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Sermorelin and Growth Hormone Support:

Safety, Efficacy, and Delivery Approaches



Whitepaper

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Authors

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Abstract

Shifts in growth hormone (GH) levels can lead to reduced muscle mass, decreased bone strength, altered metabolism, impaired sleep quality, and compromised cognitive performance. Sermorelin, a synthetic peptide that mimics growth hormone-releasing hormone, works by stimulating the body's own production of GH from the pituitary gland in a natural, pulse-like rhythm. This approach helps maintain the body's normal feedback systems and reduces some of the risks associated with GH supplementation. Research shows that sermorelin can safely restore more GH activity, supporting improvements in strength, body composition, recovery, and cognitive function. While sermorelin has traditionally been given by injection, new liposomal delivery methods now make oral use possible, improving convenience and consistency. The StatRX delivery system, in particular, enables a needle-free option that allows for reliable absorption. Overall, sermorelin provides a safe and effective means of supporting hormone balance and promoting healthy aging.



1 Introduction

Aging is accompanied by widespread physiological changes in the body. From puberty into adulthood and later life, shifts in hormone levels often dictate the profound physiological changes that occur. Growth hormone (GH) plays a crucial role in regulating key aspects of overall strength and fitness. It is essential for driving growth during childhood¹ and continues to help maintain healthy body composition, bone strength, muscle mass, and metabolic function into adulthood². However, GH levels gradually decline with age. This decline is associated with decreases in muscle mass and cognitive function, and an increase in body fat. Sermorelin is a peptide-based therapy that stimulates the natural production of GH, representing a potential mechanism for preventing or reversing some of the impacts of decreased GH and aging.

This article examines the role of GH in physical and mental health, and explores the evidence supporting the use of sermorelin as a tool to enhance strength, metabolism, recovery, and cognitive function.

2 Background and History of Sermorelin

2.1. Human Growth Hormone Deficiency

Deficiencies in GH in children can lead to short height, low blood sugar, and other developmental issues³, while a deficiency in adults can result in decreased muscle mass, high cholesterol levels, or poor bone density^{4,5}. To combat these effects, GH extracted from pituitary glands was first used to treat growth hormone deficiency in the 1950s⁶. Limited availability and the high cost of this extraction process drove the development of recombinant GH in the 1980s⁷, which is still used to treat growth hormone deficiency today⁸.

Alternatives for GH were also investigated, and growth hormone-releasing hormone (GHRH), which stimulates the release of GH in the pituitary gland, was identified as a potential candidate for treating growth hormone deficiency⁹. Sermorelin is a synthetic peptide analog of GHRH that mimics its action to stimulate secretion of GH and was approved by the FDA for use in treating children with growth hormone deficiency in 1997^{10,11}. Originally sold as Geref, the drug was discontinued by the manufacturer in 2006, although this was not due to safety or efficacy concerns¹². GHRH and sermorelin are GH secretagogues, meaning they promote its secretion.

