CJC 1295 No DAC Ipamorelin 5mg/5mg: A Complete Research Guide

Anyone who studies growth hormone secretagogues soon notices that catalog labels read like secret codes. One of the most common labels is **cjc 1295 no dac ipamorelin 5mg/5mg**, which describes a research blend that places 5 mg of a modified growth hormone-releasing hormone analog and 5 mg of a selective ghrelin-receptor agonist in a single vial. This guide, written in a simple teacher-style format, explains what each component is, why the equal ratio is popular, what the published literature really shows, and how a laboratory buyer can judge quality. Every statement is made in a laboratory-research context only, because these compounds are not approved medicines and are not intended for human use.



What Is This Research Blend?

A growth hormone secretagogue is a compound that signals the anterior pituitary gland to release growth hormone, and this blend contains two such compounds that act through different receptors. The first component is CJC-1295 without a drug affinity complex, a 29-amino-acid analog of growth hormone-releasing hormone that is also known in the literature as Modified

GRF (1-29). The second component is ipamorelin, a short synthetic chain of five amino acid residues that mimics the hunger hormone ghrelin at the growth hormone secretagogue receptor. When both are supplied together in one lyophilized vial, scientists can study how two different signaling routes converge on the same pituitary cells.

Quick answer: the blend is a research-grade combination of Modified GRF (1-29) and ipamorelin, each supplied at 5 mg per vial, used in laboratory studies of growth hormone release. It is sold as a lyophilized powder, which simply means freeze-dried so that the fragile molecules stay stable during shipping and storage. It is a chemical reagent for investigation, not a medicine, a supplement, or a treatment for any condition. Understanding that distinction is the first lesson for any student entering this field.

CJC-1295 Without DAC Explained

The phrase "no DAC" means the molecule lacks the drug affinity complex, a chemical add-on that binds the compound to albumin in the blood and stretches its half-life from minutes to days. Without that add-on the analog is cleared quickly, and commonly cited half-life figures sit around thirty minutes. Think of it like a short text message compared with a long voicemail, because the pituitary receives a brief, clean signal instead of a prolonged one.

Ipamorelin Explained

Ipamorelin was characterized in 1998 as a growth hormone secretagogue with notable selectivity in animal models. Its five amino acid residues bind the ghrelin receptor known as GHS-R1a, which sits on pituitary somatotroph cells. Compared with older secretagogues such as GHRP-6 and hexarelin, it showed little effect on cortisol or prolactin in the original animal work, which is why researchers describe it as selective.

Why the 5mg/5mg Ratio Appears in Research Catalogs

Equal quantities make a blend easy to describe, easy to compare between batches, and easy to document in a methods section. A listing such as **cjc 1295 no dac 5mg ipamorelin 5mg** tells a laboratory exactly how much of each reagent is in the vial before any study planning begins. An equal mass ratio does not mean an equal molar ratio, because the two molecules have very different weights and the vial holds several times more ipamorelin molecules than analog molecules. Careful researchers therefore record molecular weights and calculate molar amounts themselves rather than assuming the two numbers match.

Another reason is historical, since early published work often paired a growth hormone-releasing hormone analog with a ghrelin-receptor agonist to test for synergy. Studies of combined stimulation have long reported that two receptor routes can produce a larger growth hormone response than either route alone in experimental settings. Catalog suppliers followed that logic and built simple fixed-ratio vials so that laboratories would not have to

combine separate reagents themselves. The convenience is real, but it never replaces the need for verified purity and a proper certificate of analysis.

Reading the Label Correctly

Labels vary between suppliers, so the same product may appear as **ipamorelin cjc 1295 no dac 5 mg 5 mg** in one catalog and with the names in a different order in another. The order of the names does not change the chemistry, but it can change how search engines and buyers find the product. Always confirm the sequence, the "no DAC" wording, and the vial contents against the supplier's analytical documents.

How the Two Compounds Work Together in Research

The hypothalamus normally releases growth hormone-releasing hormone, which binds its receptor on pituitary somatotrophs and raises cyclic AMP inside the cell. In laboratory models, a pairing of **cjc 1295 no dac + ipamorelin 5/5 mg** is studied because the first compound mimics that releasing hormone while the second mimics ghrelin at a separate receptor. Because both signals reach the same pituitary cell, researchers describe the interaction as synergistic stimulation of growth hormone secretion. The downstream marker most often measured is insulin-like growth factor 1, which the liver produces in response to growth hormone.

