thetrutides

MELANOTAN II

The broader melanocortin agonist — stronger effects, wider risks

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Melanotan II produces more pronounced effects than Melanotan I, for a straightforward reason: it is less selective. It activates several melanocortin receptors rather than one, and that lack of selectivity accounts for both its reputation and its problems.

In Plain English

Melanocortin receptors sit in several places in the body and do several unrelated jobs — pigmentation, sexual arousal, appetite regulation. Melanotan I mainly hits the pigment one. Melanotan II hits most of them. That is why its effects are stronger and broader, and it is also why the side effect list is longer.

What people use it for. Tanning, with sexual arousal effects and appetite suppression as commonly reported secondary effects.

What to know before you buy. Melanotan II is stronger than Melanotan I because it is less selective — it activates several receptors instead of mainly one. That is the whole story of this compound, good and bad. The same skin cancer consideration applies as with MT-I, and more so given the wider activity: if you have any melanoma history, unusual moles or heavy sun damage, see a dermatologist first. Additionally, prolonged painful erection is a documented risk with this compound and is a medical emergency requiring immediate treatment. Nausea on early doses is common.

What It's Used For

GOAL	WHAT THAT RESTS ON
Tanning with less sun	Melanocortin receptor activation stimulates melanin independently of UV
Stronger than MT-I	Broader receptor activity produces more pronounced effects
Appetite suppression	A commonly reported MC4R effect
Honest caveat	The same breadth causes the side effects. Priapism is a documented risk and a medical emergency. Skin history screening applies

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	$36

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.

At a Glance

CLASS	Synthetic cyclic analogue of α-melanocyte stimulating hormone
RECEPTORS	Non-selective across melanocortin receptors including MC1R, MC3R and MC4R
EFFECTS	Pigmentation (MC1R) plus pronounced sexual arousal effects and appetite suppression (MC3R/MC4R)
APPROVED STATUS	**None anywhere.** Unlike Melanotan I, MT-II has no approved counterpart in any market
RELATED APPROVED DRUG	Bremelanotide (Vyleesi) is an MT-II-derived analogue approved for hypoactive sexual desire disorder — a different, refined molecule
REGULATORY (US)	Not FDA-approved. **Not** on the July 2026 PCAC agenda
FORMAT	10mg vial

3+	None	Vyleesi	Not reviewed
RECEPTORS ACTIVATED	APPROVED ANYWHERE	REFINED DERIVATIVE APPROVED	JULY 2026 PCAC

IMPORTANT SAFETY CONSIDERATIONS — READ FIRST

Two distinct issues. First, like all melanocortin tanning peptides, MC1R activation stimulates melanocytes and **does not distinguish normal from abnormal ones** — a personal or family history of melanoma, atypical naevi or significant sun damage is a specific contraindication to discuss with a dermatologist. Case reports describe changes in existing moles and eruptive naevi following melanotan use. Second, MT-II's broader receptor activity is associated with reported adverse effects including **priapism** (prolonged painful erection, a urological emergency), nausea and vomiting, and blood pressure changes. Not on the July 2026 PCAC agenda.

MT-II vs MT-I

	MELANOTAN II	MELANOTAN I
Selectivity	Broad — MC1R, MC3R, MC4R	More MC1R-selective
Sexual effects	Pronounced; spontaneous erections commonly reported	Minimal
Appetite	Suppression commonly reported	Minimal effect
Nausea	Common, particularly on early doses	Less common
Priapism risk	Reported; a recognised concern	Not characteristic
Approved counterpart	None	Scenesse (afamelanotide)

The Bremelanotide Comparison

Bremelanotide, marketed as Vyleesi, is an FDA-approved drug for hypoactive sexual desire disorder in premenopausal women, and it was derived from Melanotan II. This is sometimes cited as validation of MT-II. It is better read the other way round: pharmaceutical developers took MT-II, refined it into a more selective molecule, and put *that* through clinical trials. The approval belongs to the refined compound, not to MT-II.

MT-II itself has no completed approval-standard trial programme in any jurisdiction, and no long-term safety data for cosmetic use.

THE BOTTOM LINE

Stronger and broader in effect than Melanotan I, with a correspondingly wider risk profile and no approved counterpart anywhere. Given the melanocyte activation mechanism and the reported priapism and cardiovascular effects, this is a compound where a dermatologist and a clinician — not a supplier — should be answering the screening questions.

Also in the Range

Compare with **Melanotan-I**, which is more MC1R-selective, has an approved counterpart in a rare disease indication, and lacks the sexual, appetite and priapism effects.

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