

# PEPTIDE GUIDE 101

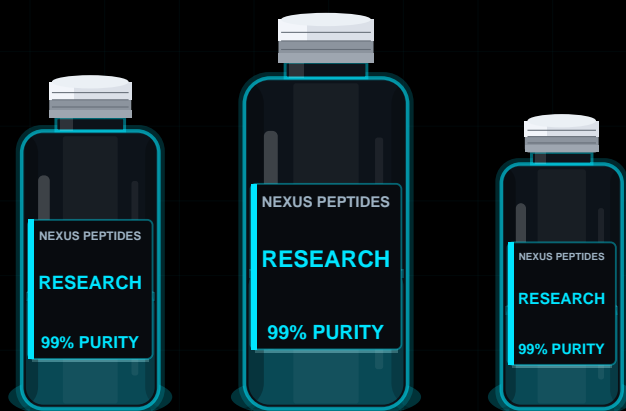
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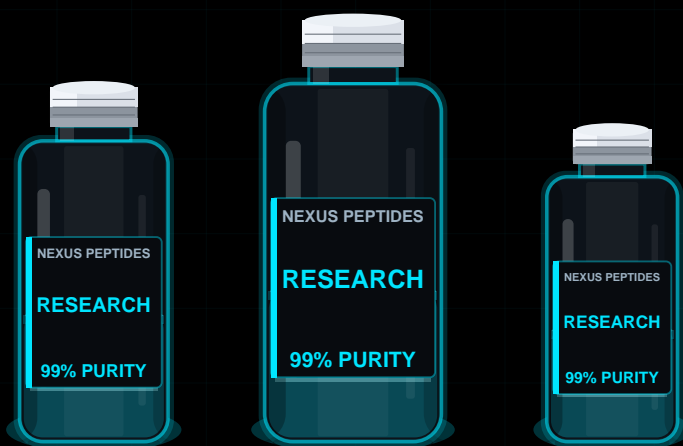
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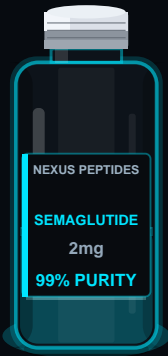
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CHAPTER 01

# WHAT ARE PEPTIDES?

Peptides are short chains of amino acids — the same building blocks that make up proteins. If proteins are novels, peptides are sentences: short, specific, and designed to carry one precise instruction to your cells.

The body produces many peptides naturally — insulin and GLP-1 are well-known examples. Research peptides are synthetic analogues of such naturally occurring compounds, studied in laboratory settings for how they signal specific biological functions.

**Research peptides are studied in laboratory and in-vitro models for how they signal specific biological pathways — they are not consumer products.**

## FIELD NOTE · RESEARCH CONTEXT

Peptides are biological signalling molecules. In research they are studied for how they bind receptors and influence specific pathways. Everything in this guide is educational and describes laboratory research only.

## A SHORT BIOLOGY REFRESHER

Peptides signal — they don't force.  
Each peptide speaks to specific receptors.  
Cycling preserves receptor sensitivity.  
Quality of source material is paramount.

## HOW TO USE THIS GUIDE

Read sections 01–03 linearly — they cover the fundamentals. Sections 04–08 are reference tables. Sections 09–11 cover long-term handling and safety. All content is for research and educational use only.

CHAPTER 02

# SUPPLIES YOU NEED.

Before any research handling, these items should be on hand. Proper reconstitution and sterile laboratory technique require the right tools, every time.

## 01 · PEPTIDE VIAL(S)

Your lyophilized (freeze-dried) peptide powder. Keep refrigerated or frozen until ready to reconstitute. Never expose to heat or direct sunlight.

## 02 · BACTERIOSTATIC WATER

The standard solvent. Contains 0.9% benzyl alcohol to prevent bacterial growth. Do not use sterile water — it has no preservative and will accelerate degradation.

## 03 · INSULIN SYRINGES — U-100, 1ML

Used to draw bacteriostatic water into the vial and to measure precise volumes for research. A fine 29–31 gauge allows accurate measurement with minimal stopper coring.

