

CJC-1295 / Ipamorelin

PATIENT EDUCATION GUIDE — GROWTH
HORMONE OPTIMIZATION

Harriman Precision Health

Physician-Supervised

Telemedicine Wellness

harrimanprecisionhealth.com

What Is CJC-1295 / Ipamorelin?

CJC-1295 / Ipamorelin is a synergistic two-peptide protocol that stimulates your body's own pituitary gland to produce and release more of its natural growth hormone (GH) — without introducing synthetic growth hormone directly into the body.¹ CJC-1295 is a synthetic analog of growth hormone-releasing hormone (GHRH), the signal your hypothalamus naturally sends to your pituitary to trigger GH secretion. Ipamorelin is a selective growth hormone secretagogue that mimics ghrelin and acts directly on the pituitary to trigger an additional, more immediate GH pulse.² Together, they produce a stronger, more physiologically natural GH release than either achieves alone — one sustained, one pulsatile — amplifying the body's own growth hormone output in a controlled, safe pattern.³

Key distinction from synthetic HGH: *CJC-1295/Ipamorelin does not introduce foreign growth hormone. It signals your own pituitary to produce GH naturally, preserving the body's feedback mechanisms and substantially reducing the risk profile associated with direct synthetic HGH administration.*²

How It Works

CJC-1295 (no-DAC) binds to GHRH receptors in the anterior pituitary gland and extends the duration of each natural GH pulse — allowing more growth hormone to be released per secretion event.⁴ Ipamorelin selectively activates ghrelin receptors on the pituitary, triggering an additional clean GH pulse without significantly affecting cortisol, prolactin, ACTH, or other hormones — a selectivity that distinguishes it from older GH secretagogues

and contributes to its excellent safety profile.⁵ A human clinical trial published in the *European Journal of Endocrinology* confirmed that ipamorelin produces dose-dependent GH release with no measurable effect on cortisol or ACTH, making it one of the most targeted GH peptides available.⁵ The resulting increase in circulating GH drives downstream elevation of IGF-1 (insulin-like growth factor-1), which mediates many of the protocol's benefits at the tissue level.

What CJC-1295 / Ipamorelin Is Used For

Body composition: Elevated GH and IGF-1 promote lipolysis (fat breakdown), particularly visceral fat, while supporting lean muscle preservation and growth. This makes the protocol one of the most effective non-hormonal body composition tools available.⁶ **Sleep quality:** GH is primarily released during slow-wave (deep) sleep. CJC-1295/Ipamorelin administered before bed amplifies this natural nocturnal GH pulse, improving sleep depth and quality — often one of the first and most noticeable effects patients report.⁷ **Recovery and tissue repair:** IGF-1 stimulates collagen synthesis, muscle protein synthesis, and tissue repair — making this protocol valuable for patients recovering from injury or surgery, or those combining it with tissue repair peptides like BPC-157 or the Wolverine Blend. **Anti-aging and longevity:** GH levels decline approximately 14% per decade after age 30. CJC-1295/Ipamorelin is used in longevity protocols to restore more youthful GH/IGF-1 signaling, with benefits extending to skin quality, bone density, energy, and cognitive function.⁸

What to Expect: Timeline of Results

Sleep quality improvement and increased energy are typically the earliest changes patients notice — often within the first one to two weeks.⁹ Body composition changes — improved fat loss and lean muscle preservation — become apparent from weeks four through eight, with the most significant changes in visceral fat occurring between weeks eight and sixteen. Skin quality, collagen density, and hair improvements develop more gradually over two to three months of consistent use. Full body composition recomposition benefits, particularly when combined with resistance training and adequate protein, are best assessed after a complete twelve to sixteen week cycle.