2.2. Human Growth Hormone and Aging

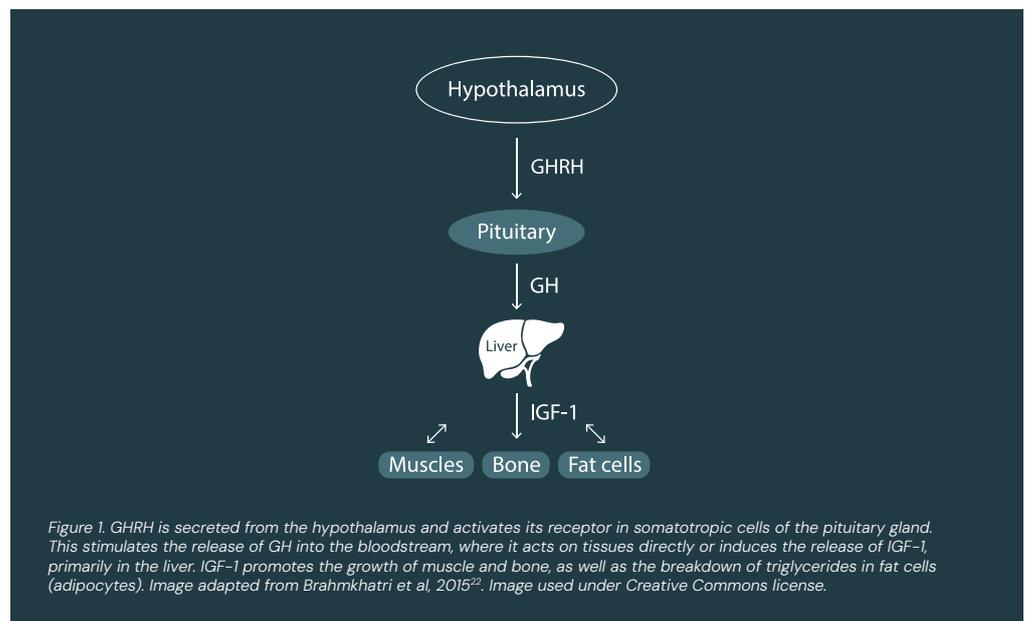
Around the same time as GH and its secretagogues were being investigated to treat hormone deficiency, another line of research identified an important role for GH in aging¹³. It was observed that GH levels decrease with age, with daily secretion decreasing from a height of approximately 150 µg/kg/day during puberty to only around 25 µg/kg/day at age 55¹⁴. This decrease correlates with changes associated with GH deficiency: reductions in lean body mass and muscle strength, increases in body fat, decline in cognitive function, and an increase in sleep disorders¹⁵. As such, GH and treatments that can stimulate its production emerged as candidates to prevent or slow down physical and mental declines associated with aging.

2.3. Mechanism of Action

GHRH is a 44-amino acid peptide that, following secretion from the hypothalamus, activates GHRH receptors (GHRHR) expressed by somatotrophic cells of the pituitary gland¹⁶. Sermorelin is a 29-amino acid peptide corresponding to the bioactive portion of GHRH, making it the smallest fragment of the molecule necessary for full biological activity¹⁷. Because it consists of this fragment of GHRH, sermorelin is sometimes referred to as GHRH (1-29). Activation of GHRHR in the pituitary gland,

either by GHRH or sermorelin, results in the secretion of GH into the bloodstream¹⁸.

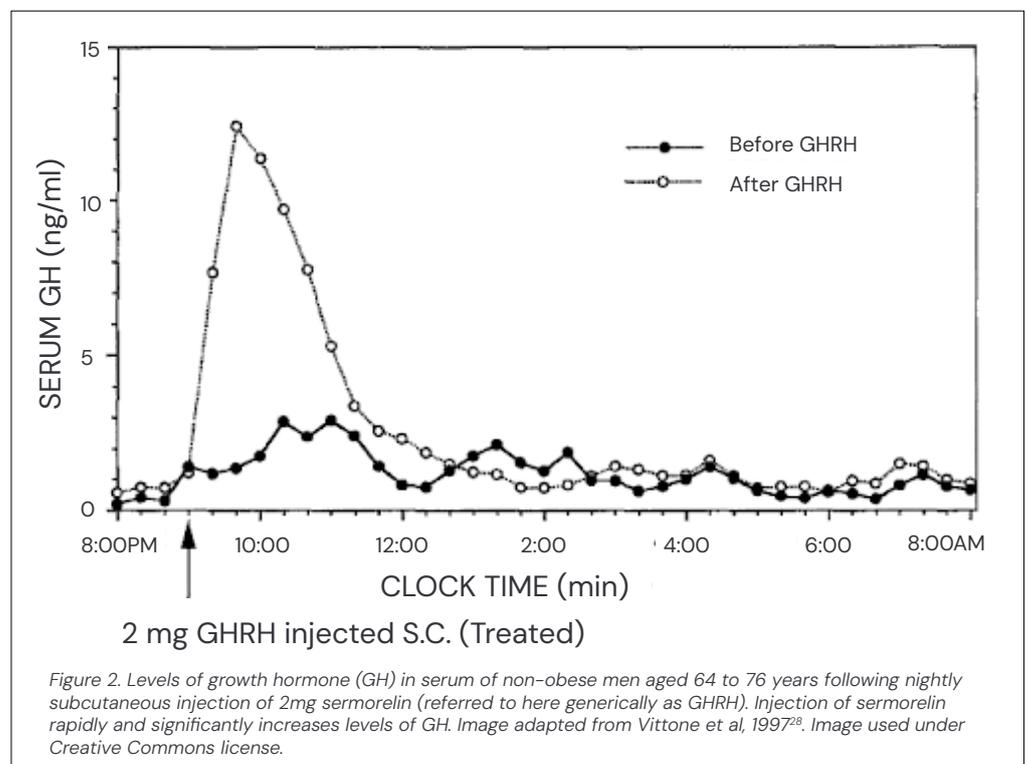
Following GHRH activation, for example, by sermorelin, somatotrophic cells secrete GH in a pulse-like manner. It is a reduction in the strength of these pulses that is thought to be the cause of reduced GH secretion with aging¹⁹. The activity of GH, mediated by its receptor on the surface of cells throughout the body, is essential for growth during childhood and adolescence, and has profound impacts on many aspects of adult physiology. The hormone also plays a crucial role in regulating growth and metabolism by stimulating the production of insulin-like growth factor 1 (IGF-1), primarily in the liver²⁰. The so-called GH-IGF-1 axis is vital for growth and metabolism, and GH-mediated production of IGF-1 promotes protein synthesis, cell growth, and development²¹.



