

Anadrol 50 (oxymetholone)

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[Anadrol 50](#)

([oxymetholone](#))

[Anadrol 50](#)(commonly called by athletes "A50" or "A-bombs") was initially developed as a compound to help people with anemia, and has since been used very successfully to aid people who are suffering from many other diseases where weight loss is a concern. Thus, it is clearly an effective agent for promoting weight gain, increasing appetite, gaining strength, and increasing Red Blood Cell count. And, as with most Anabolic/Androgenic Steroids (AAS), it has it's downsides as well. Anadrol will inhibit your body's natural production of hormones (testosterone, etc), will negatively affect your blood lipid profile, can cause water retention, is notorious for causing headaches, and is also highly liver toxic (in fact, it has the worst reputation for hepatotoxicity out of all steroids). Paradoxically, although one the benefits touted by it's original manufacturer (Syntex) is that it can be used to stimulate weight gain through increasing appetite, taking too much may actually inhibit your appetite!

Anadrol Effects on Body

I think, in order to gain a complete understanding of the Anadrol effects on body, we need to take a look at its advantages contrasted with its disadvantages. Anadrol is a DHT-derived compound, and is 17-Alpha-Alkylated steroid, meaning that it has been altered at the 17th carbon position to survive oral ingestion. Most oral steroids are 17aa, and this helps them make it through your liver in a useful form. Sounds great, right? Lets 17alpha-alkylate everything! Well& as you can imagine, there's a down side.

Anadrol [Side Effects](#)

This 17aa alteration, which makes it possible for Anadrol to survive its first pass through your liver, also makes it very taxing on your liver. How taxing is A50 and how much weight can you gain from its use? Well, there was a 30 week study done on A50 and, as you can expect, a reasonable amount of [Side Effects](#) were noted. The fact that A50 causes some [Side Effects](#) has really never been in debate. But how effective was the drug? Well, first it should be mentioned that this study was done on people with AIDS related wasting, and they actually gained weight (8+kg) while the control group lost weight, and had increased mortality rates. (1). I suppose, if you're in a study because you have a wasting disease which is also a terminal illness, you don't want to end up in the control group& .Anyway, weight gain in this study peaked at 19-20 weeks, though, so the last 10 weeks weren't very productive in this respect. Clearly, you wouldn't want to run Anadrol for 20 weeks, given its toxicity, but after that, any effect in terms of weight and strength gains would be negligible. So, with regards to sides from Anadrol, and the sheer fact that this study lasted so long (30 weeks), it should be apparent that they can be kept under control and the drug can be used safely. People are commonly told to limit their intake of A50 to 4 weeks or less& I'm a bit less conservative and think you can easily run A50 for 6 weeks or more.

From personal experience, however, I can tell you that gains from Anadrol are quite dramatic for the first 3 weeks, and then quickly level off. Unfortunately, I find that the [Side Effects](#) experienced from Anadrol (which include a headache, bloating, elevated blood pressure, and a general "unwell" feeling for me) remain for the entire duration of use& .but I find, as usual, [Side Effects](#) for this drug are pretty much half legend and half truth. Since Anadrol is derived from DHT, it can't actually convert to estrogen (via the aromatase enzyme), and it's not a progestin or a

compound with progestenic activity& so the estrogenic (?) [Side Effects](#) produced by it are of a very mysterious nature. It has been speculated that perhaps it can stimulate the estrogen receptor without actually being converted to estrogen& that's about as plausible an explanation as I've heard& However, things really get strange, when [oxymetholone](#) has been used in studies to alter the female reproductive/menstrual cycle; in those cases, it has lowered plasma progesterone levels! (7)One would expect that an AI (aromatase inhibitor) wouldn't be of much use with this drug, but many have found that [Letrozole](#) (which has, in some cases been shown to reduce estrogen in the body to an undetectable amount)(6) can greatly reduce or even eliminate many of the more noticeable [Side Effects](#) of Anadrol, such as the bloating.

As I've stated, however, the sides from this drug are certainly no joke, but are easily preventable, and controllable. One study even showed very few sides for subjects using up to 100mgs of [oxymetholone](#) (2). In the original UnderGround Steroid HandBook, Dan Duchaine states that he used it at doses up to 150mgs/day. Clearly, Anadrol's hepatotoxicity has been a bit exaggerated, in some circles. Be that as it may, my suggestion is still to limit Anadrol's use to 6 weeks, at a maximum& even if just to err on the side of caution. Of course, I have personally run this drug for much longer..

