

Sexual Health & Hormonal Research Stack

3 compounds | Research Peptides Co. | 2024-2025 Research Library | Generated: May 6, 2026

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Research Basis: Based on research from Massachusetts General Hospital (2024), University of Arizona (2023), and NIH studies on melanocortin receptors and sexual function.

PT-141 (Bremelanotide)

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| Dosage | 1–2 mg per use |
| Route | Subcutaneous injection or intranasal |
| Cycle / Duration | As needed, max 1x per 72 hours |
| Research Purpose | Melanocortin receptor agonist (MC3R/MC4R) that activates central sexual arousal pathways. FDA-approved (Vyleesi) for HSDD in women; studied at University of Arizona for male and female sexual dysfunction. |
| Key References | Clayton et al., 2024 (<i>J Sex Med</i>); Kingsberg et al., 2023 (<i>Obstet Gynecol</i>) |

Kisspeptin-10

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| Dosage | 1–10 nmol/kg |
| Route | Intravenous or subcutaneous |
| Cycle / Duration | Research protocol dependent |
| Research Purpose | Hypothalamic neuropeptide that stimulates GnRH and LH release, regulating reproductive hormones. Studied at Imperial College London for hypogonadism and fertility research. |
| Key References | Dhillon et al., 2024 (<i>J Clin Endocrinol Metab</i>); Jayasena et al., 2023 (<i>Clin Endocrinol</i>) |

Gonadorelin (GnRH)

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| Dosage | 100 mcg every 90 minutes (pulsatile) or 100–200 mcg 2x weekly |
| Route | Subcutaneous injection |
| Cycle / Duration | 8–12 weeks |
| Research Purpose | Synthetic GnRH that stimulates LH and FSH release, maintaining testicular function during TRT. Studied at Mayo Clinic and Harvard for hypogonadism and fertility preservation. |
| Key References | <i>Bhasin et al., 2024 (J Clin Endocrinol Metab); Ramasamy et al., 2023 (Fertil Steril)</i> |