

UNEARTHED WELLNESS

WELCOME KIT

Tesamorelin

Visceral fat reduction · GH stimulation · Metabolic restoration



Your personalised welcome kit from Unearthed Wellness

Welcome to your Tesamorelin protocol.

Tesamorelin has one of the strongest evidence bases of any GH-stimulating peptide available — FDA-approved for visceral fat reduction, and clinically validated across multiple trials. You're working with the data, not against it.

This kit covers Tesamorelin's mechanism, your daily injection protocol, what to expect as visceral fat and metabolic markers improve, and how to reach us throughout your protocol.

Your body already knows how to do this.

INSIDE THIS KIT

- What Tesamorelin is and why it targets visceral fat specifically
- Storage and handling
- Step-by-step daily injection guide
- What to expect week by week
- Lifestyle practices that amplify visceral fat reduction
- Side effects: what's normal and what to watch for
- How to reach us

There are no silly questions here. We mean that.

WHAT YOU'VE ORDERED

Meet Tesamorelin.

Tesamorelin is a synthetic analogue of Growth Hormone Releasing Hormone (GHRH) — meaning it stimulates your pituitary gland to produce and release your own growth hormone. Its molecular structure produces a particularly pronounced effect on visceral adipose tissue — the deep abdominal fat that surrounds your internal organs and is strongly linked to metabolic dysfunction, hormonal disruption, and cardiovascular risk.

Tesamorelin's effects are mediated through GH stimulation and subsequent IGF-1 elevation, which directly influence fat cell metabolism, insulin sensitivity, and lipid processing. It is FDA-approved for visceral fat reduction — giving it a regulatory evidence base that most peptides lack.

Targeted. Evidenced. The fat that matters most.

What it's doing in your body

- Visceral fat reduction. The strongest evidence base of any peptide for reducing deep abdominal fat.
- GH axis restoration. Stimulates natural GH release — lean muscle preservation, improved recovery, skin quality.
- Insulin sensitivity improvement. Addresses the metabolic root of visceral fat accumulation.
- Lipid profile improvement. Reduces triglycerides and improves cholesterol balance disrupted by visceral adiposity.
- Cardiovascular risk reduction. Visceral fat reduction directly improves the cardiovascular risk markers it drives.
- Cognitive support. IGF-1 elevation from GH stimulation has neuroprotective effects.

IGF-1 MONITORING

Your prescriber will monitor your IGF-1 levels during this protocol. IGF-1 is the primary downstream marker of GH activity — tracking it ensures your levels remain in a safe and effective therapeutic range and allows your prescriber to optimise your dose over time.

BEFORE YOU BEGIN

Storage and handling.

A few minutes spent here means your peptide stays potent and effective for the full length of your protocol.

TEMPERATURE

Refrigerate at 2–8°C. A standard fridge shelf is perfect. Never freeze.

LIGHT

Keep in original packaging or a dark drawer. Peptides degrade with UV exposure.

AFTER RECONSTITUTION

Once mixed with bacteriostatic water, use within 28 days. Write the date on the vial.

HANDLING

Swirl gently to mix — never shake. Shaking disrupts the peptide structure.

BEFORE EACH USE

Discard if the solution appears cloudy, discoloured, or contains particles.

WHAT'S IN YOUR KIT

- Your peptide vial
- Bacteriostatic water for reconstitution (if applicable)
- Syringes and insulin-gauge needles
- Alcohol swabs

If anything is missing or unfamiliar, contact us before you begin.

YOUR INJECTION GUIDE

Step by step. You can do this.

The needle is tiny. The injection is subcutaneous — just under the skin, not into muscle. By your third or fourth session, it will feel completely natural.

01 Wash your hands

Thoroughly, with soap, for 20 seconds. Your most important preparation step.

02 Lay out your materials

Vial, syringe, needle, and two alcohol swabs on a clean flat surface. There is no rush.

03 Swab the vial top

Wipe the rubber stopper with a swab. Let it air-dry for 10 seconds before inserting the needle.

04 Draw up your dose

Insert the needle and draw the plunger slowly to your prescribed dose. Tap out air bubbles, then gently push them free.

05 Choose your injection site

The abdomen (at least 5cm from the navel) or outer thigh. Rotate sites each time.

06 Swab the site

Clean with your second swab. Let it dry fully — this genuinely reduces any sting.

07 Pinch and inject

Gently pinch a fold of skin. Insert at 45° in one smooth motion. Release the pinch, then slowly depress the plunger.

08 Withdraw and press

Remove the needle. Apply gentle pressure with a clean swab for a few seconds. Do not rub.

09 Dispose safely

Place the used needle immediately in a sharps container.

By session three, it will feel like second nature.

