thetrutides

BPC-157

The most-studied healing peptide in animal research

UPDATED 4 AUGUST 2026

BPC-157 has one of the largest and most consistent preclinical literatures of any research peptide, and one of the thinnest human clinical records. Both facts matter, and here is what each actually shows.

In Plain English

BPC-157 is based on a protective substance the stomach already makes to heal itself from the inside. Researchers got curious whether that same repair signal could help other injured tissue — a strained tendon, a sprained ankle — recover faster. In animals it behaves like a general-purpose repair signal across almost every tissue tested. The catch is that the signal is strong in hundreds of animal studies and close to unmeasured in people.

What people use it for. Overwhelmingly soft-tissue recovery — tendon and ligament strains, joint discomfort, post-training repair — and gut health, which is where the original research started. It is the single most requested compound in the recovery category.

What to know before you buy. The animal evidence is genuinely impressive and the human evidence is genuinely thin, and both of those are true at once. Anyone telling you BPC-157 is clinically proven in people is overselling it. Anyone telling you there is nothing behind it is underselling three decades of consistent animal work. It is typically run in short cycles of several weeks rather than continuously.

What It's Used For

GOAL	WHAT THAT RESTS ON
Tendon & ligament recovery	The most replicated finding in its literature — improved structural and functional healing across multiple animal injury models
Muscle repair after hard training	Accelerated repair in induced-injury animal models
Gut and digestive comfort	Its original and most extensively studied application, consistent with its gastric origin
Joint discomfort	An uncontrolled case series of 16 people reported 14 saw significant relief at 6-12 months

The left column lists goals people commonly pursue with this compound; the right column states what that rests on. These are described uses and research findings, not proven outcomes or treatment claims. Individual results vary and no outcome is promised.

Pricing & Sizes

PRICING

10mg vial	$48

Bulk pricing: 2-3 vials −5% | 4-6 vials −10% | 7-9 vials −15% | 10+ vials −20%

Ships sealed and lyophilized — stable for years at room temperature, reconstitute before use, or ask and it will be reconstituted free at the volume shown below. **Free shipping on every order, no minimum.** Third-party COA available for every batch — HPLC purity and mass spec verification.

Reconstitution — bacteriostatic water: 10mg vial at 2mL = 5mg/mL, so 10 units on a 100-unit syringe draws 0.5mg. Concentrations are arithmetic from vial content and diluent volume, not a dosing recommendation.

Also Available in These Blends

BLENDS CONTAINING BPC-157

Wolverine 20mg — adds TB-500	$95
GLOW 70mg — adds GHK-Cu + TB-500	$100
KLOW 80mg — adds GHK-Cu + KPV + TB-500	$110

Bulk pricing: 2-3 vials −5% | 4-6 vials −10% | 7-9 vials −15% | 10+ vials −20%

Same peptide, supplied alongside others in a single vial. **Ships sealed and lyophilized** — stable for years at room temperature, reconstitute before use, or ask and it will be reconstituted free at the volume shown below. **Free shipping on every order, no minimum.** Third-party COA available for every batch — HPLC purity and mass spec verification.

At a Glance

CLASS	Synthetic pentadecapeptide derived from a protective protein found in human gastric juice
ORIGIN	Dr Predrag Sikiric and colleagues, University of Zagreb, early 1990s
PRECLINICAL	100+ published animal and in-vitro studies spanning tendon, ligament, muscle, gut, skin, cornea and bone
HUMAN DATA	Extremely limited — small pilot studies and uncontrolled case series; no completed randomised controlled trial
REVIEWED FOR	Ulcerative colitis (the indication FDA actually evaluated at PCAC)
REGULATORY (US)	Not FDA-approved. PCAC recommended for 503A listing 23 July 2026; no FDA action taken
FORMAT	10mg lyophilised vial

100+	1 of 36	8-6-1	0
PRECLINICAL STUDIES	STUDIES IN HUMANS	PCAC VOTE	COMPLETED RCTS

REGULATORY STATUS — READ THIS FIRST

On 23 July 2026 the FDA Pharmacy Compounding Advisory Committee voted **8-6-1 to recommend** BPC-157 (free base and acetate) for the Section 503A bulk drug substances list. That vote is **advisory only.** As of 4 August 2026 the FDA has taken no action on it, has not opened rulemaking, and has not moved the substance to the interim Category 1 list. FDA's own scientific reviewers had recommended *against* all seven peptides; the committee voted against staff on six consecutive votes, so the usual assumption that a PCAC recommendation predicts the agency's decision is weaker here than normal. Several outlets have reported this as the FDA "clearing", "approving" or "adding" these peptides to the bulks list. That is inaccurate. Nothing has been added and nothing is legally cleared.

What the Research Shows

Preclinical — broad and consistent

The animal case is unusually consistent across three decades and many independent laboratories. Documented effects include:

- **Tendon and ligament** — improved structural and functional recovery across multiple injury models
- **Muscle** — accelerated repair following induced injury
- **Gastrointestinal mucosa** — the original and most extensively studied application, consistent with its gastric origin
- **Skin, cornea and bone** — accelerated healing in smaller study sets

Proposed mechanisms

Animal work points to several overlapping mechanisms: promotion of angiogenesis (new blood vessel formation supporting healing tissue), modulation of growth factor pathways, and anti-inflammatory and antioxidant activity at injury sites. These are biologically plausible and consistent with the breadth of effects seen across tissue types.

Human — thin

STUDY	DESIGN	REPORTED FINDING
IV safety pilot (2025)	n=2, IRB-approved	Tolerated up to 20mg IV; no serious adverse events reported
Interstitial cystitis series (2024)	n=12, uncontrolled	80-100% symptom resolution with bladder injection
Knee pain series (2021)	n=16, uncontrolled	14 of 16 reported significant relief at 6-12 months
Phase I safety trial (2015)	n=42, registered	Never published; sponsor cancelled submission in 2016 with no public explanation

A 2025 systematic review of 36 published BPC-157 studies found only one involved human participants. That ratio is the clearest single summary of where the evidence stands.

What FDA Said at the Hearing

FDA's central objection was identity, not efficacy. Reviewers pressed the question "what *is* BPC-157?" — noting the literature describes substances with a variable amino acid count and no settled salt, ester or free base form. Because different salts and esters of the same active moiety can carry very different physicochemical, toxicological and PK/PD properties, FDA argued characterisation is a prerequisite to any quality standard, not a technicality.

Section 503A permits a pharmacy to compound with a bulk substance only if it is a component of an approved drug, is subject to a USP monograph, or appears on the 503A bulks list. These peptides meet none of the three today. FDA removed them from Category 2 in April 2026 when the nominations were withdrawn, but as Polsinelli noted, Category 2 removal does not by itself confer Category 1 interim enforcement discretion.

THE BOTTOM LINE

Strong mechanistic and animal-model support; unproven in humans. The first controlled human trial began recruiting in 2026. Until it reports, that is the honest evidentiary position — and the PCAC recommendation does not change it, because a compounding-eligibility vote is not a finding of efficacy.

Also in the Range

Also in **Wolverine** (with TB-500), **GLOW** (adds GHK-Cu) and **KLOW** (adds GHK-Cu and KPV). If you are running any of those, you already have BPC-157 — adding this vial on top doubles it rather than broadening coverage.

 Sources: FDA PCAC meeting materials and briefing documents, 23-24 July 2026; Hyman, Phelps & McNamara FDA Law Blog, 24 and 28 July 2026; Mintz, 29 July 2026; Polsinelli, 22 April 2026. Lee & Burgess IV safety pilot, PMID 40131143, 2025.