## 04 · ALCOHOL WIPES

Sterilize the vial stopper before each draw to keep the working solution sterile. Always wipe and let fully dry before use.

## 05 · SHARPS CONTAINER

Dispose of used needles and glassware safely — never recap. A sharps container is the safe and legal method in most regions.

## 06 · REFRIGERATOR STORAGE

Once reconstituted, peptides must be stored at 36–46°F (2–8°C). Keep them in the back of the fridge away from door temperature fluctuations.

## SOURCING

Quality of source material is the single biggest variable in outcomes. Use suppliers — like Nexus — that publish third-party HPLC analysis and a Certificate of Analysis for every batch.

CHAPTER 03

# HOW TO RECONSTITUTE.

Reconstitution is the process of dissolving freeze-dried peptide powder into bacteriostatic water so it can be drawn up and measured for research. The process is virtually identical for every peptide.

- 01 Gather your supplies.**

Peptide vial, BAC water vial, 1ml insulin syringe, two alcohol wipes. Lay everything out on a clean surface before starting.
- 02 Wipe both vial tops.**

Clean the rubber stopper on both your peptide vial and your BAC water vial. Let them air-dry completely — about 30 seconds.
- 03 Draw up your BAC water.**

Insert the syringe into the BAC water vial and draw the amount specified in the reference table — most peptides take 1–3ml. More water means more dilution and more units per measured aliquot.
- 04 Add the BAC water to the peptide vial.**

Angle the needle so the water flows slowly down the inside wall of the vial — never let it land directly on the powder. This is the most important step in the entire process.
- 05 Let it dissolve.**

Do not shake — shaking can degrade the peptide. Gently swirl or roll the vial between your palms until fully dissolved. Solution should be clear; GHK-Cu will be slightly blue.
- 06 Label and refrigerate.**

Write the reconstitution date on the vial and refrigerate immediately. Most peptides are stable for 4–8 weeks reconstituted.

#### UNIT FORMULA

(Target mg / Total mg in vial) x (BAC water ml x 100) = units per measured aliquot. Example — 500mcg from a 10mg vial in 2ml BAC water:  $(0.5/10) \times (2 \times 100) = 10$  units. On a U-100 syringe, 10 units = 10 tick marks from zero. Concentration reference only.

CHAPTER 04

# FAT LOSS & METABOLIC.

The most-studied metabolic research compounds. GLP-1 agonists are studied for appetite and insulin-sensitivity pathways; GH peptides for GH-driven metabolism. Figures below are reconstitution and concentration references for laboratory research only.

PEPTIDE	VIAL	BAC	UNITS 1ML	TIMING	FREQUENCY	CYCLE
Tesamorelin	10mg	2ml	20	AM/PM · Fasted	5 on / 2 off	8wk on/off
Iпамorelin	10mg	3ml	9	AM/PM · Fasted	5 on / 2 off	8wk on/off
CJC-1295 (No DAC)	10mg	2ml	5	AM/PM · Fasted	5 on / 2 off	8wk on/off
Ipa/CJC Blend	5/5mg	2ml	10	AM/PM · Fasted	5 on / 2 off	8wk on/off
Tes/Ipa Blend	6/2mg	2ml	10	AM/PM · Fasted	5 on / 2 off	8wk on/off
Retatrutide	10mg	2ml	20	AM	1x / week	8wk on/off
Tirzepatide	10mg	2ml	25	AM	1x / week	8wk on/off
Semaglutide	3mg	2ml	17	AM	Once / week	8wk on/off
MOTS-c	10mg	2ml	20	AM	5 on / 2 off	8wk on/off
AOD-9604	5mg	2ml	11	AM · Fasted	5 on / 2 off	8wk on/off
5-Amino-1MQ	10mg	2ml	10–20	AM	5 on / 2 off	8wk on/off
Cagrilintide	5mg	2ml	10	AM	3x / week	8wk on/off

**GLP-1 NOTE**

Semaglutide, Tirzepatide, and Retatrutide are among the most-studied GLP-1 research compounds. The concentration figures are provided for accurate reconstitution and measurement in research settings only.

