



IV Therapy

Overview

Intravenous (IV) therapy delivers fluids, vitamins, minerals, amino acids, and antioxidants directly into the bloodstream through a small catheter placed in a vein. By bypassing the digestive system, it allows for near-complete bioavailability, meaning more nutrients reach your cells than would be possible through oral supplementation, which can be limited to gut health, inflammation, or nutrient deficiencies that impair absorption.

In a functional and integrative medical setting, IV therapy is used as a targeted tool (not a cure-all) to address specific clinical needs, support recovery, and complement a broader wellness plan that includes nutrition, lifestyle, and root-cause treatment.

All About IV Therapy

The clinical rationale for IV therapy focuses on three things: bioavailability, precision, and speed. When nutrients are taken orally, absorption can range from 10 to 50 percent depending on the compound and the health of the gut. IV delivery bypasses these variables entirely, making it particularly useful when the gut is compromised, when nutrient demands are temporarily elevated, or when a specific therapeutic concentration is clinically indicated.

Because each infusion delivers an active pharmacologic dose directly into circulation, IV therapy should always be administered by a licensed clinician, with the protocol selected based on symptoms, medical history, and supporting lab work. Done thoughtfully, it can produce meaningful improvements in energy, recovery, and resilience. Done indiscriminately, it adds cost without benefit, and in some cases, carries unnecessary risk.

Common Types of IV Therapy

- **Hydration & Electrolyte Solution** - Saline or lactated Ringer's used to restore fluid balance after illness, intense exertion, travel, or acute dehydration. Serves as the foundation of IV therapy and often a building block for more targeted protocols.
- **Myer's Cocktail** - A widely used blend of B-complex vitamins, vitamin C, magnesium, and calcium that supports energy, immune function, and general resilience. A useful entry point for patients new to IV therapy.
- **High-Dose Vitamin C** - Therapeutic doses well above what oral supplementation can achieve, used for immune support, antioxidant capacity, and adjunctive care in post-viral recovery, chronic infection, and integrative oncology protocols.
- **IV Iron Infusions** - Used to correct iron deficiency and iron deficiency anemia when oral iron is poorly tolerated, poorly absorbed, or insufficient, common in heavy menstrual bleeding, postpartum recovery, IBD, celiac, and unexplained fatigue with low ferritin.



- **Glutathione** - Often called the body's master antioxidant, supporting detoxification pathways, mitochondrial function, and oxidative stress reduction. Frequently paired with other infusions or used on its own for skin clarity, liver support, and neurological resilience.
- **NAD+ (Nicotinamide Adenine Dinucleotide)** - A coenzyme central to cellular energy production and DNA repair, and a cornerstone of longevity-focused protocols.
- **Methylene Blue** - An emerging protocol used for mitochondrial support, cognitive performance, neurodegenerative resilience, and post-viral or chronic infection recovery, acting as an electron carrier within the mitochondria at low therapeutic doses.
- **Poly-MVA** - A proprietary palladium and alpha-lipoic acid complex with B vitamins and trace minerals, designed to support mitochondrial energy production, antioxidant defense, and cellular redox balance.
- **Amino Acid Blends** - Targeted formulations supporting recovery, lean muscle maintenance, neurotransmitter balance, and metabolic function. Often used in athletic, post-surgical, and cognitive support protocols.
- **Mineral and Trace Element Infusions** - Magnesium, zinc, selenium, and other minerals delivered to address lab-confirmed deficiencies. Frequently used for migraine, muscle tension, immune support, and metabolic conditions.
- **Custom Functional Medicine Protocols** - Personalized blends formulated around an individual's labs and treatment goals. Common applications include hormone health, immune modulation, post-viral recovery, and peri-surgical healing.

Current Research Status

The evidence base for IV therapy is mixed and continues to evolve, and an honest conversation about it requires distinguishing what is well-established from what is still emerging.

Well-supported uses include IV hydration and electrolyte repletion in dehydration and acute illness, replacement therapy for documented nutrient deficiencies, and IV iron infusions for iron deficiency and iron deficiency anemia, the latter backed by robust clinical data and standard use in conventional hematology, gastroenterology, and obstetric care.

High-dose vitamin C also has decades of clinical use and a growing body of peer-reviewed research in oncology, critical care, and integrative settings, though optimal dosing and patient selection continue to be refined.

Emerging and moderately supported uses include NAD+ for cellular energy and select neurological applications, glutathione for oxidative stress and neurological conditions, and the Myers' Cocktail for fibromyalgia, migraine, and chronic fatigue.

Therapies such as methylene blue and Poly-MVA sit further along the research spectrum. Both have compelling mechanistic underpinnings. Methylene blue's role in mitochondrial electron transport is well characterized, and Poly-MVA's lipoic acid mineral complex has been studied in laboratory and case-based settings, but human clinical trial data remain limited.



Patient-reported outcomes are often favorable, particularly within integrative protocols, yet broader claims should be tempered by what the published evidence currently supports.

These therapies are best approached as complementary tools within a thoughtful, individualized plan, used alongside conventional care and with appropriate monitoring. Where evidence remains most limited is in the realm of routine "wellness" infusions for otherwise healthy individuals without documented deficiency, and in broad anti-aging or performance enhancement claims. IV therapy is a powerful clinical tool when matched to the right indication; it is not a shortcut around foundational health practices, and outcomes are consistently better when treatment is guided by data rather than trend.

Important Notes

Before any infusion, a thorough intake is essential. This includes a full medical history, current medications and supplements, and relevant lab work, typically a complete blood count, comprehensive metabolic panel, iron studies, vitamin D, B12, and any additional markers specific to the proposed protocol. G6PD testing is required before high-dose vitamin C and methylene blue.

A careful medication review is essential before methylene blue, particularly for patients on antidepressants or other serotonergic agents. Pregnancy and any history of kidney, heart, or liver conditions must be reviewed carefully, as these can affect fluid tolerance, drug clearance, and appropriate dosing.

Infusions are administered by a trained clinician in a monitored setting and typically take anywhere from 30 minutes to several hours depending on the protocol. Side effects are generally mild and may include temporary taste changes, warmth, flushing, or lightheadedness. Eating a light meal and hydrating well beforehand improves comfort and reduces the likelihood of these effects. Local risks include bruising or irritation at the IV site, and rare but possible reactions include allergic response or electrolyte imbalance if dosing is not appropriately individualized.

Certain therapies may cause temporary blue-green discoloration of urine, which is expected and harmless.

Questions Worth Asking Your Provider

A productive conversation before any infusion includes understanding what specific concern the protocol is addressing, what lab work supports the recommendation, how progress will be measured, what frequency and duration are appropriate for your situation, whether there are any interactions with your current medications or supplements, and what realistic outcomes and timeline to expect. Clear answers to these questions are a hallmark of thoughtful, individualized care.

Disclaimer

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