

UNEARTHED WELLNESS

WELCOME KIT

Tesamorelin + Ipamorelin

Amplified GH release · Visceral fat · Body composition · Vitality



Your personalised welcome kit from Unearthed Wellness

Welcome to your Tesamorelin + Ipamorelin protocol.

This combination pairs two complementary GH-stimulating mechanisms to produce a more robust and sustained hormonal response than either alone. You're working with the most comprehensive GH-stimulating stack we offer.

This kit covers how Tesamorelin and Ipamorelin work together, how to administer your nightly combined protocol, and what to expect as the full benefit profile develops over your protocol.

Your body already knows how to do this.

INSIDE THIS KIT

- What Tesamorelin and Ipamorelin are and why the combination is more powerful
- Storage and handling for both peptides
- Step-by-step nightly injection guide
- What to expect week by week
- Lifestyle practices that amplify GH-driven results
- Side effects: what's normal
- How to reach us

There are no silly questions here. We mean that.

WHAT YOU'VE ORDERED

The Tesamorelin + Ipamorelin Stack.

Tesamorelin is a GHRH analogue — it primes and signals the pituitary to produce and release growth hormone. Ipamorelin is a GHRP — it amplifies and pulses that release through a separate receptor pathway (the ghrelin receptor). Because they work through different receptors, their effects are additive rather than redundant.

The result is a GH pulse that more closely mimics the robust release of a younger endocrine system — combining Tesamorelin's FDA-validated visceral fat targeting with Ipamorelin's precision GH amplification and exceptional tolerability. This is the most comprehensive GH stimulation available through a peptide protocol.

*Two pathways. One amplified pulse.
Deeper results.*

What the combination does

- Greater visceral fat reduction. Tesamorelin's targeted abdominal effect amplified by Ipamorelin's broader GH pulse.
- Enhanced lean muscle preservation. Stronger GH signal means better protein synthesis and muscle-to-fat ratio improvement.
- Superior deep sleep restoration. The amplified GH pulse strengthens the nocturnal deep-sleep cycle.
- Skin quality at greater depth. Stronger GH-driven collagen synthesis than single-peptide protocols.
- Bone density support. Particularly valuable in perimenopause and beyond.
- Comprehensive hormonal support. GH interacts with thyroid, adrenal, and gonadal function in ways that benefit the full endocrine picture.

COMBINING IN ONE INJECTION

Tesamorelin and Ipamorelin are typically combined in a single nightly subcutaneous injection for convenience. Your prescriber will have confirmed whether your specific formulations are to be combined or administered separately. IGF-1 monitoring during treatment ensures levels remain in a safe physiological range.

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 sleep improves first. The body follows.

Week 1–2	Energy and sleep quality improvements often noticeable in the first week. Vivid dreams are a common and welcome sign. Mild transient water retention possible.
Week 3–4	Cognitive clarity improves. Morning energy measurably better. Early body composition changes particularly around the midsection.
Month 2	Meaningful visceral fat reduction. Skin quality improving. Exercise recovery significantly faster. Metabolic bloodwork beginning to reflect improvement.
Month 3–4	Significant body composition transformation. IGF-1 levels measurably elevated. Many describe a profound shift in how they feel in their body.
Month 5–6	Full depth of the stack's benefits established. Bone density, connective tissue, and cognitive performance all reflect sustained GH stimulation.

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

- Vivid dreams in the first weeks. A welcome sign that GH pulses are occurring.
- Mild transient water retention. Common in the first few weeks — settles without intervention.
- Occasional mild tingling or joint warmth. Known GHRH/GHRP class effects, dose-dependent and transient.

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.

PROTECT YOUR SLEEP WINDOW

This entire protocol depends on quality nocturnal GH release. Consistent sleep and wake times, a cool dark room, and no eating 2–3 hours before bed all amplify the pulse.

RESISTANCE TRAINING

GH's body composition effects are significantly amplified by resistance training. Two or more sessions per week is strongly encouraged.

PRIORITISE PROTEIN

1.4–2g per kg of body weight daily. Lean muscle preservation during fat loss requires adequate amino acid availability.

REDUCE REFINED CARBOHYDRATES

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

TRACK WAIST CIRCUMFERENCE

The most meaningful marker of visceral fat reduction. Measure weekly at the same time of day.

ATTEND YOUR BLOODWORK REVIEWS

IGF-1 tracking allows your prescriber to optimise your protocol. Don't skip review appointments.

COMMON QUESTIONS

You asked. We answered.

How does this compare to CJC-1295 + Ipamorelin?

Both stacks use Ipamorelin as the GHRP component. The difference is in the GHRH analogue: CJC-1295 has a longer half-life and broader hormonal profile; Tesamorelin has a more targeted visceral fat effect backed by FDA-level clinical data. For those whose primary concern is metabolic body composition, Tesamorelin is often the stronger choice.

How long until I see body composition results?

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

Can I use this alongside HRT?

Yes — this stack complements rather than conflicts with oestrogen or progesterone support. Your prescriber will have assessed the full picture.

Is daily injection necessary?

Yes — the GH pulse mechanism requires consistent nightly stimulation. Skipping doses disrupts the hormonal signalling rhythm the protocol is building.

What if I'm travelling across time zones?

Aim to inject as close to your usual local bedtime as possible in the new time zone. Contact us if you're travelling for extended periods and want guidance on protocol management.

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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