



WEST ANNAPOLIS MEDICAL SPA

AT SANDEL DUGGAL PLASTIC SURGERY

PEPTIDE THERAPY: PATIENT FAQ

Straight answers about BPC-157, TB-500, GHK-Cu, NAD+, and GLP-1 therapies

This handout summarizes information discussed during your consultation. It is not a substitute for individualized medical advice — please ask your provider if you have questions. Physician-directed protocols are customized after medical review.



What are peptides?

Peptides are short chains of amino acids — the same building blocks as every protein in your body. Think of them as chemical messengers: they attach to receptors on your cells and tell those cells to do something specific, like calm inflammation or support tissue repair.

Not all peptide treatments carry the same proof. Some, like semaglutide, are FDA-approved and backed by large trials; others, like BPC-157, are still considered experimental. We'll always tell you which category a treatment falls into.



How do our programs work?

- **BPC-157 + TB-500:** supports the body's natural recovery after surgery, training, or soft-tissue strain
- **NAD+ + B12:** supports cellular energy and normal nerve/blood cell function
- **GHK-Cu (± estradiol):** supports collagen activity and skin renewal; the estradiol option requires hormone-safety screening
- **Semaglutide/Tirzepatide:** supports appetite control via GLP-1/GIP signaling



Are they backed by evidence?

Evidence varies by treatment. GLP-1 medications have the strongest evidence (large FDA trials). GHK-Cu has good topical evidence. BPC-157/TB-500 are promising but mostly studied in animals so far. NAD+ has strong lab rationale but limited human outcomes data.



Are peptides safe?

Safety depends on the medication, dose, and your health history — we screen every patient. Common side effects include injection-site irritation, nausea, or headache. We only use licensed, prescription-based compounding pharmacies for quality and sterility.



Same as steroids or hormones?

No. Peptides are not anabolic steroids. Our programs are not presented as hormone replacement therapy, though some peptides (like GLP-1) are themselves signaling hormones your body already uses.



Are these FDA-approved?

Semaglutide and tirzepatide have FDA-approved brand versions; compounded versions are not. BPC-157 and TB-500 are not FDA-approved for any use and are considered experimental, off-label adjuncts.

What's Included in Every Program



Prescription-Based Sourcing

Licensed compounding pharmacies, lot tracking, sterile handling



Individualized Dosing

Your plan is adjusted to your goals, history, and response



Injection/Application Teaching

Hands-on guidance so you feel confident at home



Provider Follow-Up

Scheduled reassessment so your plan adapts over time

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Results vary. These therapies are supportive tools, not guarantees. Some therapies may be compounded and/or prescribed off-label. This handout does not replace medical consultation, consent, or individualized instructions.



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PEPTIDE THERAPY PATIENT FAQ — CONTINUED



Why does sourcing matter?

Online "research peptides" carry unknown purity and contamination risk, with no medical oversight. We only use licensed, physician-directed compounding pharmacies with documented sterility testing and certificates of analysis.



Are oral peptides as effective as injections?

Generally, no. Most peptides break down in the stomach before reaching the bloodstream, so oral absorption is inconsistent unless a peptide is specifically engineered for oral delivery. SubQ injection (or topical application, for GHK-Cu) bypasses digestion, which is why our programs use those routes rather than oral capsules.



Will I need baseline or ongoing labs?

Generally, no. Unlike growth-hormone peptides or hormone replacement therapy, these programs don't require routine bloodwork. Your safety screening happens through a detailed health-history review, and your dose is adjusted based on your symptoms and response at scheduled reassessments, not lab values. If your history raises a specific concern, targeted labs may still be recommended case-by-case.



How long until I see results?

- **Recovery peptides:** gradual over several weeks; 4–5 wk reassessment
- **NAD⁺/B12:** some notice change within days; varies by patient
- **GHK-Cu:** skin tolerance clear in days; texture change over weeks–months
- **Weight management:** appetite changes in days–weeks; weight loss over months



Who needs extra review first?

Patients who are pregnant/breastfeeding, preparing for surgery, on certain medications, or with a history of specific conditions (pancreatitis, gallbladder disease, clotting disorders, certain cancers) need additional review. This doesn't automatically rule out treatment.



When should I call or seek urgent care?

Call our office for worsening side effects, persistent nausea/vomiting, rash, fever, or before any planned surgery or sedation. **Seek urgent care** for severe abdominal pain, chest pain, trouble breathing, or a severe allergic reaction.

The bottom line

Peptides are medically legitimate molecules, and some peptide-based medications are FDA-approved and well studied. Others are still emerging, and evidence quality varies by treatment. Our approach is to avoid hype, screen patients carefully, use licensed prescription-based sourcing, and set realistic expectations. Results vary, and no specific outcome is guaranteed.

PRACTICAL DELIVERY & SAFETY GUARDRAILS

Customized care — history, medications, and goals are reviewed before starting.

Dose discipline — never change dose, frequency, or route without provider guidance.

Quality discipline — prescription-based sourcing and sterile handling for injectables.

Call us right away if — severe abdominal pain, allergic reaction, chest pain, or leg swelling occurs.

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