How should we use Anadrol? I'd probably be willing to include Anadrol in a cycle including injectable steroids, but not other 17aa compounds. I'd make any 6-week-run of this compound begin at the start of a cycle, as a form of "jumpstart" towards seeing gains quickly. The quick gains you will get from Anadrol (up to a pound per day for the first 2 weeks are not uncommon in Steroid.com members) are also just as quick to disappear upon cessation of use& .unless you are simply using it as a kickstarter, while waiting for your other compounds to kick-in. I'll go out on a limb here and say that utilizing Anadrol as a "Jumpstart" is the most popular use of this drug for athletes and bodybuilders today. I'll also say that this drug is immensely popular with strength athletes who don't have to worry about weight classes (Field athletes and strongmen), and with powerlifters in the heavier weight brackets. It's also important to note that in one study by Schroder et. Al (2) anadrol showed that it has the ability to lower serum SHBG (Sex Hormone Binding Globulin& which binds to your free test and makes it no longer useful for anabolism, among other things) concentrations by 54.9 ± 25.8 and 45 ± 16.2 nmol/l in the 50- and 100-mg treatment groups. This means there will be more free test circulating around your body when you take this drug& clearly, this would produce some synergy when stacked with other steroids. Given the large amounts of weight and strength which can be gained in a relatively short time span on this drug, I'm sure this comes as no surprise to many.

Another important and often understated characteristic of this compound is that [oxymetholone](#) doesn't bind well to the androgen receptor (Relative Binding Affinity = too low to be determined) (3) which is the lowest I've ever read about. Basically, what this tells me is that there are a lot of non-receptor mediated effects from this steroid, making it a very potent addition to ANY BULKING stack, because it won't be competing for the receptor sites with the other steroids you're using. It's also, as you may have guessed a very poor choice for a cutting stack.

ANADROL CYCLES

What is an Anadrol Cycle? How much should you use? Well, this is actually one of the most interesting facts about Anadrol. You see, most steroids produce what we call a "dose respondent curve" which is a fancy way of saying "the more you use, the more you gain."

Anadrol is one of the few steroids where the dose respondent curve flattens out very quickly. When you take 50mgs of Anadrol, you'll make some very good gains. When you take 100mgs of Anadrol, you'll make even more gains. However, it has been found that 100mgs/day is as effective for weight gain as 150mgs/day but produces less [Side Effects](#) and was less toxic (4). I feel that the jump from 50mgs to 100mgs constitutes an acceptable rise in benefit vs. cost, but this is not the case as dosages get over 100mgs. Now, lets see how 50mgs and 100mgs of [oxymetholone](#) actually effect strength, when compared with each other:

Relative (%) changes in strength are shown for the groups receiving placebo (filled bars), 50 mg/day [oxymetholone](#) (open bars), and 100 mg/day [oxymetholone](#) (gray bars). Nos. above bars represent relative change (%) from baseline to week 12 for the 1-repetition maximum tests of strength. Error bars represent ± 1 SE from the mean. * Significant difference from placebo, $P < 0.05$; significant difference from placebo by Wilcoxon test, $P < 0.02$. See text for additional statistical analyses.

As you can see, in this study, doubling the dose of Anadrol nearly doubled the strength gains of the test subjects. Now, when we look at changes in body composition from [oxymetholone](#) (chart below) we can see that although the guys taking the 100mgs (vs. the 50mgs group) had more fat lost and more Lean Body Mass gained, it wasn't as dramatic as the differences in strength gains between the two groups:

Changes in body composition are shown for the groups receiving placebo (filled bars), 50 mg of [oxymetholone](#) per day (open bars), and 100 mg per day (gray bars). Numbers above the bars represent the mean absolute changes and the error bars are ± 1 SE. For total lean body mass (LBM) and total fat, differences among the 3 groups were significant ($P < 0.0001$, one-way ANOVA). * Significant differences from placebo, $P < 0.001$.

Although I am usually not inclined to posit speculations on why a particular drug does or doesn't do something, in this case I will. I'm guessing that the higher doses of Anadrol cause enough appetite suppression (at least anecdotally) to make eating rather difficult. It can also increase [Insulin](#) resistance and glucose intolerance (5). This has the effect of making macronutrient absorption more inefficient, and could also be a factor in reducing gains when the dosage goes over 100mgs/day. Unfortunately, Anadrol also has a reasonably profound effect on your body's natural hormonal system, on par with most other oral steroids, but not as bad as most injectables, and it's certainly not as harsh on your lipid profile as many anabolics are

Anadrol Body Building

(2). As an interesting side note, some of the medical literature on this compound suggests a dose of 1-5mgs per kg of bodyweight. I'll pause a second here for you to figure out how absurdly high of a dose that would translate to for the average bodybuilder!

To Buy Anadrol Liquid Anadrol and others

This steroid is very available on the black market in the form of capsules, tablets (some are even 75mgs!), liquid, and even paper. Prices will vary, and be indicative of many different factors including the form you buy this compound in (paper will usually be the most expensive, and liquid the least), and where you live. In any case, you shouldn't be paying more than \$2.50-3.00 per 50mgs.

What is Anadrol?

[\(oxymetholone\)](#)

[17 beta-hydroxy-2-hydroxymethylene-17 alpha-methyl-5 alpha-androstan-3-one]

Molecular Weight: 332.482

Molecular Formula: C 21 H 32 O 3

Melting Point: 178-180C

Manufacturer: Syntex (Originally)

Release Date: 1960

Effective Dose: 100mgs (optimal)

Active Life: <16hours

Detection Time: up to 8 weeks

Androgenic: Anabolic Ratio: 45:320



