

GHK-Cu/BPC-157/TB-500 — Research Summary

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1. What It Is

GHK-Cu/BPC-157/TB-500 is a research-formulation blend combining three separately studied peptides into one lyophilized vial, formulated for its proposed tissue-repair, skin, and regenerative research applications. Ratios vary by supplier — confirm the specific ratio used on your product's Certificate of Analysis (COA).

2. Reported Effects in Research Literature

Each component has an independent research base; there is essentially no published data on the combined blend itself as a formulation.

- **GHK-Cu:** The most clinically documented of the three components, with roughly five decades of published research. Reported effects include accelerated wound healing, improved graft take, anti-inflammatory activity, and antioxidant action. Human topical/RCT-level data exists on dermal collagen density and a trial vs. topical minoxidil for androgenetic alopecia.
- **BPC-157:** The largest evidence base (100+ studies) is preclinical/animal, concentrated heavily in work from a single research group (University of Zagreb). Human data is limited but includes an unpublished Phase II ulcerative colitis trial, a discontinued 2015 Phase I safety trial, a small 2025 IV pilot safety study, a 2024 published pilot study on intravesical BPC-157 for interstitial cystitis (12 patients, 10/12 complete resolution), and a retrospective knee-pain case series (16 patients, 87.5% reporting relief).
- **TB-500 / Thymosin Beta-4:** Most completed human clinical trials were conducted on the full-length 43-amino-acid Thymosin Beta-4 protein, not specifically TB-500 (the shorter, 17-amino-acid fragment). Full-length Thymosin Beta-4 has been studied in human Phase 2 trials for chronic wounds and in ophthalmic trials for dry eye and neurotrophic keratopathy. No completed, published human trials exist specifically for the shorter TB-500 fragment.
- No published human data exists for the GHK-Cu/BPC-157/TB-500 blend as a combined formulation — everything above is component-level evidence. None of the three components is FDA-approved for any indication.
- **PCAC update (July 23, 2026):** The FDA's Pharmacy Compounding Advisory Committee voted to recommend both BPC-157 and TB-500 for inclusion on the 503A Bulk Drug Substances List (8–6, one abstention, for each), overriding FDA staff's own recommendation. GHK-Cu was not part of this review; a separate PCAC session on GHK-Cu (non-injectable routes) is expected before the end of February 2027. TB-500/thymosin-beta-4-class peptides are on the WADA Prohibited List.

3. Clinical & Preclinical Study References

Pickart L, Margolina A. "Regenerative and Protective Actions of the GHK-Cu Peptide in the Light of the New Gene Data." *Int J Mol Sci.* 2018;19(7):1987. PMID: 29986520

Park YM, et al. "GHK-Cu serum vs minoxidil for androgenetic alopecia: RCT." *J Dermatolog Treat.* 2022. PMID: 35549789

Sikiric P, et al. "Stable gastric pentadecapeptide BPC 157: novel therapy in gastrointestinal tract." *Curr Pharm Des.* 2011. PMID: 21548867

Lee E, Walker C, Ayadi B. Interstitial cystitis pilot study. *Alt Ther Health Med.* 2024;30(10):12-17. PMID: 39325560

Ehrlich HP, Hazard SW 3rd. "Thymosin beta4 enhances repair by organizing connective tissue." *Ann N Y Acad Sci.* 2010. PMID: 20536458

Malinda KM, Sidhu GS, Mani H, et al. "Thymosin beta4 accelerates wound healing." *J Invest Dermatol.* 1999;113(3):364-8.

Regulatory/Safety Note: GHK-Cu, BPC-157, and TB-500 are not approved by the FDA for the diagnosis, treatment, cure, or prevention of any disease, and this three-component blend has not been independently studied as a combined formulation.

Verification Update: The same new BPC-157 human pilot studies (interstitial cystitis, knee pain) identified for the standalone BPC-157 summary apply here at the component level. No new GHK-Cu or TB-500-specific data, and no combined-blend data, was found.

This compound has not been evaluated by the FDA and is not intended to diagnose, treat, cure, or prevent any disease in humans or animals.
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