Acute Pain & Inflammation Protocol

Overview

A structured, short-term clinical framework designed to reduce acute inflammatory signaling, control pain amplification, and accelerate early tissue repair following injury or procedural inflammation.

Clinical Applications

- Acute musculoskeletal injury (sprain, strain, contusion)
- Post-procedural inflammation
- Sports trauma and overuse flare-ups
- Localized soft tissue swelling and tenderness

Expected Outcomes

- Reduction in inflammatory pain (VAS improvement)
- Decreased swelling and localized tenderness
- Improved range of motion
- Accelerated transition to proliferative healing phase
- Reduced risk of inflammation chronification

Core Stack

Peptide	Route	Dose	Frequency	Duration
BPC-157	SubQ, perilesional	250–500 mcg	Twice daily	4–6 weeks
KPV	SubQ or Oral	200–500 mcg	1–2 times daily	4–6 weeks
Selank	Intranasal	200–400 mcg	Twice daily	2–4 weeks

Enhanced Stack (Conditional)

Peptide	Route	Dose	Frequency	Duration
TB-500 (Thymosin β4)	SubQ	750 mcg–1.5 mg	Twice weekly (Weeks 1–2), then weekly	6–8 weeks
SS-31 (Elamipretide)	SubQ	0.5–1.0 mg	Daily	4 weeks

Three-Phase Structure

Phase 1: Loading (Weeks 1–2)

- Maximum dosing across all compounds
- BPC-157 at 500 mcg twice daily
- KPV twice daily
- Selank twice daily
- TB-500 and SS-31 if indicated

Phase 2: Active Recovery (Weeks 3–4)

- BPC-157 reduced to 250–500 mcg twice daily
- Continued KPV support
- TB-500 weekly if used
- Weekly reassessment of pain and mobility

Phase 3: Taper (Weeks 5–6)

- BPC-157 reduced to once daily then discontinued
- KPV tapered
- Selank discontinued
- TB-500 continued only if repair incomplete

Mechanism Rationale

The protocol integrates localized angiogenic signaling with systemic inflammatory modulation. BPC-157 serves as the anchor for tissue repair and nitric oxide support. KPV provides NF-κB pathway modulation. Selank reduces central sensitization and anxiety-amplified pain. TB-500 enhances cellular migration; SS-31 stabilizes mitochondrial membranes to reduce oxidative stress.

Monitoring Parameters

- Weekly VAS pain scale assessment
- Range of motion evaluation
- Swelling and tenderness tracking
- Functional tolerance assessment

Contraindications

- Pregnancy or breastfeeding
- Active malignancy
- Active systemic infection
- Severe hepatic or renal impairment
- Known hypersensitivity to components

Clinical Disclaimer

This protocol is provided for educational and informational purposes for licensed healthcare professionals. These compounds and protocols are not intended to diagnose, treat, cure, or prevent any disease.