



Levora Therapy Guide Sheet

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HEALING & REGENERATION

PEPTIDE	INJECTABLE DOSE	TOPICAL DOSE	CYCLE	TIME OFF	BENEFITS	NOTES	BLOOD WORK
BPC-157	200–600 mcg/day sub-Q	500 mcg–1 mg per application, 1–2x daily	4–8 wks	2–4 wks	Gut support, tendon/ligament healing, tissue repair	Topical for surface wounds; injectable near injury preferred	CMP, CBC
TB-500	0.5–1 mg/day sub-Q	Not commonly used topically	4–8 wks	2–4 wks	Recovery, mobility, tissue repair	Often stacked with BPC-157	CBC, CMP
BPC-157 + TB-500 Blend	0.5–1.5 mg/day sub-Q	500 mcg–1 mg BPC per application if topical blend	4–6 wks	2–4 wks	Synergistic soft tissue support, inflammation reduction	Verify exact mg per ingredient in your blend	CMP, CBC
GHK-Cu	1–2 mg/day sub-Q	1–5% cream/serum, 1–2x daily	4–8 wks	2–4 wks	Skin quality, wound support, hair support	Topical most common; injectable for anti-aging/wound protocols	CMP, copper/zinc optional
KPV	200–500 mcg/day sub-Q	0.1–0.5% concentration, 1–2x daily	4–8 wks	2–4 wks	GI support, inflammation control, skin calming	Oral capsule form also discussed for gut use	CMP, CRP
LL-37	50–400 mcg/day sub-Q	50–100 mcg per application, 1–2x daily	2–6 wks	2–4 wks	Antimicrobial and immune support	Advanced/experimental; topical for wound and skin	CBC, CMP, CRP
Thymosin Alpha-1	0.3–0.5 mg/day sub-Q	No standard topical use	4–12 wks	4 wks	Immune modulation, inflammation support	One of the more documented immune peptides	CBC w/ lymphocytes, CRP, IL-6
GLOW Blend	Per blend label; typically 1–2x daily	Per blend label	4–6 wks	2–4 wks	Skin, healing, cosmetic support	Check ingredient breakdown for active amounts	CMP, CBC
KLOW Blend	Per blend label; typically 1–2x daily	Per blend label	4–6 wks	2–4 wks	Tissue, GI, inflammation support	Verify each component amount separately	CMP, CBC, CRP
ARA-290	2–4 mg/day sub-Q	No standard topical use	4–8 wks	2–4 wks	Neuroprotection, pain support, tissue repair, insulin sensitivity	Erythropoietin analog; advanced/experimental; research use	CBC, CMP, HbA1c
AHK-Cu	Injectable: 1–2 mg/day sub-Q	Topical: 1–5% solution 1–2x daily	4–8 wks	2–4 wks	Hair growth, scalp health, skin quality, collagen support	Copper peptide similar to GHK-Cu; strong hair follicle research focus	CMP baseline
Glutathione	Inj: 100–200 mg/day sub-Q. IV: 400–1,200 mg	Nasal/topical: per product label	4–8 wks	2–4 wks	Antioxidant support, detox, skin brightening, immune support	Master antioxidant; IV fastest bioavailability; oral poorly absorbed	CMP, CBC