A third entity in this picture is somatostatin, the hypothalamic hormone that acts like a brake on growth hormone release. Ghrelin-receptor agonists are thought to work partly by opposing that brake, while releasing-hormone analogs press the accelerator. Together, the accelerator-and-brake model gives students a simple way to remember why two compounds may act differently than one. It is only a teaching model, and real biology involves feedback loops that are far more detailed.

Pulsatile Versus Continuous Signaling

Natural growth hormone release happens in pulses, and scientists care about whether a research compound preserves that rhythm. A short-acting analog, sold in blends such as **ipamorelin cjc 1295 no dac 5 mg 5 mg**, is often chosen when a study wants to examine brief, pulse-like signaling. A 2006 study by Ionescu and Frohman found that pulsatile secretion persisted even during continuous stimulation with the long-acting DAC version of CJC-1295.

Selectivity and Receptor Specificity

Selectivity means a compound acts mainly on its intended receptor rather than on many related ones. In the 1998 characterization by Raun and colleagues, ipamorelin released growth hormone without a meaningful rise in other pituitary hormones in the animal models tested. That profile is one reason a research listing such as **cjc 1295 5mg ipamorelin 5mg** attracts attention from investigators who want a clean growth hormone signal.

What the Published Research Actually Shows

The most cited human work on CJC-1295 is the 2006 paper by Teichman and colleagues in the Journal of Clinical Endocrinology and Metabolism, which examined the long-acting DAC version in healthy adult volunteers. That trial reported dose-dependent increases in growth hormone and insulin-like growth factor 1 and a prolonged half-life for the DAC form. It did not study the no-DAC version inside a blended vial, so its results cannot be transferred directly to the product discussed here. An honest reading of the literature means keeping that boundary in mind every time a new claim appears online.



Ipamorelin has also reached human testing, including a phase two trial in postoperative ileus that was reported not to meet its efficacy goal. Neither compound holds regulatory approval as a medicine, which is an important fact for any student building a literature review. Preclinical data are valuable, but animal models do not guarantee the same effects in people. Students should therefore treat every research listing as an invitation to read the original papers, not as proof of an outcome.

What the Studies Do Not Tell Us

No large, long-term, controlled trials establish the safety or effectiveness of this exact fixed-ratio blend, including a vial sold as **cjc 1295 no dac 5mg ipamorelin 5mg**. Claims on social media

about physical or cosmetic outcomes are anecdotes, and anecdotes are not evidence. A responsible researcher separates what was measured in a paper from what was merely said in a forum.

Key Differences Between No DAC and DAC Versions

Students often confuse the two forms of CJC-1295, so a side-by-side comparison is helpful. The difference comes down to one chemical modification and the behavior that follows from it. The summary below uses simple language that fits a classroom handout. Each point reflects commonly reported properties in the literature rather than a promise of any outcome.

- **Structure:** the no-DAC form is Modified GRF (1-29), while the DAC form adds a reactive linker that binds albumin.
- **Half-life:** roughly thirty minutes for the no-DAC form versus several days for the DAC form.
- **Signal shape:** a brief, pulse-like exposure versus a prolonged, elevated exposure.
- **Naming:** many papers write "Mod GRF 1-29" for the short form and label the long form with "DAC."
- **Research use:** the short form suits studies of brief signaling, while the long form suits studies of sustained exposure.

Quality, Purity, and Verification for Laboratory Buyers

Purity matters because impurities can distort results and invalidate an entire experiment. A reliable supplier of **cjc 1295 no dac + ipamorelin 5/5 mg** should publish an independent certificate of analysis for each batch. That document usually shows purity measured by high-performance liquid chromatography and identity confirmed by mass spectrometry. Without both tests, a buyer cannot be sure what is actually inside the vial.

Use the checklist below whenever a new batch arrives, because a few minutes of checking can save weeks of wasted work.