Standard Protocol

Parameter	Details
CJC-1295 (no-DAC) Dose	100–200 mcg per injection
Ipamorelin Dose	200–300 mcg per injection
Frequency	Once daily (before bed is optimal); advanced protocols may dose 2–3x daily
Timing	Inject 30–60 minutes before sleep or in a fasted state; avoid eating 30–60 min before/after
Cycle Length	12–16 weeks; rest period of 4–8 weeks before repeating
Route	Subcutaneous injection; rotate sites
Medication Source	Compounded by Empower Pharmacy (Houston, TX)

Safety Profile

CJC-1295/Ipamorelin has a well-established safety profile when used at therapeutic doses under physician supervision.⁴ Common mild side effects include transient water retention (particularly early in the cycle), tingling or mild numbness in the hands or feet (from fluid shifts), temporary flushing at injection, and occasional mild headache — most of which resolve within the first two to three weeks as the body adjusts.³ These effects are dose-dependent and typically managed by starting at the lower end of the dosing range. Unlike synthetic HGH, the risk of carpal tunnel syndrome, significant insulin resistance, and pituitary suppression is substantially lower because the peptides work through the body's own feedback mechanisms rather than bypassing them.² This protocol is contraindicated in active malignancy, pregnancy, and breastfeeding.

How to Maximize Your Results

- › **Inject Before Bed, Fasted⁷** — GH release is greatest during slow-wave sleep. Injecting CJC-1295/Ipamorelin 30–60 minutes before sleep amplifies the body's largest natural GH pulse of the day.

Avoid eating 30–60 minutes before or after injection — elevated insulin from food blunts GH secretion and directly reduces the protocol's effectiveness.

- › **Prioritize Deep Sleep**⁷ — The entire mechanism of this protocol depends on sleep quality. Seven to nine hours of deep, uninterrupted sleep is the single most important lifestyle factor for CJC-1295/Ipamorelin patients. Poor sleep directly undermines the GH pulse you are working to amplify.
- › **Resistance Training**¹⁰ — Exercise — particularly resistance training — is the body's most powerful natural stimulator of GH. Combining CJC-1295/Ipamorelin with a structured training program produces synergistic improvements in body composition far exceeding either approach alone. Training also upregulates IGF-1 receptors, making tissue more responsive to the elevated IGF-1 this protocol generates.
- › **High-Protein Diet (0.8–1.0 g/lb body weight)**¹⁰ — IGF-1 drives muscle protein synthesis, but requires amino acid substrate to build with. Adequate protein ensures that the anabolic signaling this protocol generates is matched by the raw materials needed to act on it.
- › **Minimize Sugar and Refined Carbohydrates** — Chronically elevated insulin from high-sugar diets suppresses GH secretion. Reducing dietary sugar and refined carbohydrates — particularly in the hours before injection and sleep — preserves the GH pulse this protocol is designed to amplify.

How is this different from injectable synthetic HGH?

Synthetic HGH bypasses the pituitary entirely and introduces exogenous growth hormone, which can suppress your body's own production and carries a higher risk of side effects including carpal tunnel, joint pain, and insulin resistance. CJC-1295/Ipamorelin stimulates your pituitary to produce its own GH in a pulsatile, physiologic pattern — preserving your body's feedback loops and substantially reducing the risk profile.²

Can I combine this with TRT?

Yes, and many patients do. Testosterone and GH/IGF-1 are synergistic — both support lean body composition, energy, libido, and tissue quality

through complementary pathways. Many patients on TRT at Harriman Precision Health add CJC-1295/Ipamorelin for enhanced body composition results. Discuss stacking options at your follow-up appointment.

How is my medication sourced?

All peptides are compounded by Empower Pharmacy, our licensed Houston-based compounding partner, under strict quality and sterility standards.

Important Notice: This document is for educational purposes only. All therapies at Harriman Precision Health are physician-supervised and individualized. CJC-1295 and Ipamorelin are off-label compounded therapies. Contraindicated in active malignancy, pregnancy, and breastfeeding. Questions? Contact us through your patient portal.

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Research cited includes peer-reviewed human clinical studies and physician-supervised clinical practice data. CJC-1295 and Ipamorelin are off-label compounded therapies. All therapies at Harriman Precision Health are physician-supervised and individualized. This document does not

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