

# PRESCRIPTION MONOGRAPH

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**Compounded Active Ingredients:** Oxytocin Acetate/PT-141 (Bremelanotide Acetate)

**Form:** Nasal Spray

**Drug Class:**

- Oxytocin: Endogenous hypothalamic hormone
  - PT-141: Melanocortin-4 receptor (MC4R) agonist
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**Mechanism of Action**<sup>1,2,3</sup>: When compounded together, Oxytocin/PT-141 can address both neurobiologic desire and relational components of sexual function. Together they are intended to:

- Modulate social, emotional, and sexual behavior via central activation of the limbic system and hypothalamus
  - Promote sexual receptivity, pair bonding, and arousal
  - Enhance parasympathetic tone and smooth muscle relaxation, indirectly supporting erectile function and genital blood flow
  - Activate MC4 receptors in the hypothalamus, which modulate libido and sexual desire
  - Function independently of nitric oxide pathways, making it effective in central sexual dysfunction
  - Increase dopaminergic activity, sexual motivation, and genital arousal in both sexes
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**Indications:**

- Hypoactive Sexual Desire Disorder (HSDD) in premenopausal women
  - Low libido or sexual dysfunction in men or women
  - Erectile dysfunction (especially psychogenic)
  - Anorgasmia or delayed orgasm
  - Couples therapy adjunct for intimacy
  - Performance anxiety-related dysfunction
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**Before Use:** Let your healthcare provider know if you have had any allergic reactions to nasal sprays in the past. Let your healthcare provider know if you are pregnant or breast feeding. Let your healthcare provider know of all supplements you are currently taking. Let them know of any thyroid or corticosteroid medications you are prescribed. Tell your healthcare provider about all your medical conditions.

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**Contraindications:**

- Uncontrolled hypertension or history of cardiovascular disease
  - Hypersensitivity to peptides or excipients
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**Cautions:** Let your Healthcare provider know of any changes of vision while on this compounded preparation.

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**Warnings and Precautions**<sup>1,2,3,4</sup>:

- PT-141 can increase blood pressure and heart rate; monitor in patients with cardiovascular risk
  - Oxytocin may affect emotional state; psychiatric history should be considered
  - Gastroparesis risk: delayed gastric emptying can lead to gastroparesis (stomach paralysis)
  - Avoid combining with other serotonergic agents or CNS stimulants unless monitored
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**Adverse Reactions**<sup>1,2,3,4</sup>: If you experience any side effects or adverse reactions, including those not listed, please contact your healthcare provider. Seek emergency care if symptoms are severe.

### Common

- Nausea, vomiting, diarrhea
- Flushing
- Headache, Dizziness, Fatigue
- Flu-like symptoms
- Numbness
- Slowed gastric emptying

### Serious or Rare:

- Transient hypertension or decrease heart rate
  - Pain (Abdominal/muscle/extremities/joint)
  - Restless Leg Syndrome
  - Increase creatine phosphokinase
  - Focal hyperpigmentation
  - Gastroparesis
  - Acute hepatitis
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### Interactions<sup>1,2,3,4</sup>:

- SSRIs, SNRIs, MAOIs: Theoretical risk of emotional blunting, mood shifts, or hyponatremia due to overlapping serotonergic effects
  - Anxiolytics/sedatives (e.g., benzodiazepines): May enhance sedative effects and emotional sensitivity
  - Vasodilators or diuretics: Additive hypotension
  - Bupropion or L-DOPA may interact at the emotional/sexual arousal level
  - May increase blood pressure and heart rate, counteracting antihypertensive therapies
  - May have reduced efficacy when taken with mu-opioid receptor antagonists like naltrexone
  - May alter the absorption of oral medications due to delayed gastric emptying
  - Caution is advised with drugs like Tramadol due to potential central sympathomimetic synergy
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### Use in Specific Populations:

- Pregnancy: Contraindicated. Oxytocin has uterotonic effects and may induce uterine contractions. Use is strictly avoided in obstetric settings.
  - Lactation: Caution. Oxytocin is endogenously released during lactation and may stimulate milk letdown; however, safety during lactation is not established.
  - Pediatrics: Not recommended
  - Geriatrics: Permitted with monitoring. Baseline BP and HR should be assessed.
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### Storage:

- Refrigerate at 2°C to 8°C (36°F to 46°F)
  - Can be stored at room temperature (up to 30°C or 86°F) for up to 48hrs
  - Do not freeze
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**How to Use:** This medication is a nasal spray and is delivered in a premixed liquid form. Gently blow your nose to clear it from mucous before using the compound. Remove the ring and protective cap to reveal the nasal spray tip. Tilt head slightly forward, hold bottle with thumb on bottom and your index and middle fingers on top. Use your fingers to squeeze down on the pump while you breathe in slowly through your nose. If needed, repeat the process for the second nostril.

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### Monitoring Parameters:

- Blood pressure (especially with PT-141)
  - Sexual response and subjective satisfaction
  - Mood and psychological effects
  - Frequency of use (tolerance or overuse potential)
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### Citations:

1. Ito E, Shima R, Yoshioka T. A novel role of oxytocin: Oxytocin-induced well-being in humans. *Biophys Physicobiol.* 2019;16:132-139. Published 2019 Aug 24. doi:10.2142/biophysico.16.0\_132
2. Heiman JR, Kroll R, Liao X, et al. Effects of Bremelanotide (PT-141) on Sexual Function in Women with Hypoactive Sexual Desire Disorder. *J Sex Med.* Published 2021. Available from: <https://kinseyinstitute.org/pdf/JSMedicine-heiman%20et%20al.pdf>.
3. Kingsberg SA, Clayton AH, Portman D, et al. Bremelanotide for the Treatment of Hypoactive Sexual Desire Disorder: Two Randomized Phase 3 Trials. *Obstet Gynecol.* 2019;134(5):899-908. doi:10.1097/AOG.0000000000003500
4. Safety information referenced from the FDA-approved labeling for PT-141: U.S. Food and Drug Administration. Vyleesi (bremelanotide) injection, for subcutaneous use: Prescribing information. Silver Spring, MD: FDA; 2019. Available from: [https://www.accessdata.fda.gov/drugsatfda\\_docs/label/2019/210557s000lbl.pdf](https://www.accessdata.fda.gov/drugsatfda_docs/label/2019/210557s000lbl.pdf). Accessed February 4, 2026.