- A batch number printed on both the vial and the certificate
- An HPLC purity result with the chromatogram, not only a percentage
- Mass spectrometry confirming the expected molecular weights of both components
- The testing date and the name of the independent laboratory
- Sterility or endotoxin information where the study design requires it

Storage and Documentation

Lyophilized powder is generally kept cold, dry, and away from light, and the supplier's documentation gives the exact conditions. Good laboratories log the receipt date, storage

location, and any temperature excursions so that results can be traced later. Documentation is dull work, but it is what separates a reproducible experiment from a guess.



Regulatory Status and Responsible Use

Neither CJC-1295 nor ipamorelin is an approved medicine, and both are sold strictly as research chemicals. The United States Food and Drug Administration has not approved either compound as a drug and has repeatedly warned consumers about unapproved products marketed for human use. The World Anti-Doping Agency also prohibits both compounds under its growth hormone-releasing substances category, which matters to any athlete or student reading about them. Responsible readers should treat this article as science education and never as a guide for personal use.

Ethical research also means following institutional rules, including biosafety committee review, animal-care approvals, and proper chemical handling. A supplier is a chemical vendor, not a clinic, and a vendor cannot offer medical advice. Anyone with questions about their own health should speak with a licensed physician rather than a product catalog. This honest boundary is part of what makes a source trustworthy.

A Classroom Example of Careful Reading

Imagine a student who sees a product named **cjc 1295 5mg ipamorelin 5mg** and a website claiming dramatic results. A careful student would search the original papers, notice that the trials used different forms and different subjects, and conclude that the claim has no direct evidence. This habit of checking the source is the single most valuable skill in evidence-based learning.

Related Concepts and Entities Worth Knowing

The hypothalamic-pituitary axis is the control system that links the brain to hormone release, and growth hormone-releasing hormone, somatostatin, and ghrelin are its main chemical messengers. The receptors involved are the growth hormone-releasing hormone receptor and the growth hormone secretagogue receptor, known as GHS-R1a. Growth hormone then travels to the liver, where it stimulates insulin-like growth factor 1, a marker that appears in nearly every paper on this topic. Learning these entities as a connected map makes it much easier to read research articles about secretagogues without getting lost.

Frequently Asked Questions

What does "no DAC" mean?

It means the molecule does not carry the drug affinity complex, the add-on that binds albumin and prolongs activity. The result is a short-acting analog that is cleared within roughly half an hour. Researchers choose it when they want to study brief signaling instead of prolonged exposure.

Why is ipamorelin called selective?

In early animal studies it raised growth hormone without a meaningful rise in cortisol or prolactin. That narrow profile separated it from older secretagogues that affected several hormones at once. Selectivity in animals still does not guarantee the same result in every other setting.

What is the difference between a releasing-hormone analog and a ghrelin mimetic?

A releasing-hormone analog acts on the growth hormone-releasing hormone receptor, while a ghrelin mimetic acts on the GHS-R1a receptor. Both receptors sit on the same pituitary cells but trigger different internal signals. That is why scientists study them together to look for synergy.

How can a buyer verify purity?

Ask for a batch-specific certificate of analysis that includes HPLC purity and mass spectrometry identity. Check that the batch number on the document matches the vial in your hands. If any of these items is missing, treat the product as unverified.

Is this blend a medicine or a supplement?

No, it is neither, because it is a research chemical sold for laboratory investigation only. It has not been approved to diagnose, treat, cure, or prevent any disease. Anyone with a health question should consult a licensed physician.

Where can students find reliable information?

Start with primary sources such as the Journal of Clinical Endocrinology and Metabolism and the European Journal of Endocrinology. Government and anti-doping agency websites give accurate regulatory context. Be cautious with forums and social media, because opinions there are often presented as facts.

Conclusion

The label **cjc 1295 no dac ipamorelin 5mg/5mg** is simply a compact description of a research blend that pairs a short-acting releasing-hormone analog with a selective ghrelin-receptor agonist. Its popularity comes from the clean fixed ratio, the well-known synergy model, and the long history of published work on each ingredient. Its limits are just as important, since no large trial has tested this exact vial and neither compound is an approved medicine. Read the original papers, verify every batch with a certificate of analysis, respect the regulations, and you will be using this topic the way good science intends.