FAT LOSS & METABOLIC HEALTH

PEPTIDE	DOSE	CYCLE	TIME OFF	BENEFITS	NOTES	BLOOD WORK
Semaglutide	0.25 mg/wk → titrate 0.5 → 1 → 1.7 → 2.4 mg/wk sub-Q	12–16+ wks	No fixed time off	Appetite suppression, weight loss, glycemic support	GI sides common on ramp-up; slow titration reduces nausea	Lipase, amylase, HbA1c, fasting insulin, thyroid, CMP
Tirzepatide	2.5–15 mg/wk sub-Q	12–16+ wks	No fixed time off	Weight loss, appetite control, metabolic support	Stronger weight loss data than sema head-to-head	Lipase, amylase, HbA1c, fasting insulin, thyroid, CMP, lipid
Retatrutide	2–12 mg/wk sub-Q	24–48+ wks	No standard cycling	Triple agonist; fat loss, metabolic support	Still investigational; GI effects and elevated heart rate noted	Lipase, amylase, HbA1c, fasting insulin, thyroid, CMP, lipid
Cagrilintide	0.6–4.5 mg/wk sub-Q	12–24 wks	No standard time off	Appetite suppression	Usually stacked with sema in research settings	HbA1c, fasting insulin, CMP, lipid panel
Cagri + Sema Stack	0.25–2.4 mg/wk each sub-Q	8–16+ wks	4–6 wks	Appetite control and fat-loss synergy	Dose refers to each ingredient separately	HbA1c, fasting insulin, CMP, lipid
Tesamorelin	1–2 mg/day sub-Q	12+ wks	Depends on goal	Visceral fat reduction, GH-axis support	FDA-approved dosing exists; don't mix formulation strengths	IGF-1, fasting glucose, lipid panel, CMP
AOD-9604	0.3–0.5 mg/day sub-Q	4–12 wks	2–4 wks	Fat-loss oriented use	Best administered fasted; no topical standard	Fasting glucose, IGF-1, CMP
HGH Frag 176-191	250–500 mcg/day sub-Q split 2x (fasted AM + pre-bed)	4–12 wks	2–4 wks	Fat metabolism, lipolysis	Best fasted; no appetite stimulation unlike full GH	Fasting glucose, IGF-1
MOTS-c	200–1000 mcg/day sub-Q	4–8 wks	2–4 wks	Mitochondrial and metabolic support	IV in longevity clinics; sub-Q most common	CMP, fasting glucose, HbA1c, CBC
5-Amino-1MQ	25–50 mg/day oral capsule	4–8 wks	2–4 wks	Energy, body composition, metabolic support	Oral only; not injectable	CMP, fasting glucose, lipid panel
SLU-PP-332	250 mcg/day sub-Q or per protocol	4–8 wks	2–4 wks	Metabolic support, exercise mimetic interest	Highly experimental; limited human data	—



GROWTH HORMONE, RECOVERY & PERFORMANCE

PEPTIDE	DOSE	CYCLE	TIME OFF	BENEFITS	NOTES	BLOOD WORK
CJC-1295 + Ipamorelin	100–300 mcg/day sub-Q	8–12 wks	3–4 wks	GH pulse, sleep, recovery, lean mass	Inject 30–60 min before bed for best GH pulse	IGF-1, fasting glucose
CJC-1295 DAC	0.3–1 mg per injection sub-Q	8–12 wks	3–4 wks	Longer-acting GH support	Much lower frequency than no-DAC; do not treat them the same	IGF-1, fasting glucose
Ipamorelin	100–300 mcg/day sub-Q	8–12 wks	3–4 wks	Recovery, sleep, GH signaling	Clean GH release; minimal cortisol/prolactin spike	IGF-1, fasting glucose
Sermorelin	200–500 mcg/day sub-Q	8–16 wks	3–4 wks	GH secretagogue, sleep, recovery	More recognized in clinical wellness settings	IGF-1, fasting glucose, cortisol
GHRP-2	100–300 mcg/day sub-Q	6–12 wks	3–4 wks	GH release, recovery, appetite effects	More aggressive GH release; cortisol/prolactin increases possible	IGF-1, cortisol, glucose, prolactin
GHRP-6	100–300 mcg per injection sub-Q	6–12 wks	3–4 wks	GH release, appetite stimulation	Significant hunger side effect; glucose and cortisol concerns	IGF-1, cortisol, glucose, prolactin
IGF-1 LR3	20–50 mcg/day sub-Q	4–6 wks	4 wks	Muscle growth, recovery, satellite-cell activation	Monitor blood glucose; higher-risk category	IGF-1, glucose, insulin, CMP
Follistatin-344	50–100 mcg/day sub-Q or IM near target muscle	10–30 days	4–6 wks	Muscle growth, myostatin inhibition	Short cycles common; advanced and experimental	FSH, LH, testosterone, CMP

