

GHK-Cu has the most substantial published research base of any compound in this range. It occurs naturally in human plasma, declines sharply with age, and has been studied in dermatology and wound healing for decades — well before the current peptide wave.

● In Plain English

GHK-Cu is a tiny peptide that grabs onto a copper atom and carries it where the body needs it for tissue repair. You make it naturally, and you make steadily less of it as you age — which is the basic reasoning behind adding it back. Copper is essential for building collagen and elastin, the proteins that keep skin firm and wounds closing properly.

What people use it for. Skin quality, fine lines and firmness, hair, and wound or tissue repair. It is the most cosmetically oriented compound in the range and has been used in skincare for decades.

What to know before you buy. The research base here is the strongest of anything we carry, with one important qualifier: most of it studied GHK-Cu applied to the skin, not injected. That does not mean injectable use is worthless, but it does mean the headline research is not quite testing the thing being sold. The blue colour is the copper and is expected. Its FDA review has not happened yet.

● What It's Used For

GOAL	WHAT THAT RESTS ON
Skin firmness and elasticity	Controlled human topical studies reporting improvement in firmness, elasticity and fine lines
Collagen production	Stimulates collagen and glycosaminoglycan synthesis in skin fibroblasts
Wound and tissue repair	Accelerated closure and improved tissue quality across animal and human work
Hair follicle support	A smaller but genuine body of research
Replacing what age takes	Plasma levels fall substantially from early adulthood onward

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

50mg vial	\$35
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100mg vial	\$60
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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: 50mg vial at 2.5mL = 20mg/mL, so 10 units on a 100-unit syringe draws 2mg; 100mg vial at 5mL = 20mg/mL, so 10 units on a 100-unit syringe draws 2mg. Concentrations are arithmetic from vial content and diluent volume, not a dosing recommendation.

● Also Available in These Blends

BLENDS CONTAINING GHK-CU

GLOW 70mg — adds BPC-157 + TB-500	\$100
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KLOW 80mg — adds BPC-157 + KPV + TB-500	\$110
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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	Naturally occurring copper-binding tripeptide (glycyl-L-histidyl-L-lysine) complexed with copper(II)
ORIGIN	Isolated from human plasma by Dr Loren Pickart, 1973
AGE DECLINE	Plasma levels fall substantially from early adulthood into later life, which underpins much of the interest in supplementation
EVIDENCE	The deepest of any compound here — including controlled human topical studies in dermatology
REGULATORY (US)	Not FDA-approved as a drug. Widely used in cosmetics. Not on the July 2026 PCAC agenda
NEXT REVIEW	Expected at a separate PCAC meeting before the end of February 2027
FORMAT	50mg and 100mg vials

1973

FIRST ISOLATED

Feb 2027

PCAC REVIEW EXPECTED

Topical

STRONGEST EVIDENCE ROUTE

3

AMINO ACIDS

REGULATORY STATUS — SEPARATE TRACK

GHK-Cu was **not** among the seven peptides reviewed at the July 2026 PCAC hearing. Mintz reports that a second PCAC meeting covering an additional five peptides is expected before the end of February 2027, and GHK-Cu is on that later track. Coverage describing peptides as recommended or cleared in July 2026 does not apply here. Its status is unchanged and unresolved.

● What the Research Shows

GHK-Cu is the rare compound in this category where the phrase “human data” means controlled studies rather than case series. The dermatological literature is the strongest part:

- **Collagen synthesis** — stimulation of collagen and glycosaminoglycan production in skin fibroblasts
- **Wound healing** — accelerated closure and improved tissue quality across animal and human work
- **Skin remodelling** — controlled topical studies reporting improvements in firmness, elasticity and fine lines
- **Antioxidant and anti-inflammatory activity** — documented in multiple models
- **Hair follicle support** — a smaller but real body of work

Route matters here

The strongest evidence for GHK-Cu is **topical**. Much of the dermatological literature is built on creams and serums applied to skin, not on injection. That distinction is often blurred in marketing, and it is worth being clear about: injectable use has a thinner evidence base than the headline research suggests.

● Practical Notes

GHK-Cu solutions carry a characteristic deep blue colour from the copper complex. This is expected and is not a defect. As with all peptides, visual clarity is a floor for quality assessment rather than a guarantee of potency — a COA is the only meaningful check.

Because copper is an essential but tightly regulated trace mineral, sustained high-dose use is a reasonable thing to raise with a clinician, particularly alongside other copper-containing supplementation.

THE BOTTOM LINE

The best-evidenced compound in this range, with the important qualifier that the strongest data is topical rather than injectable. Its FDA review has not happened yet — expected before the end of February 2027 — so nothing about its compounding status is settled either way.

● Also in the Range

Also in **GLOW** (with BPC-157 and TB-500) and **KLOW** (adds KPV). The standalone vial is the option if you want the copper peptide without the recovery peptides.

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