Tesamorelin

PEPTIDES

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IMPORTANT: Read This Before Proceeding With Dosing Go to the Prep & Injection Guide for proper reconstitution, syringe sizing, and injection protocols. Mistakes here can compromise your research. the Prep & Injection Guide Tesamorelin is a synthetic analogue of growth hormone-releasing hormone (GHRH) that stimulates the release of human growth hormone (HGH). FDA-approved for body fat redistribution syndrome, Tesamorelin has shown powerful effects on fat loss, muscle preservation, nerve regeneration, and cognitive enhancement. It is not a steroid and does not affect testosterone levels. BENEFITS Reduces adipose fat tissue (especially in the abdomen and upper back) Targets visceral fat around internal organs (liver, stomach, intestines) Preserves and increases lean muscle mass Boosts metabolism and energy output Reduces cholesterol and triglycerides Supports nerve regeneration after injury Increases neurotransmitters tied to cognitive performance POSSIBLE SIDE EFFECTS Injection site irritation (redness, swelling, itching) Muscle aches and pain Headache Nausea Diarrhea Sweating Carpal tunnel symptoms Edema Fluid retention RARE BUT SERIOUS SIDE EFFECTS Diarrhea with fever and dehydration Shortness of breath Joint or muscle pain Numbness or tingling in the extremities May increase risk of Type-2 diabetes INTERACTIONS Tirzepatide and Tesamorelin should only be used together under close medical supervision for diabetics, due to the fact that they have opposing effects on blood glucose levels, which may reduce the effectiveness of diabetes management. Tesamorelin tends to raise blood sugar, while tirzepatide lowers it, potentially leading to unpredictable glucose control. In addition to the concerns regarding diabetics, taking Tesamorelin with Tirzepatide may make the Tirzepatide less effective. CONTRAINDICATIONS Do not use Tesamorelin if: You’ve had pituitary tumors or surgery You have an active malignancy You’re allergic to mannitol You’re pregnant or breastfeeding You’ve had hypothalamic-pituitary axis disruption You have a diagnosed pituitary disorder DOSING CYCLING: 12-16 week cycle followed by 4-8 week washout period. Shorter cycles will not yield tangible results- do not begin this product with the intention of “trying it out” for 3 or 4 weeks. This will not be effective. Each week should consist of 5 consecutive dosing days followed by 2 “rest” days. TIMING: Dose at night, at least 90 minutes after your last meal. RECONSTITUTION SOLUTION(S): Hospira brand BAC water preferred (many companies do not maintain a known, consistent pH level like Hospira does) .6% Acetic Acid Solution Hospira brand BAC water is preferred because of the absolute consistency of its pH level- if the BAC water is a bit too acidic or too basic , peptides can lose their electrical charge, causing them to clump together. Extreme pH differences can denature the peptide, altering its structure and potentially rendering it ineffective. Acetic Acid solution is mandatory in order to prevent gelling of the product ADMINISTRATION: Subcutaneous Injection Store at room temperature, in a cool, dry, dark location. This helps to prevent

the peptide from gelling. Please note that storage at this temperature drastically decreases the length of time that you have to finish the vial. This is why we no longer carry vials larger than 10mg. IMPORTANT NOTE CONCERNING POST-RECONSTITUTION STORAGE OF TESAMORELIN TESAMORELIN: 10MG Mix with .5mL (50 units) Acetic Acid until dissolved; then add 2.5mL (250 units) Bacteriostatic Water Standard Protocol 30 units (1mg), 1x/day, 5 days/week Maximum Protocol 60 units (2mg), 1x/day, 5 days/ week TESAMORELIN: 20MG Mix with 1mL (100 units) Acetic Acid solution until dissolved, then add 4mL (400 units) Bacteriostatic water Standard Protocol 25 units (1mg) 1x/day, 5 days/week Maximum Protocol 50 units (2mg) 1x/day, 5 days/'week Stacking Suggestions Tesamorelin stacks extremely well with other fat-burning and GH-boosting peptides: AOD-9604 – Targeted fat burning, especially abdominal CJC-1295 / Ipamorelin – Synergistic GH elevation for deeper fat loss and muscle growth GHK-Cu – Tissue regeneration and skin improvement MOTS-C – Boosts metabolic performance and ATP levels SS-31 – Mitochondrial repair and enhanced nerve healing L-Carnitine – Enhances fat metabolism during GH therapy Fat loss stack: Tesamorelin + AOD-9604 + CJC-1295 Neuroregeneration stack: Tesamorelin + SS-31 + MOTS-C Aesthetic stack: Tesamorelin + GHK-Cu + CJC-1295