



## CAS 6893-02-3 Antipyretic Analgesic T3 Liothyronine Sodium L Triiodothyronine Raw Powder

Our Product Introduction

### Basic Information

- Place of Origin: China
- Minimum Order Quantity: 1Gram
- Price: USD
- Packaging Details: 1kg/Foil Bag
- Delivery Time: 3-7days after received payment
- Payment Terms: T/T, Western Union, PayPal
- Supply Ability: 5000KG Per Year



### Product Specification

- Product Name: T3
- Cas: 6893-02-3
- Purity: 98%
- Appearance: White Powder
- Highlight: **CAS 6893-02-3, Liothyronine Sodium Powder, L Triiodothyronine**



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## Product Description

### CAS 6893-02-3 Antipyretic Analgesic T3 Liothyronine Sodium L Triiodothyronine Raw Powder

## Product Description

#### Antipyretic Analgesic T3 Liothyronine Sodium L triiodothyronine

Alias : T3 Sodium Salt , T3, Na , O-[4-Hydroxy-3-Iodophenyl]-3,5-Diiodo-L-Tyrosine Sodium Salt , Liothyronine Sodium , Liothyronine Sodium Salt , H-Thy(3,3',5-I3)-Ona

Alias: Cytomel T3 ; 3,3',5-triiodothyronine sodium

CAS NO: 55-06-1

Einecs No: 200-223-5

MF: C<sub>15</sub>H<sub>11</sub>I<sub>3</sub>NNaO<sub>4</sub>

MW: 672.96

Organic Herbal Weight Loss Powders For Tablet / Capsule

Purity: 98.0%

Appearance: white or light yellow powder, almost tasteless.



Triiodothyronine (T3) is a hormone secreted by the thyroid. It is formed by the condensation of L-3-monoiodotyrosine and L-3,5-diiodotyrosine. The content in thyroid tissue and blood is far less than that of thyroxine, but its biological activity is 5 to 10 times higher than it. T3 has the effect of promoting material metabolism and energy release; it can also promote growth and development. The normal adult thyroid secretes 30 µg T3 per day, 20% of T3 in plasma comes from the direct secretion of the thyroid, and 80% comes from the transformation of plasma T4 in the periphery.

T3( Liothyronine Sodium) in the body is responsible for regulating the uptake of various nutrients into cells and into the mitochondria of those cells in order to effectively become utilized for the production and consumption of energy.

The muscle building and athletic world is attracted to the use of T3 as a physique and/or performance enhancing drug because of its capability to distinctly boost the body's metabolism in the effort to metabolize body fat at a greater rate.

T3 is traditionally utilized during cutting, dieting, and/or pre-contest phases of training due to the universal goal of these phases to break down body fat, though in recent years T3 has gained some popularity as a useful agent during bulking and mass gaining phases of training (normally in conjunction with anabolic steroids) in order to better efficiently process nutrients and/or to keep body fat levels down during periods of higher caloric intake.

T3 is commonly used with anabolic steroids due to its significant impact on the body's metabolism as a whole. It is very important to understand that T3 is indiscriminate in its metabolism boosting properties - it will increase the metabolism of fats,

carbohydrates, and protein all equally.

T3 is also commonly combined with other fat loss agents in order to increase its overall effect, as it does work synergistically with other fat loss agents.

Levothyroxine or L-thyroxine is a synthetic thyroid hormone that is chemically identical to thyroxine (T4), which is naturally secreted by the follicular cells of the thyroid gland. It is used to treat thyroid hormone deficiency, and occasionally to prevent the recurrence of thyroid cancer. Like its naturally secreted counterpart, levothyroxine is a chiral compound in the L-form. The related drug dextrothyroxine (D-thyroxine) was used in the past as a treatment for hypercholesterolemia (elevated cholesterol levels) but was withdrawn due to cardiac side effects.

Triiodothyronine, also known as T3, is a thyroid hormone. It affects almost every physiological process in the body, including growth and development, metabolism, body temperature, and heart rate.

Production of T3 and its prohormone thyroxine (T4) is activated by thyroid-stimulating hormone (TSH), which is released from the pituitary gland. This pathway is regulated via a closed-loop feedback process: Elevated concentrations of T3, and T4 in the blood plasma inhibit the production of TSH in the pituitary gland. As concentrations of these hormones decrease, the pituitary gland increases production of TSH, and by these processes, a feedback control system is set up to regulate the amount of thyroid hormones that are in the bloodstream.

As the true hormone, the effects of T3 on target tissues are roughly four times more potent than those of T4. Of the thyroid hormone that is produced, just about 20% is T3, whereas 80% is produced as T4. Roughly 85% of the circulating T3 is later formed in the thyroid by removal of the iodine atom from the carbon atom number five of the outer ring of T4. In any case, the concentration of T3 in the human blood plasma is about one-fortieth that of T4. This is observed in fact because of the short half-life of T3, which is only 2.5 days. This compares with the half-life of T4, which is about 6.5 days.

## Usage

Liothyronine is the most potent form of thyroid hormone. Chemically, it is nearly identical to triiodothyronine (T3). As such, it acts on the body to increase the basal metabolic rate, affect protein synthesis and increase the body's sensitivity to catecholamines (such as adrenaline) by permissiveness. The thyroid hormones are essential to proper development and differentiation of all cells of the human body. These hormones also regulate protein, fat, and carbohydrate metabolism, affecting how human cells use energetic compounds.

In comparison to levothyroxine (T4), liothyronine has a faster onset of action as well as a shorter biological half-life, which may be due to less plasma protein binding to thyroxine-binding globulin and transthyretin.

Physicians can use this instead of or in addition to levothyroxine (T4) for patients undergoing thyroid withdrawal. When a patient has thyroid cancer or Graves' disease, ablation therapy with radioactive iodine can be used to remove any trace thyroid tissue. For <sup>131</sup>I therapy to be effective, the trace thyroid tissue must be avid to iodine. The best method is to starve the tissue of iodine but this can lead to hypothyroid symptoms for the patient. Withdrawal from levothyroxine can be done but it takes six weeks of withdrawal for the remaining thyroid tissue to be completely starved. Six weeks is needed owing to levothyroxine's long half life. Six weeks can be inconvenient for the patient and delay treatment. Liothyronine instead can be taken and withdrawn from for two weeks to starve the thyroid tissue. This is much safer and more convenient than levothyroxine.

Item	Specification	Result
Appearance	An odorless, almost white or buff colored powder	pass
Solubility	1, Very slightly soluble in water	pass
	2, slightly soluble in alcohol	pass
	3, practically insoluble in most other organic solvents	pass
	4, dissolves in diluted aqueous sodium hydroxide solutions	Pass
Identification	a) Heat about 50 mg with a few drops of sulfuric acid in a porcelain crucible: violet vapors of iodine are evolved.	pass
	b) The retention time of the major peak is confirm to the RS	pass
Loss on Drying	Not more than 4.0%	0.46%
[α] <sub>D</sub> <sup>20</sup> / C=1 in 1M HCl/EtOH 1:4	+18 ~ +22°	+20.9°
Assay (HPLC)	Not less than 95.0%	99.18%
Levothyroxine sodium	Not more than 5.0%	0.68%



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