4 weeks. There's no reason you need to keep your cycles short. In the original clinical research, people were kept on DNP for months at a time to over a year, with long-term results. Since the body develops a slight tolerance to DNP, the dose was slowly increased, as needed, to keep weight loss humming along. It doesn't take much DNP to accomplish this. They (Cutting, Tainter, Simkins) usually used 75mg jumps in the clinical research.

The reason shorter cycles are so popular nowadays is because guys typically run high-dose inferno cycles. These necessitate a psychological break, if nothing else, after a couple of weeks. But cycles like this are a poor way to run it, IMO, especially since it's much more dangerous. I've always espoused longer, low-dose cycles, for as long as you need to reach your goals.

Even at lower dosages, you might choose to use DNP cyclically. You might discontinue use every few weeks for a psychological break or maybe as part of an anabolic phase in which you focus on building muscle, like with the UD2.0. I saw that XxCrisisxX likes to run it this way. Whatever the reason, you can start back up on the DNP as soon as you want to. The only reason I'd see someone waiting is if he wanted to ration his DNP, resuming use only after his sensitivity to the drug had been reestablished. In his extensive 1937 research, Simkins said "Tolerance to the drug is established rapidly, so that to produce a consistent loss of weight the dosage must gradually be raised. On the other hand, the acquired tolerance is rapidly lost if the drug is discontinued for as short a period as two weeks. The dinitrophenol may then be resumed at a lower dosage level with its original effect on the patient. It is remarkable how sensitive many patients are to a slight increase in the dosage." Considering it doesn't take much DNP to overcome any tolerance, I'd just stay on a low dose, increasing it as needed, until you reach your goals.

Hope that helps,
Conciliator

DNP (2,4-Dinitrophenol). Used for fat lose, make you hot, sweet yellow. It's a yellow pill that will stain yellow and it does not come out! Potent, but is #1 for fat loss even better than T3-Clen.
http://anabolicminds.com/forum/steroids/109869-dnp-nuff-said.html Post #3

Conciliator's Response (Post #16)
A few comments... The fat loss and heat are dose-defendant. You can take a low dose and not feel hot or tired at all. With moderate doses, you can feel hot but have a body temperature below normal due to overcompensation by your body's thermoregulation. It's only with very high doses (relative to personal tolerance) that body temperature starts to rise above normal. A body temperature above normal is the #1 sign of impending toxicity. Most people on DNP have a body temperature well within the normal range.

I'd argue that yellow sweat is not a side effect of DNP. Sweat, yes. And sweat can naturally stain things yellow. But "yellow sweat" is simply not noted in either the original clinical research on DNP or in the thousands of DNP logs on the internet.

DNP permanently stains a lot of things yellow, but not everything. For example, it will come out of clothes with detergent and can be removed from some surfaces.

A Natural Segue into a Post on Body Temperature

Conciliator,
You know I read the logs and DNP info, but quite a bit of the information has gotten buried so I would like to ask a straight forward question regarding body temperature that won't get buried in a log or lengthy thread... I hope this helps everyone:
While on my cycle and monitoring my temp, what is the range I should be maintaining and what should be considered maximum?
Any info and guidelines would be appreciated...
https://thinksteroids.com/community/threads/conciliator-dnp-body-temp-question.134250952/

Conciliator's Response
(https://thinksteroids.com/community/threads/conciliator-dnp-body-temp-question.134250952/#post-530267)
As many people have heard me say, if your temperature is over 99.2/99.3, you need to back off on your DNP dosage or even discontinue use. I didn't just come up with this number myself though. This comes from the most extensive human study on DNP to date. In 1937 Simkins studied the effects of DNP on 159 subjects who were kept on DNP for many months to over a year. It's worth noting that he looked at a number of different markers of health, reporting no hepatotoxicity, no renal toxicity, no cardiovascular effects (except for a marked drop in blood pressure in hypertensive patients), no cardiotoxicity, no consistent effect on blood sugar, an improvement in carbohydrate tolerance, negligible effects on the gastro-intestinal tract, and no effect on blood cholesterol.

With respect to body temperature, he explained, "The temperature, pulse rate, and respiration were carefully watched. It was found that the temperature is an excellent guide of impending toxicity. The rule was followed invariably that, when the temperature rose as high as 99.2 F., the drug was either discontinued or the dosage sharply reduced. In this way, many impending reactions were avoided. The temperature usually remained well within the normal limits."

