



CJC-1295 7.5 MG + IPAMORELIN 15 MG - VIAL

RESEARCH USE PROTOCOL

Reconstitution	Reconstitute by adding 6 mL of bacteriostatic water to the vial
Dosage	5 times per week (Monday–Friday) Draw 10 units (125 mcg CJC-1295 / 250 mcg Ipamorelin)
Time of Day	PM (before bed), preferably on an empty stomach
Injection Type	Subcutaneous (abdomen, thigh, or upper arm)
Product Details	Concentration: 7.5 mg / 15 mg / 6 mL
Product Duration	One vial will last 2 months
Program Duration	2 months; cycle 1 week off between each month
Storage	Store refrigerated at 2–8°C (36–46°F). Do not freeze. Protect from light.

WHAT IS CJC-1295 / IPAMORELIN ?

CJC-1295 and Ipamorelin are a peptide combination studied for their role in regulating growth hormone-related signaling pathways. CJC-1295 is associated with growth hormone-releasing hormone (GHRH) pathways, while Ipamorelin is studied for its interaction with ghrelin receptor signaling.

Together, they are commonly explored in research related to endocrine signaling, recovery processes, and metabolic regulation.

WHAT'S IN THE BOX?



HOW IT WORKS

MECHANISM OF ACTION

CJC-1295 and Ipamorelin are studied for their complementary interaction with growth hormone-related pathways:

Associated with stimulation of growth hormone signaling pathways

Supports IGF-1-related signaling processes

Linked to metabolic regulation and energy utilization

Associated with recovery and tissue repair pathways

Supports sleep-related signaling mechanisms

These mechanisms are associated with endocrine regulation and recovery-related processes.

RESEARCH OBSERVATIONS

Studied for endocrine signaling pathways

Studied for recovery and repair processes

Studied for metabolic regulation

Studied for sleep-related signaling

Studied for body composition-related pathways





OBSERVED REACTIONS IN RESEARCH SETTINGS

Research observations have noted mild and temporary responses such as localized irritation, mild headache, or temporary water retention. Responses may vary depending on protocol design and individual variability.

RESEARCH NOTES

In research settings, consistent protocol design and timing of administration may influence observed outcomes, particularly in relation to sleep and hormonal signaling patterns. Individual variability should be considered when interpreting results.

IMPORTANT CONSIDERATIONS FOR RESEARCH USE

Not intended for human consumption or therapeutic use

Not suitable for use during pregnancy or breastfeeding

Not recommended for individuals with severe medical conditions

Use in research settings may require professional oversight

Not for use alongside medical treatments without supervision

Individual variability may influence observed outcomes

EDUCATION - 06

Understanding skin reactions with **CJC-1295 / Ipamorelin.**

Some individuals may notice mild redness, itching, warmth, or a small bump at the injection site, along with brief facial flushing, a mild headache, or a lightheaded feeling shortly after injection. These reactions are temporary and generally harmless — they usually fade within an hour or two, and become less noticeable as your body adapts. Many people never experience them at all.

Why this happens

CJC-1295 and Ipamorelin work together to gently prompt your body to release its own growth hormone. As part of this signaling, the body can release **histamine** — a natural compound involved in immune communication, blood flow, and tissue repair. Ipamorelin's interaction with the ghrelin pathway can also momentarily widen blood vessels, which is why some people experience a warm flush, tingling, or pink cheeks for a short window after injecting.

A histamine reaction is the body's way of saying “*something new is here, let's pay attention.*” It widens local blood vessels (the warmth and redness), increases sensitivity in nearby nerves (the itch or tingle), and brings repair cells to the area. It is **not an allergy** in most cases — it's a normal, short-lived signal of your body responding and adapting.

Before you inject

- **Warm the syringe.** After drawing your dose, let it rest at room temperature for **30–60 minutes**. Cold solutions are more likely to sting and trigger sensitivity.
- **Ice the site.** Apply an ice pack wrapped in a clean cloth for 1–2 minutes to calm the skin.
- **Reconstitute gently.** Swirl, don't shake — and make sure the peptide is fully dissolved.
- **Choose calm skin.** Avoid areas that are irritated, bruised, or freshly worked out.

During injection

- Inject at a **90° angle** — more comfortable than 45°.
- Insert the needle only **halfway in**, just into the fatty layer.
- Push the plunger **slowly and gently**.

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- **Rotate sites** with every dose: upper glute, hip / love-handle, back of upper arm, or thigh.

If a reaction occurs

Lower your next dose, change your injection site, and build back up gradually. Flushing and headache are most common in the first 1–2 weeks and typically ease as your body adapts. Injecting before bed on an empty stomach can also reduce noticeable side effects. If a reaction is severe, spreads beyond the injection site, or causes difficulty breathing, discontinue use and contact your healthcare provider.

A NOTE ON HORMONAL CYCLES

For women, hormonal shifts before and during menstruation can heighten histamine sensitivity, so reactions may feel stronger during those days. Lowering the dose, pausing briefly, or extending the ice step can help you stay comfortable through your cycle.

This information is for educational purposes only and is not intended as medical advice. Always consult a qualified healthcare provider regarding your individual protocol.