



Push Patch

Iontophoresis Delivery of
NAD⁺, Peptides & Glutathione





Proving Systemic Delivery: The Next Evolution in NAD⁺ Therapy

Push Patch represents a breakthrough in clinician-directed iontophoresis therapy, delivering systemic NAD⁺ and peptide bioactivity through a comfortable, needle-free transdermal system. Using controlled iontophoresis, Push Patch transports NAD⁺ and complementary therapeutic peptides directly into circulation, bypassing enzymatic degradation and hepatic metabolism to achieve rapid, measurable biological impact.

Two internal human studies confirm authentic systemic uptake and intracellular action

Two internal human studies validate systemic NAD⁺ delivery:

MeScreen Bioenergetic Study

Repeated 12-hour NAD⁺ (1,300 mg) applications produced measurable increases in mitochondrial efficiency and reduced oxidative stress, confirming intracellular NAD⁺ repletion and functional mitochondrial remodeling.

IKPV + NAD⁺ Clinical Study (120 subjects)

Demonstrated an 82.8 % mean reduction in hs-CRP within seven days using NAD⁺ alone, and a 94 % reduction with the combined KPV + NAD⁺ formulation.

This magnitude of improvement exceeds that achieved by most mainstream therapies aimed at mitigating elevated hs-CRP and systemic inflammatory burden.

The Push Patch Solution: 12-Hour Active Transdermal Therapy

Together, these studies validate that Push Patch does more than deliver molecules to the skin—it delivers quantifiable systemic outcomes that can be measured in blood and observed in cellular energy metabolism.

Push Patch establishes a new standard for precision-guided transdermal therapy: scientifically verified, non-invasive, and built for clinical scalability.

Clinically proven systemic NAD⁺ delivery • Needle-free iontophoresis • Superior biomarker performance

Proven Advantages of Push Patch KPV + NAD⁺

Direct-to-bloodstream Proof

Clinically validated systemic delivery of NAD⁺ demonstrated an 82.8 % mean reduction in hs-CRP within seven days ($p < 10^{-11}$).

When paired with KPV, the effect deepens to a 94 % mean reduction, with 95 % of participants reaching < 1 mg/L CRP.

This systemic impact outperforms most mainstream therapies used to mitigate hs-CRP and inflammatory risk markers.

Synergistic inflammation modulation

KPV engages melanocortin receptor 1 (MC1R) to suppress NF- κ B activation and cytokine signaling while stabilizing mast cells.

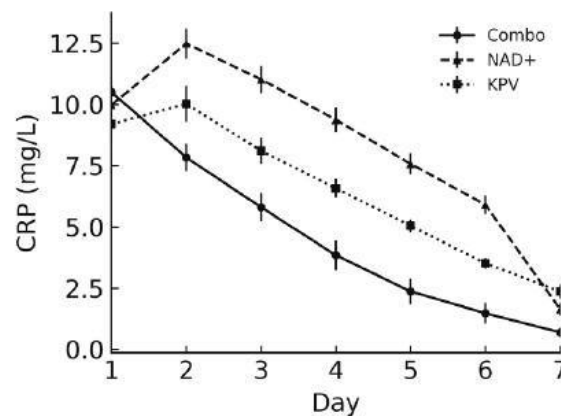
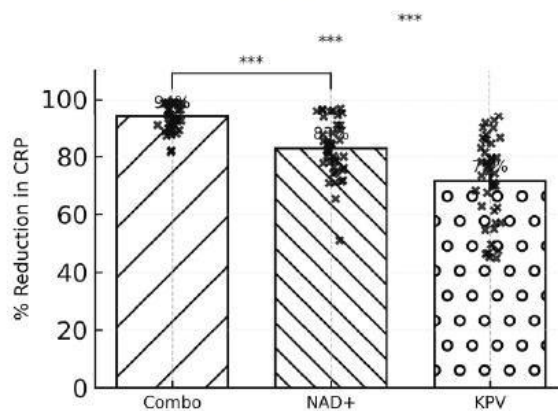
NAD⁺ restores cellular redox balance, amplifying KPV's immunomodulatory effects for faster inflammatory resolution and tissue recovery.

Rapid systemic onset:

Mean onset of ≥ 1 mg/L CRP reduction: 2 days with KPV + NAD⁺ vs 4.7 days with NAD⁺ alone, objective evidence of bloodstream-level delivery within 48 hours.

Enhanced tolerability:

Slow, steady iontophoretic delivery eliminates the flushing, nausea, and discomfort often observed with IV infusions, ensuring patient comfort and compliance.



Proven Advantages of Advantages of Push Patch NAD⁺ 1300 mg

Clinically validated systemic delivery

In the 30-day MeScreen human study, repeated 12-hour applications of the NAD⁺ 1300 mg patch produced measurable, statistically significant gains in mitochondrial efficiency in both men and women.

Mitochondrial ATP output per oxygen consumed increased, direct evidence that the delivered NAD⁺ entered systemic circulation and was functionally incorporated into intracellular energy metabolism.

Enhanced mitochondrial performance

By Day 30, participants showed higher oxidative phosphorylation coupling and reduced reliance on glycolysis.

Cells produced more energy with less oxidative stress, confirming efficient NAD⁺ repletion and improved redox balance at the mitochondrial level.

Adaptive redox and cellular resilience

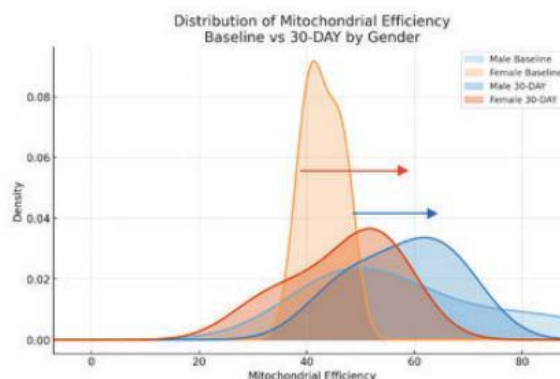
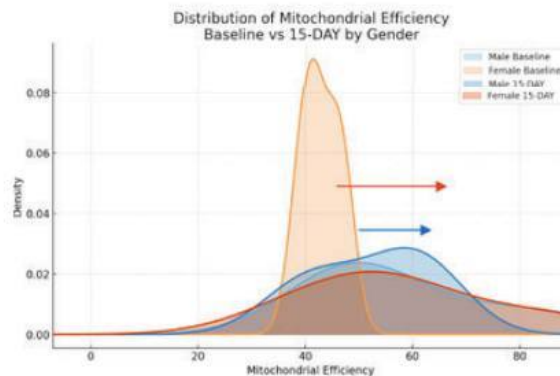
NAD⁺ delivery upregulated sirtuin-dependent pathways (SIRT1 / SIRT3) that enhance antioxidant capacity, stabilize mitochondrial networks, and improve metabolic flexibility.

These adaptations support long-term cellular repair and stress resistance—outcomes typically achievable only through invasive or intravenous protocols.

Clinician-directed systemic therapy

The NAD⁺ 1300 mg patch enables high-dose systemic NAD⁺ restoration without IV infusions or oral degradation.

Providing measurable bioenergetic and redox outcomes.



12-hour NAD⁺ 1300 mg applications produced rightward shifts in mitochondrial efficiency by Days 15 and 30, confirming systemic uptake and enhanced cellular energy production.

(MeScreen 30-Day NAD⁺ Iontophoresis Study; n = 30)