CHAPTER 04 — CONTINUED

# GLP-1 TITRATION SCHEDULE.

Concentration reference for the once-weekly schedules reported in the research literature. Figures show the relationship between vial strength, solvent volume, and measured units — for laboratory research only.

## RETATRUTIDE

10mg vial / 2ml BAC

WEEK	DOSE	UNITS
1-4	1.0 mg	10
5-8	2.0 mg	20
9-12	4.0 mg	40
13-16	6.0 mg	60
17-20	8.0 mg	80
21+	12.0 mg Max	120

## TIRZEPATIDE

10mg vial / 2ml BAC

WEEK	DOSE	UNITS
1-4	2.5 mg	25
5-8	5.0 mg	50
9-12	7.5 mg	75
13-16	10.0 mg	100
17-20	12.5 mg	125
21+	15.0 mg Max	150

## SEMAGLUTIDE

3mg vial / 2ml BAC

WEEK	DOSE	UNITS
1-4	0.25 mg	17
5-8	0.5 mg	33
9-12	1.0 mg	67
13-16	1.7 mg	113
17+	2.4 mg Max	160

### REFERENCE ONLY

These figures are a concentration and measurement reference drawn from published research protocols. They are not directions for use — all compounds referenced are for laboratory research only.

CHAPTER 05

# HEALING & RECOVERY.

BPC-157 and TB-500 are studied for tissue-repair and anti-inflammatory pathways in research models. Figures below are reconstitution references for laboratory research only.

PEPTIDE	VIAL	BAC	UNITS 1ML	TIMING	FREQUENCY	CYCLE
<b>BPC-157</b>	10mg	2ml	<b>10</b>	AM or PM	Every day	8wk on/off
<b>TB-500</b>	10mg	2ml	<b>10</b>	AM or PM	Every day	8wk on/off
<b>BPC/TB Wolverine</b>	5/5mg	2ml	<b>10</b>	AM or PM	Every day	8wk on/off
<b>GHK-Cu</b>	50mg	3ml	<b>10</b>	AM or PM	Every day	8wk on/off
<b>KPV</b>	10mg	2ml	<b>10</b>	AM or PM	Every day	8wk on/off
<b>ARA-290</b>	15mg	1ml	<b>10</b>	AM or PM	Every day	8wk on/off
<b>BPC/TB/GHK Glow</b>	70mg	2ml	<b>10</b>	AM or PM	Every day	8wk on/off
<b>BPC/TB/GHK/KPV Glow</b>	70mg	2ml	<b>10</b>	AM or PM	Every day	8wk on/off

### BPC-157 + TB-500

BPC-157 and TB-500 are among the most-studied tissue-repair research peptides and are frequently investigated together in the literature.

### HANDLING NOTES

A clear solution indicates proper reconstitution. GHK-Cu solution will be distinctly blue — this is expected.  
 Handle gently; never shake.  
 Store cold and protected from light.

CHAPTER 06

# GROWTH HORMONE & LONGEVITY.

GH-secretagogue peptides are studied for their effect on pituitary GH release; longevity peptides for cellular-ageing pathways. Figures below are reconstitution references for laboratory research only.

PEPTIDE	VIAL	BAC	UNITS 1ML	TIMING	FREQUENCY	CYCLE
Tesamorelin	10mg	2ml	20	AM/PM · Fasted	5 on / 2 off	8wk on/off
Ipamorelin	10mg	3ml	9	AM/PM · Fasted	5 on / 2 off	8wk on/off
CJC-1295 (No DAC)	10mg	3ml	6	PM · Fasted	5 on / 2 off	8wk on/off
Epitalon	20mg	2ml	20	PM	Every day	20 days, 3x/yr
Thymalin	20mg	2ml	20	PM	Every day	20 days, 3x/yr
FOXO4-DRI	10mg	2ml	20	AM	5 on / 2 off	2wk, 2–3x/yr
SS-31	10mg	2ml	10	AM	5 on / 2 off	8wk on/off
NAD+	500mg	3ml	20	AM	2–3x / week	As needed

### EPITALON

Telomere length support; circadian rhythm regulation.