COGNITIVE, MOOD & NEUROLOGICAL

PEPTIDE	DOSE	CYCLE	TIME OFF	BENEFITS	NOTES	BLOOD WORK
Semax	Inj: 0.3–0.8 mg/day sub-Q. Intranasal: 50–100 mcg per nostril, 1–3x daily	2–4 wks	1–2 wks	Focus, cognition, neuro-support, mood	Intranasal most common route	Baseline CBC, CMP
Selank	Inj: 0.3–0.5 mg/day sub-Q. Intranasal: 125–250 mcg per nostril, 1–3x daily	2–4 wks	1–2 wks	Calm focus, anxiety support, mood	Often paired with Semax	Baseline CBC, cortisol optional
Dihexa	Oral: 10–30 mg/day. Topical: 3–5 mg to inner wrist 1x daily	2–6 wks	2–4 wks	Cognitive performance interest	Transdermal most discussed; highly experimental	—
Oxytocin	Inj: 100–500 mcg/day sub-Q. Intranasal: 8 IU per nostril per dose	As needed	As needed	Social bonding, mood, intimacy	Intranasal standard; injectable faster onset	Baseline CBC, CMP
Kisspeptin-10	100–200 mcg/day sub-Q	4–8 wks	2–4 wks	Hormonal signaling, LH/FSH support, libido	Used in fertility and hormonal optimization discussions	LH, FSH, total testosterone, estradiol
Noopept	Inj: 5–10 mg/day sub-Q. Oral: 10–30 mg/day	2–4 wks	1–2 wks	Memory, cognitive performance, neuroprotection	Synthetic nootropic; tolerance develops — cycle off regularly	Baseline CMP
N-Acetyl Semax	Nasal: 50–100 mcg per nostril 1–2x daily. Inj: 200–500 mcg/day sub-Q	2–4 wks	1–2 wks	Enhanced focus, BDNF support, neuroprotection, mood	Acetylated Semax — longer duration than standard Semax	Baseline CBC, CMP
N-Acetyl Selank	Nasal: 125–250 mcg per nostril 1–2x daily. Inj: 250–500 mcg/day sub-Q	2–4 wks	1–2 wks	Anxiolytic, stress reduction, mood stabilization without sedation	Acetylated Selank — longer-acting; often preferred over standard	Baseline CBC, cortisol optional
P21 PE-	Inj: 100–300 mcg/day sub-Q	2–4 wks	2–4 wks	Neurogenesis, cognitive enhancement, BDNF modulation	CNTF analog; advanced/experimental; research use only	Baseline CBC, CMP
22-28	Inj: 50–200 mcg/day sub-Q. Nasal: per product label	2–4 wks	1–2 wks	Antidepressant activity, neuroplasticity, cognitive support	Spadin analog; TREK-1 channel modulator; highly experimental	Baseline CBC, CMP
Pinealon	Inj: 1–2 mg/day sub-Q. Nasal: per product label	10-day cycles, 1–2x/yr	3–6 mo	Neuroprotection, circadian rhythm support, cognitive longevity	Khavinson bioregulator targeting pineal gland	Baseline CBC, CMP



IMMUNE, INFLAMMATION & LONGEVITY

PEPTIDE	DOSE	CYCLE	TIME OFF	BENEFITS	NOTES	BLOOD WORK
Thymosin Alpha-1	0.3–0.5 mg/day sub-Q	4–12 wks	4 wks	Immune support, inflammation modulation	One of the more defensible immune peptides	CBC w/ lymphocytes, CRP, IL-6
Epithalon	5–10 mg/day sub-Q or IV for 10 consecutive days	Every 6–12 mo	3–6 mo between cycles	Telomere support, longevity, anti-aging	Short burst cycles; popular in longevity circles	CBC, CMP
NAD+	Inj: 50–100 mg/day sub-Q. IV: 250–1,000 mg. Oral: 250–500 mg/day	4–12 wks	2–4 wks	Energy, cognition, mitochondrial support	IV fastest onset; sub-Q solid middle ground	CMP, CBC, NAD+ levels (specialty)
MOTS-c	200–1000 mcg/day sub-Q	4–8 wks	2–4 wks	Metabolic and mitochondrial support	Also fits under metabolic health section	CMP, fasting glucose, HbA1c, CBC
SS-31 (Elamipretide)	5–10 mg/day sub-Q	4–8 wks	2–4 wks	Mitochondrial protection, energy, cellular health, anti-aging	Highly regarded in longevity circles; targets inner membrane	—
Vesugen	0.5–2 mg/day sub-Q	10-day cycles, 1–2x/yr	3–6 mo	Vascular health, cardiovascular tissue support, circulation	Khavinson bioregulator targeting vascular tissue	CMP, CBC, cardio panel, BP
Thymogen	Inj: 100 mcg/day sub-Q for 10 days	10-day cycles, 1–2x/yr	3–6 mo	Immune regulation, T-cell support, thymic function	Synthetic dipeptide from thymopoietin	CBC w/ lymphocytes, CRP
Testagen	100–300 mcg/day sub-Q	10-day cycles, 1–2x/yr	3–6 mo	Testicular tissue support, male hormonal function	Khavinson bioregulator targeting testicular tissue	Total/free testosterone, LH, FSH, CMP
Pancragen	Inj: 100–200 mcg/day sub-Q for 10 days	10-day cycles, 1–2x/yr	3–6 mo	Pancreatic tissue support, glucose metabolism, insulin function	Khavinson bioregulator targeting pancreatic tissue	Fasting glucose, HbA1c, amylase, lipase, CMP
Bronchogen	Inj: 100–200 mcg/day sub-Q for 10 days	10-day cycles, 1–2x/yr	3–6 mo	Bronchial tissue support, respiratory health, lung function	Khavinson bioregulator targeting bronchial tissue	CBC, CMP, pulmonary baseline
Prostamax	0.5–1 mg/day sub-Q	10-day cycles, 1–2x/yr	3–6 mo	Prostate tissue support, male urinary and reproductive health	Khavinson bioregulator targeting prostate tissue	
Ovagen	10–150 mcg/day sub-Q	10-day cycles, 1–2x/yr	3–6 mo	Liver tissue support, hepatic function, detox support	Khavinson bioregulator targeting liver tissue	PSA, total testosterone, CMP CMP, CBC, liver enzymes (ALT, AST, GGT)
FOXO4-DRI	0.25–0.5 mg/day sub-Q	3-day cycles every 4–12 wks	4+ wks	Senescent cell clearance, cellular rejuvenation, longevity	Highly advanced; targets p53 to clear senescent cells	CBC, CMP, inflammatory markers (CRP, IL-6)