I think that temperature is an excellent yardstick. While a degree may not seem that much, when your temperature starts to rise above the normal range, it means that the heat being produced from uncoupling has started to outstrip your ability to radiate heat. When this happens, your temperature can quickly get out of control, especially as you increase the dosage or even as the same dosage accumulates. Keeping your temperature in the normal range (under 99.2) demonstrates proper thermoreguation. It shows that you're able to safely radiate the increase in heat production.

To answer srch4info, high doses of DNP do NOT always raise your temp near 99.3. There's a great deal of variation in individual response to DNP. While some people can produce a fever with as little as 300mg/day, others can take 600mg/day and still be under 99 degrees. There are a number of different factors involved: people metabolize DNP at different rates, some people are larger than others so that a given dosage is lower relative to their bodyweight, and some people seem better able to radiate heat. All of these factors and more make dosage prescriptions extremely individual with DNP. For this reason, sweeping generalizations for dosing are completely inadequate. Users need to start with a low dosage and slowly increase it until they find the dosage that's right for them, be it 200mg/day or 600mg/day. As a rough, general guideline, though, I'd say 200mg/day is a low dosage, 400mg/day is a moderate dosage, and 600mg/day is a high (read: unsafe) dosage.

To answer litterbox, there's no point of diminishing returns in terms of DNP's ability to increase metabolic rate. It'll keep uncoupling more and more until so much heat is produced that you get hyperthermia and ultimately die. Of course, when organs start to get damaged and proteins start to denature, I think we can agree that your returns are diminishing. We could call death the ultimate diminution in return. Barring toxicity, though, an increase in heat, per se, doesn't appear to diminish DNP's effect at increasing metabolic rate and oxidation of fat.

-Conciliator

Post About Diet While on DNP

Conciliator
(http://forum.bodybuilding.com/showthread.php?t=6715961&p=119210441&viewfull=1#post119210441)

To answer the original question:

Carb restriction before the start of a cycle is based on the idea that you're shortchanging yourself on fat loss if you don't deplete muscle glycogen first. This is because DNP will burn both fat and glycogen stores for energy substrate. Your goal, of course, is to lose fat. By depleting glycogen with a low-carb diet, more fat will be burned early on. This really isn't necessary though. Glycogen will be restored after ending the cycle. Depeleted glycogen acts as a calorie sink for glucose, so more fat will be relied on for fuel. In other words, if you don't do a low carb diet, any fat you might not lose when starting the cycle, you'll probably lose at the end of the cycle. If early on DNP burns glycogen in place of fat, then so what? That's a calorie sink that will be filled post cycle, with supercompensation even. The net effect will be nearly the same. I wouldn't hassle with carb depletion.

I think most people will feel better on a higher carb intake. But if you function well on low carbs and are on a low carb diet, I don't see why you can't add DNP to it. See how things go. If you feel low on energy, try upping your carb intake. DNP will increase your metabolic rate whether you eat a lot of carbs or not; they're not necessary for DNP to work. However, you'll probably feel better with them in your diet. You'll have to experiment and find out what works for you as an individual. I think a good starting point is a mixed diet containing a good amount of carbs, fats, and protein.

Keep it safe,
Conciliator

Conciliator Responding to Someone's subpar DNP Guide.

The guide is in the first post. I will not post it here because it contains misinformation. Conciliator's response to the guide; however, has useful information, so that is what I will post.
http://anabolicminds.com/forum/steroids/38860-understanding-dnp.html

Conciliator's Response (post # 3)
This guide is not much better than most out there.

There is no arbitrary age limit and there are no classes of people to which DNP should be restricted. Hundreds of overweight people lost a great deal of weight with just DNP alone in the original studies.

The supplement list is out of hand and full of unnecessary items. You do not need the antioxidants as DNP *decreases* oxidative stress. Also, most people are not allergic to DNP (80-90%) so there's no reason everyone should take an antihistamine before starting DNP.

You do not need to carb deplete to maximize results. To say "NO!" to doing it any other way is just silly. You'll lose fat just fine without carb depleting.

As usual, the sodium salt of DNP and powdered DNP are completely misrepresented. It's correct to say that the crystalline version is costlier (and much rarer), but it's also weaker and less effective. Funny that powdered DNP is knocked for being slightly moistened when a whole 25% of crystal DNP is not even DNP, but the sodium salt. Powdered DNP is dried out before it is capped. It does not come moistened (which does not work well in a gel cap). 100mg of crystal DNP vs. 75mg powder DNP (stronger) are therapeutically indistinguishable. The reason people have fewer side effects from crystal DNP at a given dose is because they're consuming less actual DNP... of course they'll have fewer side effects.