### THYMALIN

Thymic peptide — restores immune function as the thymus shrinks.

### SS-31

Mitochondrial protection and cellular energy production.

### NAD+

Foundational for DNA repair and cellular energy.

### FOXO4-DRI

Senolytic — targets senescent zombie cells.

### NOTE

Studied in periodic research cycles and often combined in the literature.

CHAPTER 07

# COGNITIVE & SEXUAL HEALTH.

Semax and Selank are studied via intranasal delivery in research models; PT-141 acts centrally through melanocortin receptors. Figures below are reconstitution references for laboratory research only.

PEPTIDE	PURPOSE	VIAL	UNITS	TIMING	FREQUENCY	CYCLE
<b>Semax</b>	Cognition	30mg	<b>10</b>	AM	2–3x / week	8wk on/off
<b>Selank</b>	Anti-anxiety	30mg	<b>10</b>	AM	2–3x / week	8wk on/off
<b>PT-141</b>	Libido	10mg	<b>10</b>	30 min before	As needed	As needed
<b>Kisspeptin-10</b>	Fertility	5mg	<b>5</b>	1hr pre-bed	Every day	30 on / 30 off
<b>Oxytocin</b>	Bonding	10mg	<b>5</b>	AM	As needed	As needed
<b>DSIP</b>	Sleep	5mg	<b>10</b>	1–3hr pre-bed	5 on / 2 off	8wk on/off
<b>Thymosin Alpha-1</b>	Immunity	10mg	<b>30</b>	AM	5 on / 2 off	8wk on/off
<b>LL-37</b>	Immunity	5mg	<b>5</b>	AM	Every day	50 days/4wk off
<b>VIP</b>	Anti-inflam.	5mg	<b>5</b>	AM/PM	Every day	8wk on/off
<b>IGF-1 LR3</b>	Muscle	1mg	<b>5</b>	AM	10 days	10 on/4wk off
<b>Melanotan 2</b>	Tan/Cognitive	10mg	<b>5</b>	AM	2x / week	8wk on/off

#### RESEARCH NOTE

Semax and Selank are studied via intranasal delivery rather than injection. PT-141 is studied for central melanocortin-receptor activity. Reference information for laboratory research only.

CHAPTER 08

# PEPTIDE STACKS BY GOAL.

Combinations frequently investigated together in the research literature, grouped by the pathway each targets. Reference information for laboratory research only.

## STACK 01 · FAT LOSS

Retatrutide 1mg 1x/wk — triple-agonist appetite control

Tesamorelin 1mg AM+PM — GH for visceral fat

Ipamorelin 200mcg AM+PM — amplifies GH pulse

MOTS-c 1mg AM — metabolic reset & mitochondria

## STACK 02 · HEALING & RECOVERY

BPC-157 500mcg AM+PM — targeted local tissue repair

TB-500 500mcg AM — systemic soft-tissue regeneration

GHK-Cu 1.7mg AM — collagen synthesis & remodeling

## STACK 03 · COGNITIVE & PERFORMANCE

Semax 1mg AM 2–3x/wk — focus, memory, neuroprotection

Selank 1mg AM 2–3x/wk — anxiety reduction, calm

DSIP 250mcg pre-bed — deep sleep enhancement

NAD+ 100mg AM 2–3x/wk — cellular energy

## STACK 04 · LONGEVITY

Epitalon 2mg PM daily, 20-day cycle 3x/yr

SS-31 500mcg AM 5 on/2 off — mitochondrial protection

NAD+ 100mg AM 2–3x/wk — DNA repair & signaling

GHK-Cu 1.7mg daily — cellular repair & anti-aging

CHAPTER 08 — CONTINUED

# MUSCLE BUILDING & SEXUAL HEALTH.

## STACK 05 · MUSCLE BUILDING & RECOMPOSITION

CJC-1295 / Ipamorelin blend, AM+PM fasted — GH pulse for lean mass

Tesamorelin 1mg AM — amplifies IGF-1, drives fat loss

BPC-157 / TB-500 blend AM — protects joints & tendons

GHK-Cu 1.7mg daily — collagen, recovery, connective tissue

## ABOUT THESE COMBINATIONS

These groupings reflect combinations commonly investigated together in published research, organised by the pathway each targets. Reference information for laboratory study only.