SEXUAL WELLNESS, PIGMENTATION & COSMETIC

PEPTIDE	DOSE	CYCLE	TIME OFF	BENEFITS	NOTES	BLOOD WORK
PT-141	Inj: 0.5–1.5 mg/day sub-Q. Intranasal: 1–2 mg per dose	As needed	As needed	Libido and sexual function support	Start at 0.5–1 mg; nausea is common	CBC, CMP, BP baseline
Melanotan II	0.25–1 mg/day sub-Q	4–8 wks	2–4 wks	Pigmentation, libido, appetite suppression	UV exposure required; mole darkening and nausea common	CBC, mole check, BP
GHK-Cu	Inj: 1–2 mg/day sub-Q. Topical: 1–5% cream/serum 1–2x daily	4–8 wks	2–4 wks	Skin quality, hair support, wound support	Topical most common; injectable for anti-aging/wound	CMP, copper/zinc optional
Oxytocin	Inj: 100–500 mcg/day sub-Q. Intranasal: 8 IU per nostril	As needed	As needed	Bonding, intimacy, mood	See also Cognitive section	Baseline CBC, CMP
Melanotan I	Inj: 500 mcg–1 mg/day sub-Q loading. Maint: 500 mcg 2–3x weekly	4–8 wks	2–4 wks	Pigmentation, sun-protective melanin, skin darkening	Longer-acting than MT-2; no libido effects; safer profile	CBC, mole check, BP

ADVANCED / EXPERIMENTAL

PEPTIDE	DOSE	CYCLE	TIME OFF	BENEFITS	NOTES	BLOOD WORK
IGF-1 LR3	20–50 mcg/day sub-Q	4–6 wks	4 wks	Muscle growth, recovery, satellite cell activation	Advanced use; monitor blood glucose closely	IGF-1, glucose, insulin, CMP
Follistatin-344	50–100 mcg/day sub-Q or IM near target muscle	10–30 days	4–6 wks	Muscle growth, myostatin inhibition, hypertrophy	Short cycles; highly experimental and niche	FSH, LH, testosterone, CMP
LL-37	Inj: 50–400 mcg/day sub-Q. Topical: 50–100 mcg per application 1–2x daily	2–6 wks	2–4 wks	Antimicrobial, immune support, wound healing	Experimental; topical for wound/skin; advanced research use	CBC, CMP, CRP
Dihexa	Oral: 10–30 mg/day. Topical: 3–5 mg to inner wrist 1x daily	2–6 wks	2–4 wks	Cognitive performance, neuroprotection	Highly experimental; transdermal most common; not beginner use	Baseline CBC, CMP
PEG-MGF	200–500 mcg/day sub-Q	4–6 wks	4 wks	Muscle satellite cell activation, hypertrophy, localized repair	PEGylated MGF — longer half-life; typically post-training	IGF-1, CMP, CK
DADA	Inj: 200–500 mcg/day sub-Q or IM	4–8 wks	2–4 wks	Physical performance, circulation, oxygen efficiency	Highly experimental; limited published data; advanced use	CBC, CMP, cardio panel