The 12 day limit for a first cycle is far too arbitrary. It's a sweeping recommendation that takes no consideration of dose or individual response. If someone is fine at 200mg/day or even 400mg/day, there's no reason they need to limit their fat loss to 12 days. DNP can be used effectively for several months at a time.

The water recommendation is equally arbitrary and, IMO, stupid. You do not need to be pissing every 15 min while downing 3 gallons a day. One of these days someone is going to die not from taking DNP, but from water intoxication after reading some silly recommendation. Drink water liberally and stay hydrated. As you sweat more, pay even more attention. That's all.

Yellow vision has never been reported in the literature.

"Diarrhea - Probably caused from high doses of all these things I'm telling you that you need when you really don't. More magnesium citrate anyone?"

Responding to a Critic

DNP is a metabolic poison. Literally. Nasty stuff.

http://forums.rxmuscle.com/showthread.php?17757-I-need-info-on-dinitrophenol-(DNP)&p=485506&viewfull=1#post485506

Conciliator's Response (http://forums.rxmuscle.com/showthread.php?17757-I-need-info-on-dinitrophenol-(DNP)&p=486245&viewfull=1#post486245)

It's a metabolic poison in the sense that it interferes with energy production, reducing efficiency, but that's precisely the effect people take it for. It's not necessarily "nasty stuff" considering a low dose of 200mg/day can increase metabolic rate an impressive 30% with minimal side effects. Like with most drugs, it can get nasty if you start taking too much. Bodybuilders have traditionally done just that.

Fatalities are actually much less common than most people believe. According to Horners extensive 1941 review, there were a total of three case reports of overdose. Not three thousand. Not three hundred. Three. Of an estimated 500,000 users, that's very rare. In 1937, Simkins conducted one of the most comprehensive clinical studies, in which he kept hundreds of patients on DNP for up to a year. In his final report (JAMA, Volume 108, #26), he stated that "One cannot refrain from remarking that, in view of the remarkably extensive use of the nitrophenols, often without medical supervision, fatalities are extremely rare."

Unfortunately, the mortality rate in recent times (among bodybuilders, for example) is probably higher. This is undoubtedly due to the careless and excessive dosages that are frequently seen as users try to push the envelope and maximize fat loss. It's an issue of dosing protocol, though there are also some reports of suicide and accidental exposure.

Fortunately, longer, lower-dose cycles are becoming more and more popular. With a little care and prudence, the risk of overdosing on DNP is negligible. The major risk is cataracts, estimated to occur around 1 in 1000 users. Most guys don't think twice before risking cataracts when they take SERMs. I think that when used intelligently, DNP can produce unparalleled fat loss with relatively minor risks.

DNP Crystal or Powder

Hi guys,
Quick question here, what is the different between "2,4 Dinitrophenol ($C_6H_4N_2O_5$)" with "2,4 Dinitrophenol Sodium Salt ($C_6H_3N_2O_5Na$)"?
Does the sodium salt type is the one we usually called as crystal DNP or just a totally different chemicals?
Hopefully someone with competent chemical knowledge can clarify this
https://thinksteroids.com/community/threads/dnp-or-not-dnp.134282972/

Conciliator's Response (https://thinksteroids.com/community/threads/dnp-or-not-dnp.134282972/#post-663443)

You're correct. The sodium salt of DNP is what bodybuilders refer to as "crystal DNP." Pure DNP, or the DNP base, is commonly referred to as "DNP powder."

There are a lot of myths about how the two forms differ, similar to the myths bodybuilders have about how testosterone enanthate and testosterone cypionate differ from each other. In reality, they are going to act very much the same. The primary difference is that crystal DNP is slightly weaker than powder DNP, since it is not pure DNP, but contains a sodium molecule. When the sodium is cleaved, you're left with the same DNP base that you get when you take DNP powder. Both forms are highly bioavailable, which is not surprising considering DNP is a small molecule that can even permeate skin. It's often been said that crystal DNP is 75% as strong as powder DNP, but based on the chemical structures and molar masses, it looks like crystal DNP is about 89% as strong as powder DNP (molar mass of 184.106 for powder vs 206.088 for crystal).

Hope that helps,
Conciliator

Conclusion

That is obviously not every post Conciliator has made about DNP, but I it's a good collection of basic information. Again, this is just meant for informational purposes, what anyone chooses to do with this information is not my responsibility.