As a therapeutic, GHRH is often preferred over recombinant GH because it stimulates the body's own pituitary gland to produce and release growth hormone in a physiologic, pulsatile manner, more closely mimicking natural secretion dynamics. Research into the effects of sermorelin on hormonal systems suggests that it promotes changes in GH levels similar to those observed with natural GHRH^{23,24}. As such, sermorelin stimulates GH production in a way that parallels normal endocrine physiology. This preserves regulatory feedback mechanisms, helps maintain healthy hormone rhythms, and reduces the risk of excessive or inappropriate GH/IGF-1 levels, which sometimes occur with direct administration of GH²⁵.

3 Evidence for Sermorelin Activity

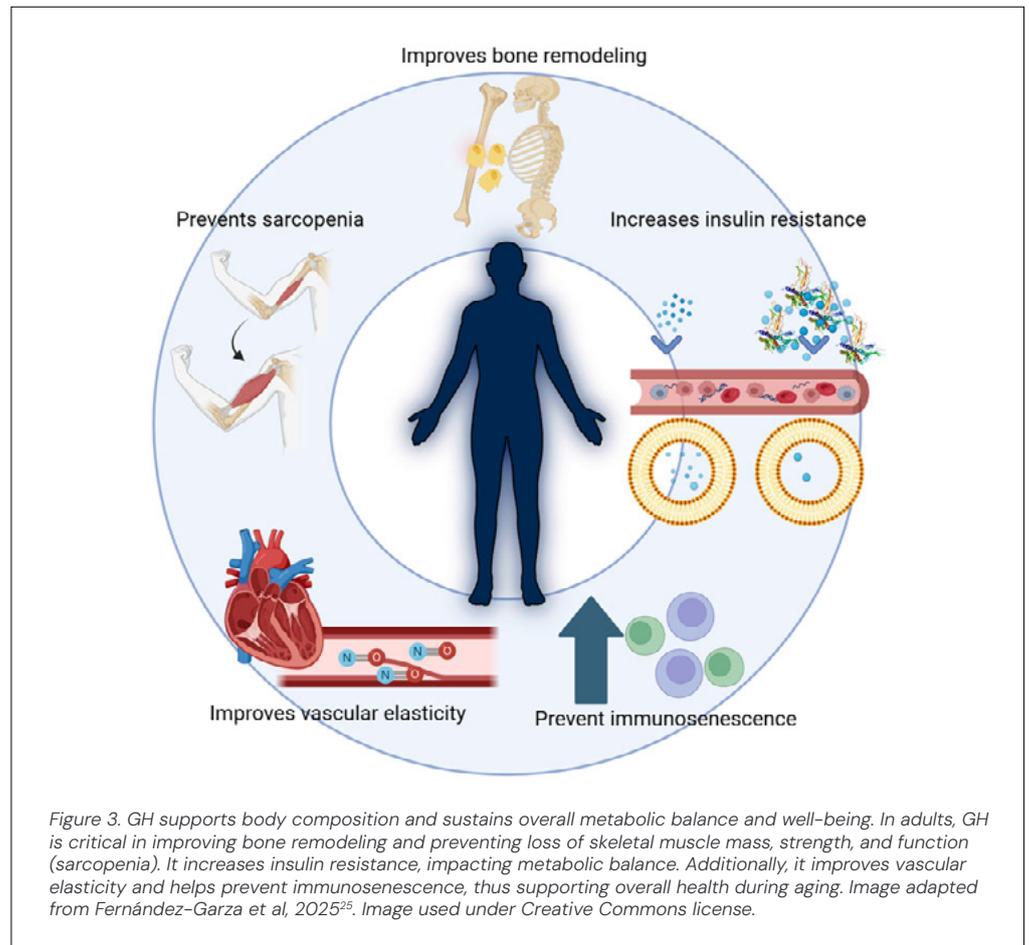
The roles of GH and IGF-1 in aging are now well established²⁵. Treatment of older men with sermorelin has been shown to reverse age-related decreases in GH and IGF-1^{26,27}, highlighting a potential role for such therapies in supporting healthy aging and long-term wellness. Aging is a multifaceted phenomenon, and this section examines the effects of sermorelin and GHRH on various physiological processes associated with aging. Such treatments can support hormonal balance by restoring GH levels to those seen in younger adults^{28,29}.



