IPAMORELIN

GROWTH-HORMONE SECRETAGOGUE RESEARCH

Benefits, research claims, evidence boundaries, and safety context—in one page.

GH SECRETAGOGUE

NOT FDA-APPROVED

WHAT THE EVIDENCE IS STUDYING

Ipamorelin is a ghrelin-receptor agonist and growth-hormone secretagogue. Small human studies have characterized short-term GH release and pharmacokinetics—not broad clinical benefits.

RESEARCH PROFILE

- **Primary target**
  GHSR / ghrelin receptor
- **Human evidence**
  Small PK/PD studies
- **Clinical status**
  Not FDA-approved

EVIDENCE REALITY CHECK

Acute GH release after administration is a pharmacodynamic signal. It does not establish improved body composition, muscle gain, sleep, recovery, longevity, or injury healing.

BEST WAY TO DESCRIBE IT

A research secretagogue with limited human outcome evidence.

SCAN FOR THE LIVE GUIDE

Opens the current printable PDF at rippedtidebiolabs.com.

Permanent Education Center resource link.

1 ACUTE GH RELEASE

Early human studies found dose-related GH release and described a short elimination half-life. They were not designed to prove meaningful long-term health outcomes.

2 SELECTIVITY CLAIMS

Preclinical work suggested greater selectivity for GH release than some older secretagogues. Selectivity does not remove downstream GH/IGF-1 risks.

3 BODY-COMPOSITION CLAIMS

Controlled evidence has not established that ipamorelin builds muscle, reduces fat, accelerates recovery, or improves sleep in healthy people.

4 EVIDENCE GAP

Long-term dosing, cardiovascular and glucose effects, tumor-related risk, immunogenicity, interactions, and product consistency are insufficiently characterized.

IMPORTANT SAFETY + REGULATORY NOTE

Ipamorelin is not FDA-approved. FDA reviews have identified insufficient safety information and concerns about immunogenicity and peptide-related impurities for compounded use. GH-axis stimulation may contribute to fluid retention, joint symptoms, glucose changes, and other systemic effects. Educational only—not a recommendation to use.

Sources: Raun et al., Eur J Endocrinol. 1998;139:552-561; Gobburu et al., Pharm Res. 1999;16:1412-1416; FDA Pharmacy Compounding Advisory Committee materials (2024).