HUMANIN PROTOCOL

Humanin binds and inhibits pro-apoptotic proteins (notably Bax, Bid, and Bim), preventing mitochondrial membrane breakdown.
Mitochondrial survival peptide

What it is

Humanin is a mitochondria-derived peptide (MDP) encoded within mitochondrial DNA. Unlike most peptides that push growth or stimulation, Humanin plays defense and preservation.

Result: Humanin reduces cellular burnout and protects mitochondria under stress, helping cells survive caloric deficit, inflammation, and heavy training without crashing. It preserves neuronal and muscle tissue, improves recovery capacity, and extends protocol durability.

Bottom line: **it doesn't boost performance—it prevents breakdown so results can compound.**

Axis: Mitochondrial integrity · cellular stress resistance · apoptosis control

Vial Composition

Component	Amount
Humanin	10 mg
Total per vial	**10 mg**
Reconstitution: bacteriostatic water	2 mL
Final concentration: mg/mL (total peptide/ml)	5.0 mg/mL

Dosing Protocol

Parameter	Specification
Injection timing	Morning (AM)
Dose (total) [10-50mg]	**0.5 mg**
Humanin	0.5 mg
Injection volume	0.1 mL (≈10 insulin units)
Frequency: days/week	5

Protocol Length

	Time Frame
Total duration: weeks	12
Active dosing days: days	60
Vials:	3

Supply Calculation

Item	Quantity
Total peptide required	30 mg
Vials required	3 vials (10 mg each)
Insulin syringes	60
BAC water	6 mL (recommended 1-10 mL vials

HUMANIN PROTOCOL NOTES

Humanin is a mitochondria-derived survival peptide that operates at the most fundamental level of cellular defense. Instead of pushing growth, stimulation, or output, it preserves mitochondrial integrity during periods of metabolic, inflammatory, or oxidative stress—conditions where cells are most likely to fail. Humanin works by inhibiting pro-apoptotic signaling and stabilizing mitochondrial membranes, allowing ATP production to continue when energy systems would otherwise collapse. This makes it uniquely valuable in modern protocols that intentionally apply stress, such as caloric restriction, GLP-1 therapies, endurance overload, mitochondrial uncouplers, or aggressive fat-loss strategies.

Clinically and practically, Humanin shows up not as a "feeling," but as resilience. Patients tolerate harder protocols with fewer crashes, maintain lean tissue more effectively, and experience less cognitive and physical burnout over time. Neurons, muscle cells, and metabolically stressed tissues gain a margin of safety that allows repair, adaptation, and downstream peptides to do their job. Humanin does not accelerate results directly—it prevents breakdown that would otherwise force protocol regression. In advanced stacks, it functions as biological insurance: extending durability, preserving function, and keeping the system intact long enough for meaningful gains to compound.