

Sermorelin

ACTIVE Sermorelin (GHRH 1-29)
FORM Injectable; strength not listed



01 / TREATMENT OVERVIEW

The clinical and commercial fit

Potential support for deeper sleep, recovery, daytime energy, lean-mass goals, and healthier body composition. Stimulates the patient’s own growth-hormone pathway, which may feel more physiologic than direct growth-hormone replacement. Can be paired with sleep, resistance training, nutrition, body composition, glucose, and IGF-1 tracking.

WHY PRACTITIONERS CONSIDER IT

Potential support for deeper sleep, recovery, daytime energy, lean-mass goals, and healthier body composition.

Can be paired with sleep, resistance training, nutrition, body composition, glucose, and IGF-1 tracking.

02 / TREATMENT FEATURES

01 Administration • Catalog format: Injectable; strength not listed. The prescribing clinician and dispensing pharmacy confirm the exact preparation, concentration, handling, and administration technique.	02 Typical frequency • No approved adult wellness schedule exists. Early physiology research used intravenous bolus dosing to measure growth-hormone response, not long-term treatment benefit.
03 Expected duration • No controlled adult wellness trial defines an appropriate course, maintenance plan, or durable response. Any endocrine use requires objective reassessment.	04 Practical advantages • Can be paired with sleep, resistance training, nutrition, body composition, glucose, and IGF-1 tracking.

03 / PATIENT BENEFITS

Why suitable patients may consider it

POTENTIAL PATIENT BENEFITS

What suitable patients may value

- Potential support for deeper sleep, recovery, daytime energy, lean-mass goals, and healthier body composition.
- Stimulates the patient's own growth-hormone pathway, which may feel more physiologic than direct growth-hormone replacement.
- May appeal to carefully selected adults seeking a monitored recovery or healthy-aging program.

ADDITIONAL PATIENT VALUE

Experience and care goals

- Can be paired with sleep, resistance training, nutrition, body composition, glucose, and IGF-1 tracking.
- Offers a familiar endocrine pathway with an individualized, outcomes-based treatment conversation.

Sermorelin can raise growth-hormone signals, but broad adult wellness outcomes remain uncertain. Current compounded use is not an approved anti-aging indication, and benefits are not guaranteed.

04 / IDEAL CLIENT PROFILE

Who is most likely to be a fit

BEST-FIT PATIENT

Qualification profile

- A carefully screened adult whose goals align with the potential benefits above and who understands that individual response varies.
- A patient willing to complete clinician-directed baseline review, monitoring, and an outcome-based follow-up plan.

CLINICAL CONTEXT

Qualification notes

- Can be paired with sleep, resistance training, nutrition, body composition, glucose, and IGF-1 tracking.
- Strongest fit occurs when the exact formulation, route, source, contraindications, and measurable goals can be clearly documented.

05 / POTENTIAL SIDE EFFECTS

The safety information patients need

COMMON OR TEMPORARY

Expected tolerability issues

- Reliable rates for current compounded adult use are unavailable. Potential effects include injection reactions, flushing, headache, dizziness, nausea, sleep change, swelling, joint discomfort, tingling, and altered glucose.

SERIOUS OR IMPORTANT

Risks that change the decision

- Sustained growth-hormone or IGF-1 elevation may worsen edema, carpal-tunnel symptoms, glucose control, and untreated sleep apnea; long-term cardiovascular and cancer safety for wellness use is unknown.
- Unapproved compounded injection adds concentration, contamination, and sterility risk.

06 / CONTRAINDICATIONS

Who may not be a suitable candidate

AVOID OR USE SPECIALIST INPUT

Suitability limits

- Active malignancy, pregnancy or breastfeeding, uncontrolled diabetes, severe untreated sleep apnea, acute critical illness, significant pituitary mass symptoms, or unverifiable product identity.
- Pediatric height treatment outside pediatric endocrinology and healthy-adult anti-aging use presented as an approved indication.

Side effects and suitability notes are not exhaustive. The exact product, patient history, dosing, monitoring, and emergency guidance require review by an appropriately licensed clinician.

What to check before treatment

BEFORE TREATMENT

Screening checklist

- Review pituitary and cancer history, headaches or vision change, sleep and apnea risk, glucose status, edema and nerve symptoms, pregnancy status, medicines, baseline IGF-1, and other pituitary hormones when clinically appropriate.
- Confirm the exact compounded molecule, concentration, pharmacy, storage, and an outcome-based stopping plan.

ESCALATION

When to refer

- Suspected pituitary disease, abnormal IGF-1, new severe headache or visual symptoms, worsening glucose, major edema, neurologic compression, or sleep-apnea symptoms requires endocrinology or appropriate medical assessment.

Screening and referral decisions are patient-specific. This summary does not replace diagnosis, prescribing information, informed consent, or local clinical requirements.

What the strongest public sources support

CURRENT STATUS

Former Geref approvals were withdrawn in 2009 after the manufacturer discontinued production. Current compounded sermorelin is not approved for adult wellness, anti-aging, sleep, recovery, or body composition.

- A five-volunteer 1984 study showed a short-term GH rise after IV GHRH 1-29. It did not test meaningful health outcomes. FDA records note that Geref approvals were withdrawn in June 2009; a current compounded product is not the former approved drug.

KEY CLINICAL SOURCES

Primary or official source: Sermorelin/GHRH 1-29 healthy-volunteer physiology study, 1984

Primary or official source: FDA review noting withdrawal of Geref sermorelin approvals in 2009

Evidence and regulatory status can change. Confirm the current label, formulation, route, dose, pharmacy source, jurisdiction, and intended use before offering treatment.

How the research maps to this exact product

Sermorelin can trigger growth hormone release and was studied for diagnosing or treating growth hormone deficiency. Evidence for anti-aging, sleep, or body recomposition in healthy adults is weak.

STUDY 01

Primary human finding

- Early human physiology studies gave GHRH fragments, including 1-29, to small groups of healthy adults and showed short-term GH rises. They measured hormone response, not improved health.

STUDY 02

Supporting context

- Pediatric growth-deficiency studies used defined dosing and specialist monitoring. Those findings do not transfer to healthy adult wellness use.

Research on a related ingredient, route, dose, or population may not predict the outcome of the exact product offered. Potential benefits remain patient-specific and are not guaranteed.

What people report and how the evidence matches

REAL-WORLD REPORTS

What people describe

- About 10 detailed accounts were sampled. Deeper sleep and steadier energy after 2-4 weeks were common positive themes; visible body change was less consistent and often took months. Many saw no effect. Headache, flushing, swelling, tingling, and high glucose were reported.

TIMING AND MATCH

When changes are reported

- Sleep/energy claims: 2-4 weeks.
Body claims: 3-4 months.
- Physiology and pediatric deficiency studies do not validate general adult use.

SOURCE NOTES

Direct links are included for verification. Public personal accounts are unverified and cannot show how common an outcome is. Evidence for one ingredient, route, or dose does not automatically validate a different compounded or blended product.

Product listing: Lennox catalog page; accessed Aug 26, 2026

User-reported evidence: Four-month Sermorelin log, Reddit 2026

PRACTICE NOTE

This report supports informed discussion; it does not tell anyone to start, stop, or dose a treatment. Verify the exact ingredients, concentration, route, dispensing source, storage, beyond-use date, contraindications, and monitoring plan.