3.1. Strength and Fitness

GH regulates skeletal muscle growth and strength directly and via IGF-1^{30,31}. Adults who are deficient in GH have reduced muscle mass and increased fat mass, while replacement of GH is known to improve body composition³². GH can also help in muscle repair, primarily by stimulating the synthesis of collagen and supporting the connective tissue matrix of muscle and tendon, which is critical for tissue regeneration after injury³³. Evidence also shows that GH modulates the activity of mesenchymal stem cells, guiding their differentiation and encouraging cellular repair³⁴. Furthermore, GH increases lean body mass by promoting muscle hypertrophy and reducing fat mass³⁵.

As such, GHRH analogs, such as sermorelin, may promote muscle growth and preserve lean mass by inducing GH secretion. One study demonstrated that sermorelin treatment increased aerobic reserve in forearm muscle (indicating a reduced need for anaerobic respiration during exercise) and also improved measures of muscle strength²⁸. Another randomized controlled trial showed that sermorelin increased skin thickness and lean body mass in men and women²⁷. During childhood and into adulthood, GH is also essential for bone development and remodeling, and GH therapy increases bone density and strength³⁶⁻³⁸.



3 Evidence for Sermorelin Activity

3.2. Metabolism and Weight Loss

The activity of GH promotes lipolysis, directly stimulating the breakdown of triglycerides in fat tissue and enhancing the utilization of fatty acids as an energy source³⁹. This can result in a reduction of body fat mass, and targeting GH and IGF-1 has been suggested as a mechanism to combat obesity⁴⁰.

A randomized controlled trial of older adults (aged 55 – 87) showed that treatment with GHRH increased IGF-1 levels by 117% and reduced body fat by 7.4%⁴¹. Other trials have used a GHRH analog, GHRH (1-44), which increases endogenous secretion of GH and IGF-1 in a manner similar to sermorelin⁴². One study showed that treatment with GHRH (1-44) increased fat-free mass and reduced total abdominal adiposity in middle-aged and older men⁴³. This peptide, also known as tesamorelin, is used to reduce excess visceral fat in HIV infection⁴⁴. GHRH treatment has been highlighted for its potential to reduce visceral adiposity, decrease triglycerides, and reduce measures of cardiovascular risk⁴⁵.

These studies investigating the impact of sermorelin and other GHRH analogs on muscle building and weight loss suggest that sermorelin is a potent stimulator of GH and IGF-1, which can yield significant improvements in body composition through enhanced metabolism²⁴.

