

MAGNUS PHARMACEUTICALS

MOD GRF1-29

2mg MOD GRF 1-29 (VIAL)

Read all of this leaflet carefully before you start taking this medicine because it contains important information for you.

- Keep this leaflet. You may need to read it again.
- If you have any further questions, ask your doctor, pharmacist or nurse.
- This medicine has been prescribed for you only. Do not pass it on to others. It may harm them, even if their signs of illness are the same as yours.
- If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in this leaflet.

About

Mod GRF 1-29 is a synthetic growth hormone secretagogue from the growth hormone releasing hormone family. These compounds are based on GHRH, a natural peptide hormone that signals the release of GH from the pituitary gland. GHRH is one of two primary positive regulators of GH secretion in humans, acting together with ghrelin. Both hormones are the subjects of extensive drug development. With GHRH, though it can be synthesized as a drug product, it is not really adequate as a therapeutic agent. It is too short acting. Mod GRF 1-29 is potentially more viable. It is a shortened, modified form of GHRH that is more resistant to enzymatic cleavage. It has a longer half-life, and is a more potent agent for increasing serum GH and IGF-1 levels.

Mod GRF 1-29 is almost identical to CJC-1295 in structure. It differs only by the lack of an attached maleimidopropionic acid group, also known as Drug Affinity Complex (DAC). DAC temporarily binds CJC-1295 to serum albumin, greatly extending its half-life. This is why Mod GRF 1-29 is also commonly called "CJC-1295 without DAC." It simply lacks this complex. Because of this, Mod GRF 1-29 is much shorter acting. It has a half-life measured in minutes or hours instead of days. Whereas CJC-1295 can be injected weekly, Mod GRF 1-29 is usually injected several times daily. Otherwise, these two are the same drug... the same active peptide. In the fitness community, Mod GRF 1-29 is used for the support of muscle growth and fat loss, as well as its potential anti-aging properties.

Much of what else can be said of CJC-1295 should hold true for Mod GRF 1-29. Most basically, this is to be considered a "selective" GH secretagogue. It displays a great deal of specificity for growth hormone release, and is unlikely to significantly alter levels of cortisol, prolactin, LH (luteinizing hormone), or TSH (thyroid stimulating hormone). Likewise, significant spillover side effects pertaining to these hormones, which are common to many drugs of the GHRP class that mimic ghrelin, are unlikely with Mod GRF 1-29. That isn't to say the Mod GRF 1-29 and CJC-1295 are interchangeable. The short acting nature of Mod GRF 1-29 might make it more useful for fostering acute spikes in GH/IGF-1, when used alongside a similarly short acting GHRP (see: Combination Therapy).

Warnings

Mod GRF 1-29 is an unapproved new drug. A thorough understanding of its safety and propensity for side effects in humans is lacking at this time.

Obesity, uncontrolled hypothyroidism, hyperglycemia, or elevated plasma fatty acids may impair the effectiveness of Mod GRF 1-29. This drug should never be used during pregnancy, with cancer, a history of cancer, diabetic retinopathy, sclerosing diseases of the liver or lungs, intracranial hypertension, or uncontrolled diabetes.

Side Effects

Common side effects to Mod GRF 1-29 include flushing, warmth, dizziness, and transient hypotension following injection. Other common side effects include sleepiness, headache, diarrhea, nausea, and abdominal pain. Also frequently reported are adverse effects typically associated with other types of growth hormone therapy, such as water retention (edema), joint pain (arthralgias), carpal tunnel syndrome, and numbness or tingling in the extremities. Note that the incidence of GH-related side effects tends to be lower with GHRP therapy as compared to traditional hGFI. This is because GFI/IGF-1 release is subject to the limits of endogenous synthesis, and as such the drug is less amenable to overdosing.

The subcutaneous administration of this drug may cause redness, itching, pain, or lumps at the site of injection.

Administration

Mod GRF 1-29 may be given by subcutaneous injection, intramuscular injection, or IV infusion. The subcutaneous route is most often applied.

This drug has not been approved for use in humans. Prescribing guidelines are unavailable. When used for physique- or performance-enhancing purposes, Mod GRF 1-29 is generally administered at a dosage of 50-100 meg. This is given 1-3 times per day. If single episode dosing is preferred, this is taken before sleep. Day dose(s) are taken on an empty stomach, 30-60 minutes before feeding. This is to preserve optimal GH release, as elevated plasma fatty acids and/or glucose may blunt the GH elevating effects of Mod GRF 1-29. Total daily dosage generally does not exceed 300 meg.

Cycles of Mod GRF 1-29 usually last 3-4 months, though programs of 6 months or longer are not uncommon.