## STACK 06 · SEXUAL HEALTH

PT-141 500mcg–1mg 30 min before — libido & arousal

Kisspeptin-10 125mcg pre-bed — LH/FSH stimulation

Thymosin Alpha-1 1.5mg 5 on/2 off — immune support

GHK-Cu 1.7mg daily — collagen, skin & recovery

## DOCUMENTED IN RESEARCH

Vial, solvent, and concentration figures are provided so the combinations above can be reproduced accurately in a laboratory setting — not as directions for use.

## FOR RESEARCH ONLY

Every combination and figure in this guide is reference information for laboratory and in-vitro research. None of it is medical advice or instructions for use, and none of these compounds are intended for human or animal consumption.

CHAPTER 09

# STORAGE & HANDLING.

Peptides are delicate. Heat, light, and mechanical agitation all degrade them. Proper handling extends potency from weeks to months — and keeps the concentration of the working solution accurate.

**BEFORE**    **Before reconstitution**

Store lyophilized vials in the refrigerator at 36–46°F. For long-term storage beyond 3 months, keep in the freezer. Never expose to direct sunlight or heat. In powder form, peptides are very stable and can last 12–24 months.

**AFTER**    **After reconstitution**

Store immediately in the refrigerator at 36–46°F. Most peptides are stable 4–8 weeks reconstituted. GLP-1 compounds are stable up to 28 days; GHK-Cu holds 6–8 weeks. Label each vial with the reconstitution date.

**TEMP**    **Temperature control**

Never freeze a reconstituted peptide — it causes aggregation and loss of potency. Never leave reconstituted vials at room temperature for extended periods. When traveling, use a small cooler or insulated bag with a cold pack.

**HANDLE**    **Handling**

Always handle vials gently. Never shake, never drop. When drawing from a vial, insert the needle cleanly through the rubber stopper at the same spot each time to minimize stopper damage. Replace the cap when not in use.

**LIGHT**    **Light sensitivity**

Some peptides — particularly Melanotan, PT-141, and Eptalon — are more light-sensitive. Store all vials in their boxes or cover them. Amber vials provide additional protection when available.

CHAPTER 10

# FREQUENTLY ASKED QUESTIONS.

## Why bacteriostatic water and not sterile water?

Bacteriostatic water contains 0.9% benzyl alcohol, which inhibits bacterial growth and keeps a reconstituted research solution stable for weeks. Sterile water has no preservative and degrades the solution far faster.

## How long is a reconstituted peptide stable?

It depends on the compound and storage. Stored at 36–46°F, most reconstituted research peptides hold for 4–8 weeks; GLP-1 compounds up to about 28 days; GHK-Cu around 6–8 weeks. Always label the vial with its reconstitution date.

## Why must peptides be kept cold and out of light?

Heat, light, and agitation degrade peptide chains and reduce purity. Refrigeration, dark storage, and gentle handling preserve the integrity of the research material for as long as possible.

## What is a Certificate of Analysis (COA)?

A COA is third-party documentation — typically HPLC and mass spectrometry — confirming a batch's identity and purity (>=99%). Reputable research suppliers publish a COA for every batch. Never use material without one.

## Can compounds be combined in one solution?

Some are studied together and sold pre-blended (e.g. BPC/TB, Ipa/CJC). Compatibility varies by compound, and GLP-1 agonists are generally kept separate. This is reference information for research handling only.

## Are these products for personal use?

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