3.3. Sleep and Recovery

Sleep patterns often change with age and are a significant factor in overall health. This can include more frequent awakenings during the night, less slow-wave sleep, an earlier rise in nighttime cortisol levels, and reduced secretion of GH⁴⁶. Disrupted sleep can lead to reductions in muscular strength, power, speed, endurance, and coordination across a range of sports and activities⁴⁷.

One study demonstrated that giving GHRH in pulses to healthy older adults can improve sleep by reducing nighttime awakenings and lengthening the first period of non-rapid eye movement (NREM) sleep⁴⁸. Intranasal GHRH has also been shown to lower cortisol levels at the start of sleep and reduce the typical increase in GH that occurs early in the night. These effects suggest that GHRH may act through both neural and hormonal pathways⁴⁹. Sleep plays a vital role in mental health and cognitive ability⁵⁰⁻⁵² and nightly GHRH treatment has been shown to improve cognitive function and sleep continuity in individuals with depression⁵³. These data suggest a role for sermorelin and GHRH analogs in promoting restful sleep and improved recovery by modulating endogenous GH levels.

3.4. Cognitive Function

GHRH and sermorelin may also play a more direct role in cognitive ability. Levels of GH and IGF-1 also regulate brain structure, function, and plasticity⁵⁴. In older adults, treatment with GHRH was found to slow cognitive decline, regardless of gender, estrogen status, or initial cognitive ability⁵⁵. The GHRH analog tesamorelin also showed benefits for adults with mild cognitive impairment as well as healthy older adults, with the most substantial improvements observed in executive functions⁵⁶. Analyses confirmed that GHRH had a significant positive effect on overall cognition, with similar benefits in both people with MCI and those who were cognitively healthy.

4 Dosage and Safety

Levels of GH in the body naturally fluctuate throughout the day, making the timing of sermorelin delivery crucial. Endogenous GH is secreted in pulses, with maximal release in the second half of the night²⁰. As such, sermorelin is typically administered before sleep to achieve its maximum impact on natural cycles. For the treatment of GH deficiency, children would receive around 30 µg/kg once daily⁵⁷, while higher concentrations have been used in clinical trials with adults¹⁷. For adults taking sermorelin to help build muscle and aid in recovery, such as bodybuilders, a dose of 200–300 µg (0.2–0.3mg) is typically taken once daily⁵⁸, equating to 2.5–3.75 µg/kg for an 80kg adult. Sermorelin is generally taken via subcutaneous injection, which should be performed precisely as instructed by your prescriber.



Sermorelin is typically well-tolerated and was deemed safe by the FDA in its previous market authorization¹². Common side effects include redness or pain at the injection site, while headaches, dizziness, nausea, and sleep issues are less common⁵⁷. Sermorelin is a hormonal therapy and can therefore interact with other medications.

While conventional sermorelin delivery is by injection, a new generation of delivery formulations is making injection-free delivery possible. StatRX is a needle-free liquid system that provides medications like sermorelin in simple, precise, single-dose vials. It makes treatment simple, accurate, and convenient for patients at home or on the go.

5 Conclusion

Sermorelin represents a scientifically grounded and clinically validated approach to supporting the production of growth hormone. By stimulating the pituitary gland in a way that closely parallels natural physiology, sermorelin restores more youthful patterns of GH and IGF-1 activity, benefiting strength, metabolism, sleep quality, recovery, and cognitive function. Decades of research confirm that sermorelin is generally safe and well-tolerated, with side effects typically limited to minor and transient issues.

While traditional administration has relied on injection to ensure bioavailability, advances in drug delivery are now expanding access and convenience. Fridays' StatRX oral delivery system marks a significant innovation, enabling efficient absorption without the need for needles. This needle-free option lowers barriers to therapy while maintaining reliability, making it an appealing advancement for individuals seeking the benefits of peptide therapy with greater comfort and ease of use.

Taken together, the evidence supports sermorelin as a safe, effective, and patient-friendly therapy for promoting hormone balance and healthy aging. With the added advantage of StatRX delivery, Fridays provides a trustworthy and innovative solution for consumers focused on longevity, vitality, and quality of life.

6 References

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