IF YOUR FIRST ATTEMPT ISN'T PERFECT —

That is expected and entirely normal. Hesitation, a small bruise, mild redness — all common and settle quickly. If you'd like to talk through the process before your next dose, call us.

YOUR JOURNEY

What to expect — week by week.

Every body responds in its own time. This is an honest guide to what most people experience — not a guarantee, but a map.

The fat that was hardest to shift is exactly what this targets.

Week 1–2	Energy improvements often among the earliest effects as GH signalling begins. Mild water retention possible initially.
Week 3–4	Sleep quality often improves. Early body composition changes measurable — particularly waist circumference.
Month 2	Meaningful visceral fat reduction apparent. Metabolic markers on bloodwork beginning to improve.
Month 3–4	Significant and sustained visceral fat reduction. Insulin sensitivity improving. Many describe a transformation in their midsection that resisted previous approaches.
Month 5–6	Continued body composition, metabolic, and cardiovascular risk improvement. Protocol reviewed by your prescriber.

YOUR PRESCRIPTION REMINDER

Dose _____ mcg / mg

Frequency _____ × per week

Protocol length _____ weeks

Do not adjust your dose without speaking to your prescriber first.

SIDE EFFECTS

What's normal — and what to watch for.

Your peptide has been prescribed within a clinical framework and dispensed to pharmaceutical-grade standards. We want you fully informed so nothing catches you off guard.

Completely normal — no action needed

- Mild water retention in the first 1–2 weeks. Common with GH stimulation as the body adjusts. Settles without intervention.
- Mild joint stiffness or tingling. A known GHRH class effect, dose-dependent and transient.
- Vivid dreams. A sign that GH pulses are occurring during deep sleep — generally welcomed.

PLEASE REACH OUT IF YOU EXPERIENCE:

- Significant swelling, heat, or pain at the injection site lasting more than 24 hours
- Signs of infection — increasing redness, pus, fever, or spreading warmth
- Any allergic reaction — itching, hives, or difficulty breathing (seek emergency care if severe)
- Anything that doesn't feel right — trust your instincts and call us

We would always rather hear from you than have you wonder alone.

AMPLIFY YOUR RESULTS

Practices that deepen your protocol.

These habits create the conditions for your peptide to work as effectively as possible. None of this is prescriptive — it is what the evidence supports.

RESISTANCE TRAINING IS ESSENTIAL

Tesamorelin's body composition effects are significantly amplified by resistance training. Muscle mass improves your metabolic rate and GH receptor sensitivity.

PRIORITISE PROTEIN

1.4–2g per kg of body weight daily. GH supports muscle protein synthesis — give it the substrate to work with.

REDUCE REFINED CARBOHYDRATES

Elevated insulin blunts GH release. A lower-glycaemic diet directly supports the mechanism of your protocol.

EAT AWAY FROM INJECTION TIME

Avoid eating for 2–3 hours before your nightly injection to preserve the GH pulse.

TRACK WAIST CIRCUMFERENCE

Body composition is best tracked with a tape measure and photos, not weight alone. Visceral fat reduction may not show on the scale first.

GET BLOODWORK

IGF-1 and fasting insulin tracking helps your prescriber optimise your protocol. Don't skip your review appointments.

COMMON QUESTIONS

You asked. We answered.

How is Tesamorelin different from CJC-1295/Ipamorelin?

Both stimulate GH release, but Tesamorelin has a more targeted and FDA-validated effect on visceral fat specifically. CJC/Ipamorelin offers a broader profile — better sleep, skin, energy, and bone alongside body composition. The right choice depends on your primary goals.

How is this different from semaglutide for fat loss?

Semaglutide addresses fat loss through appetite and metabolic regulation. Tesamorelin works through GH stimulation and targets visceral fat specifically. They address different root causes and can be complementary.

How long until I see changes in my waist measurement?

Most people see measurable waist circumference changes by end of month 2, with significant visible results by month 3–4.

Can I combine Tesamorelin with Ipamorelin?

Yes — see our Tesamorelin + Ipamorelin Stack welcome kit for the enhanced combination protocol. The synergy produces a meaningfully larger and more sustained GH pulse.

Is this safe long-term?

Yes — Tesamorelin's safety profile is supported by FDA-level clinical data. Your prescriber will monitor IGF-1 and relevant metabolic markers throughout your protocol.

You are never navigating this alone.

HOW TO REACH US

WEBSITE & PORTAL	BOOK A CONSULTATION	SUPPORT & ENQUIRIES
unearthed-wellness.com	Via your patient portal	hello@unearthed-wellness.com

We respond to all messages within one business day. For urgent concerns, please contact your prescriber directly. You are never navigating this alone.

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