Peptides: What You Should Know

PATIENT INFORMATION GUIDE

Why We Wrote This

Many of our patients ask about peptides — BPC-157, TB-500, "healing peptides," "anti-aging peptides," and the combinations sold online and at wellness clinics. You deserve a straight answer from your pain physician rather than from a website that is selling the product. This guide is that answer.

What a Peptide Actually Is

A peptide is simply a short chain of amino acids — the building blocks of protein. Your body makes thousands of them. Insulin is a peptide. So are several real, FDA-approved medicines. The word itself tells you nothing about whether a product works or is safe. What matters is whether a *specific* peptide has been tested properly in people.

Two Very Different Groups Share the Same Name

Group one: approved peptide medicines. These went through large, controlled human trials and FDA review. Examples include ziconotide (a pump medication for severe pain), calcitonin (for pain from a fresh spinal fracture), and the weight-loss medicines semaglutide (Wegovy/Ozempic) and tirzepatide (Zepbound/Mounjaro). We prescribe these when they fit your situation.

Group two: "wellness" peptides. BPC-157, TB-500, GHK-Cu, CJC-1295, ipamorelin, sermorelin, MOTS-c, epitalon, thymosin and similar products. None is FDA-approved for any use. None has been through a properly controlled human trial for pain, injury, or aging. Almost everything you read about them comes from animal studies, from the people selling them, or from social media.

What the Evidence Really Shows

BPC-157. Hundreds of studies exist — in rats and mice, almost all from one laboratory. In people, the entire published record for pain or injury is a look-back review of 16 knee patients with no comparison group and a two-person safety study. That is not enough to know whether it works. It is also cleared from the body in under 30 minutes, and there is no human evidence that it survives digestion when taken by mouth. The way it is thought to work — by growing new blood vessels — is the same process cancer drugs are designed to block, and no one has studied its long-term safety in people.

TB-500. Sold as a "healing" peptide, but there is not a single human trial of it for muscle, tendon, ligament, or joint injury. A related compound (thymosin beta-4) did reach a large, properly designed trial — for an eye condition — and that trial failed in 2025 once it was large enough to give a reliable answer.

Growth-hormone peptides (sermorelin, CJC-1295, ipamorelin). These are sold for energy, muscle, fat loss, and "anti-aging." The best research on raising growth hormone in healthy adults shows small changes in body fat and muscle, no improvement in strength or function, and more swelling, joint pain, carpal tunnel, and elevated blood sugar. Higher levels of the growth factor these peptides raise are linked to prostate cancer risk. Every company that tried to develop these as medicines stopped — one program ended after a participant died, another was flagged by the FDA over reports of serious harm.

The "anti-aging" and "mitochondrial" peptides (MOTS-c, epitalon, NAD+ drips, and others) have no completed human trials showing they slow aging, extend life, or improve how you feel.

The Honest Summary

The peptides being marketed for pain, injury, and aging have promising animal data and almost no human data. That is where many promising drugs sit before they fail. The peptide with the strongest proven effect on joint pain is one nobody markets as a "healing peptide" — the weight-loss medicine semaglutide, which cut knee arthritis pain substantially in a large controlled trial (see the back of this page).

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Peptides: Safety & Our Policy

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The Biggest Risk Is the Vial Itself

Because these peptides are not approved medicines, no one is required to check what is in the bottle. A 2026 analysis of more than 6,000 vials from over 200 online sellers found the following:

FINDING	WHAT IT MEANS FOR YOU
Wrong or missing ingredient	About 7 in 10 vials failed pharmaceutical manufacturing standards. For TB-500, roughly 1 in 10 vials did not contain the substance on the label at all.
Bacterial toxins	Endotoxin (a bacterial by-product that causes fever, inflammation, and joint infection symptoms) was measurable in about 15% of tested vials and detectable in most of the rest.
Dosing mistakes	Products arrive as powder you mix yourself. Documented cases include a 66-fold overdose, muscle breakdown and kidney injury from stacking several peptides, and serious low blood sugar.
Infections	Home injections with non-sterile product have caused abscesses, deep tissue infections requiring surgery, and outbreaks of hard-to-treat bacteria that need months of antibiotics.
Heavy metals	Some products tested contained arsenic and lead well above safety limits.

Side effects from these products are not tracked by any national safety system, because they are not sold as medicines. "No reported side effects" means no one is counting — not that they are safe.

Where the Law Stands (as of September 2026)

You may have heard that "the FDA approved peptides." It did not. In 2026 an FDA advisory panel voted — narrowly, and against the recommendation of the FDA's own scientists — to *consider* allowing pharmacies to compound a few of them. That vote changed nothing yet. Today, no wellness peptide is FDA-approved, and pharmacies cannot legally compound them. Products labeled "for research use only" are being sold in violation of federal law, and sellers and a physician have been federally prosecuted in 2026. All of these peptides are also banned in competitive sport and by the U.S. military.

Our Policy at Abilene Pain

We do not prescribe, inject, or sell BPC-157, TB-500, growth-hormone peptides, or other unapproved peptides. That is not because we dismiss the idea — it is because the evidence and the product quality are not where they need to be, and we will not inject something into your joint or near your spine when 1 in 10 vials may not be what the label says.

If you are using peptides, please tell us. You will not be lectured or turned away. We need to know before any injection or sedated procedure, and we can help you watch for problems. If you serve at Dyess or compete in tested sports, be aware that these products will fail a drug test.

What We Can Offer That Is Proven

- **Weight-loss medicines for knee arthritis.** In a large controlled trial, semaglutide reduced knee arthritis pain far more than placebo. These are peptides — approved ones. Ask us whether you qualify.
- **Image-guided procedures** — nerve blocks, radiofrequency ablation, joint injections, and spinal fracture treatment.
- **Physical therapy and strength training** — the most durable treatment for most tendon, joint, and back pain.
- **Oral collagen peptides.** If you want to try a peptide, this is the one we can support: modest benefit for mild knee arthritis in small studies, inexpensive, and essentially no risk.
- **Non-opioid medications**, topical treatments, and treatment of sleep and mood problems that amplify pain.

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