

Ipamorelin 10 mg

Selective GH Secretagogue

Selective Pulsatile GH Support | Physician Reference

Overview

Ipamorelin is a selective pentapeptide growth hormone secretagogue that acts as an agonist of the ghrelin receptor (GHS-R1a). It stimulates growth hormone release with minimal effect on cortisol, prolactin, and ACTH, which distinguishes it from earlier growth hormone-releasing peptides such as GHRP-6 and GHRP-2 and gives it a cleaner side-effect profile.

Ipamorelin is frequently paired with a GHRH analog, because a GHRP and a GHRH analog act through different receptors and together generate a larger, more physiologic GH pulse. Used alone, it provides selective GH support with a favorable tolerability profile.

Mechanism at a Glance

Attribute	Description
Peptide class	Selective pentapeptide GH secretagogue (GHRP)
Primary target	Ghrelin receptor (GHS-R1a) on the pituitary and hypothalamus
Core mechanism	Stimulation of GH release and suppression of somatostatin
Selectivity	Minimal effect on cortisol, prolactin, and ACTH versus older GHRPs
Combination role	Amplifies the GH pulse of a co-administered GHRH analog
Administration	Subcutaneous injection; commonly stacked with CJC-1295 (No DAC)
Regulatory status	Not FDA-approved; available compounded; not DEA-scheduled

Mechanism of Action

Ipamorelin (Selective GHRP)

Ipamorelin binds the ghrelin receptor (GHS-R1a) on pituitary and hypothalamic cells, stimulating growth hormone release and suppressing somatostatin, the endogenous brake on GH secretion. This dual action amplifies GH output, particularly when combined with a GHRH analog acting on a separate receptor.

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Its defining feature is selectivity: ipamorelin releases GH without the meaningful increases in cortisol, prolactin, and appetite seen with earlier GHRPs. This makes it well suited to patients who require GH-axis support with a low tolerance for off-target hormonal effects.

Clinical Application Matrix

The table summarizes the role ipamorelin plays across common clinical goals. Primary indicates a principal effect; Supporting indicates a meaningful but secondary role.

Clinical Application	Role	Mechanistic Basis
GH pulse amplification	Primary	GHS-R1a agonism with somatostatin suppression
Synergy with a GHRH analog	Primary	Dual-receptor GH release in combination protocols
Body composition and recovery	Supporting	GH- and IGF-1-mediated effects
Sleep quality	Supporting	GH pulse contribution to sleep architecture
Low side-effect GH support	Primary	Selectivity sparing cortisol, prolactin, and ACTH

Ideal Patient Candidate Profile

Ipamorelin is most appropriate for consideration in patients presenting with one or more of the following:

- GH-axis support goals with a low tolerance for off-target hormonal effects
- Body-composition, recovery, or sleep objectives
- Use as the GHRP component of a combination protocol with a GHRH analog
- Preference for selective, pulsatile GH stimulation over exogenous GH
- Intact pituitary function

Ipamorelin is generally well tolerated; mild water retention or a transient head-rush sensation can occur. IGF-1 should be monitored, and it is contraindicated in active malignancy given GH-mediated growth signaling.

Clinical and Compounding Context

- **Formulation** Compounded subcutaneous injection is the standard route; frequently co-formulated or co-administered with CJC-1295 (No DAC).
- **Quality assurance** Physician should verify USP compliance and sterility testing at the sourcing compounding pharmacy.
- **Informed consent** Recommended for all patients; documentation should reflect investigational or off-label status, the available level of human trial data, and an individual risk-benefit discussion.
- **Monitoring** No universally established clinical monitoring protocol; practitioner discretion based on patient profile and treatment goals.
- **Regulatory** Not FDA-approved and not DEA-scheduled; available compounded through licensed 503A pharmacies, with the usual quality and purity considerations.

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- **Laboratory monitoring** Baseline and periodic IGF-1 is reasonable to track the GH-axis response.

Giovane Medical works with physicians to facilitate access to properly sourced, compounded peptide formulations and to support evidence-based protocol development.

For prescribing or physician partnership programs, contact the Giovane Medical clinical team.

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