Peptide Perspectives™

THE GUT REPAIR STACK

Peptides, Probiotics & Supplements for Intestinal Balance

THE GUT-IMMUNE CONNECTION

- The gut barrier, immune system, microbiome, and nervous system work together.
- Imbalance can lead to inflammation, poor digestion, and chronic GI symptoms.
- Peptides are being researched for their potential to support barrier integrity, reduce inflammation, and promote healing.



FOUR KEY SYSTEMS IN GUT HEALTH

EPITHELIAL BARRIER
Maintain gut lining integrity and mucus layer (e.g., BPC-157).

IMMUNE REGULATION
Modulate inflammatory signaling (e.g., KPV, TA-1).

MICROBIOME & SCFAs
Support a balanced microbiome and beneficial metabolites.

GUT–BRAIN SIGNALING
Regulate gut motility, secretion and inflammation (e.g., VIP).

SIX RESEARCH STACKS FOR GUT REPAIR & INTESTINAL BALANCE

1. BPC-157 + KPV

- **Target:** Tissue repair & barrier support (BPC-157) + anti-inflammatory signaling (KPV, ↓ NF-κB).
- **Potential Benefits:** May support gut lining integrity, reduce inflammation, and improve recovery in GI models.

COMMUNITY-REPORTED DOSING

- **BPC-157:** 500 mcg daily (often oral)
- **KPV:** 250–500 mcg once or twice daily (oral)

COMMUNITY REPORT ONLY / NO VALIDATED COMBINATION DOSE

2. KPV + VIP

- **Target:** Reduce gut inflammation (KPV) + support gut motility, secretion and immune balance (VIP).
- **Potential Benefits:** Theoretical synergy for inflammatory GI conditions and barrier function.

COMMUNITY-REPORTED DOSING

- **KPV:** 250–500 mcg daily (oral)
- **VIP:** 50 mcg per dose (often nasal), 1–2× daily (used in non-gut contexts)

⚠ **Use caution:** VIP may cause hypotension (low blood pressure), flushing, or diarrhea.

COMMUNITY REPORT ONLY / NO VALIDATED COMBINATION DOSE

3. BPC-157 + THYMOSIN BETA-4 (TB4)

- **Target:** Complementary tissue repair and cell migration (BPC-157 and TB4).
- **Potential Benefits:** May support healing of intestinal tissue and overall mucosal recovery (preclinical and anecdotal use).

COMMUNITY-REPORTED DOSING

- **BPC-157:** 250–500 mcg daily (oral)
- **Thymosin Beta-4 (full-length):** 2–5 mg twice weekly (from injury communities)

ⓘ Full-length TB4 is NOT equivalent to the TB-500 fragment.

COMMUNITY REPORT ONLY / NO VALIDATED COMBINATION DOSE

4. KPV + THYMOSIN ALPHA-1 (TA-1)

- **Target:** Local anti-inflammatory effects (KPV) + broader immune regulation (TA-1).
- **Potential Benefits:** May help balance inmune signaling in the gut, especially in inflammatory or post-infectious states.

COMMUNITY-REPORTED DOSING

- **KPV:** 250–500 mcg daily (oral)
- **Thymosin Alpha-1:** 1.6 mg twice weekly (borrowed from other clinical indications)

COMMUNITY REPORT ONLY / NO VALIDATED COMBINATION DOSE

5. KPV + TARGETED GUT DELIVERY

- **Target:** Enhanced delivery of KPV to the intestine using novel methods (e.g., nanoparticles, protective carriers).
- **Potential Benefits:** Theoretical approach to increase gut-specific exposure and effectiveness.

DOSING STATUS

- **Experimental** research approach (e.g., nanoparticle or enteric delivery).
- NO human dose established.

COMMUNITY REPORT ONLY / NO VALIDATED COMBINATION DOSE

6. VIP + PROBIOTIC / FIBER

- **Target:** Gut signaling and motility (VIP) + microbiome balance and SCFA production (probiotics and fibers).
- **Potential Benefits:** May support a healthier gut environment, regularity, and reduced inflammation.

COMMUNITY CONTEXT

- **VIP:** No validated gut dose (commonly ~50 mcg per dose, often nasal, 1–2× daily).
- **Probiotics:** Strain-specific dosing (varies by product).
- **Fiber (e.g., psyllium):** Individualized based on tolerance.

COMMUNITY REPORT ONLY / NO VALIDATED COMBINATION DOSE

SUPPORTS WITH HUMAN DATA

Zinc-L-Carnosine
Human studies show support for gut lining protection (context-dependent).

L-Glutamine
Human trials (especially postinfectious IBS-D) show symptom support.

Probiotics
Strain-specific human evidence for IBS, gut barrier, and inflammation.

Soluble Fiber (e.g., Psyllium)
Human studies support regularity and microbiome health.

Hydration & Repletion
Correct key deficiencies (e.g., zinc, vitamin D, magnesium) to support gut function and healing.

STUDY ENDPOINTS IN GUT RESEARCH

Stool symptoms
(e.g., pain, bloating, (frequency, consistency)

Endoscopic healing
(visual improvement in the gut lining)

Calprotectin
(a marker of intestinal inflammation)

Nutrition
(absorption, nutrient status, weight, and overall health)

Safety
(tolerability, side effects, longer-term use)

NONE OF THESE STACKS IS PROVEN TO TREAT IBD, IBS, CELIAC DISEASE OR LEAKY GUT. UNVALIDATED DOSING IS NOT A RECOMMENDATION.