Growth Hormone Releasing Peptide - 2 (GHRP2)

Is a synthetic six amino acid peptide that has robustly potent properties.

GHRPs are a small family of peptides acting at the pituitary and the hypothalamus to release Growth hormone (GH) through the activation of a specific, G protein-coupled receptor.

They were discovered 20 years ago as synthetic metenkephalin- derived oligopeptides (Synthetic tissue derived amino acids). Although it has no structural homology with Growth Hormone Releasing Hormone (GHRH), in clinical studies GHRP-2 demonstrated action on the pituitary to release Human Growth Hormone (HGH). Similar results were effective when GHRP-2 was administered sublingual. Clinical studies showed the most potent GHRP being the hexapeptide GHRP-2.

Growth Hormone Releasing Peptide 2(GHRP2) substantially stimulates the pituitary gland's increased natural production of the body's own endogenous human growth hormone (HGH). This therapy consists of daily subcutaneous dosing. Growth Hormone releasing peptide 2, GHRP2 has shown on it's own to robustly increase IGF-1 levels, and even greater results occurred when used with Growth Hormone Releasing peptide 6 to which also stimulates the pituitary gland to produce increased natural secretion of human growth hormone. This also boosts the hypothalamus function as well.

The results of the clinical studies published in the Journal of Endocrinology and Metabolism in 1997 for GHRP2 - showed that a medically supervised, prescribed and administered therapy increased growth hormone levels in adults and children, who have growth hormone deficiency.

The increase in the body's growth hormone via elevated IGF-1 levels produced by the pituitary gland in response to GHRP2 therapy -- has an anabolic effect on the tissues of the body and many other benefits.
Frequently asked Questions

Q: Why use GHRP2 instead of Growth Hormone?

A: This can be used alone or as an adjunct to HGH therapy. Both methods will yield robust results. The synergy of using GHRP2 with GHRP 2 and Sermorelin is that it allows your own natural production to remain and rebuild your own ability to produce HGH. Injecting growth hormone alone suppresses your own ability to produce HGH.

Q: I have heard of using growth hormone orally and don't have much faith in this manner of its application. Can you explain about this?

A: Growth hormone has a brief half-life and is rendered ineffective when orally applied, swallowed and passed into the gastric tract. Then it must pass through the liver when applied orally. This is why HGH is effectively administered through subcutaneous injections. Conversely, GHRP2 oral mucosal delivery i.e. sublingual/ intranasal as demonstrated in clinical studies, is weakly effective as an alternative method of systemic delivery. Injections offer 100% delivery.