

# Autoimmune Support

## Autoimmune Support Protocol with Peptides & NAD+

This protocol is designed to support individuals with autoimmune diseases such as lupus, rheumatoid arthritis, Crohn's, Hashimoto's, and others. It targets inflammation, immune regulation, gut healing, and mitochondrial support.

### PEPTIDES TO CONSIDER

Peptide	Purpose	Notes
BPC-157	Gut healing, reduces systemic inflammation, tissue repair	Excellent for gut permeability and joint flare recovery
TB-500	Anti-inflammatory, immune regulation, tissue regeneration	Combine with BPC-157 in active inflammation cycles; use caution in patients with current or prior malignancy due to growth-promoting effects
Thymosin Alpha-1 (Tα1)	Enhances T-reg cells, balances immune response	Generally considered safe in patients with cancer history; has been used in oncology settings for immune support
Thymulin	T-cell regulation, immune balance, supports chronic immune fatigue	No known cancer-stimulating effects; considered safe in cancer history
Selank	Cytokine modulation, anti-anxiety	Safe and non-proliferative; no contraindications for cancer history
Epitalon	Anti-aging, telomere and pineal support	Mixed data on telomerase stimulation; avoid in active cancer or recent remission unless supervised by oncology-trained provider
GHK-Cu	Tissue repair, anti-inflammatory, skin and collagen support	Generally considered safe; has antioxidant and anti-cancer signaling properties in some models

### RECOMMENDED CYCLING

Peptide	Cycle Duration	Notes
BPC-157 + TB-500	6–8 weeks per flare or injury cycle	Can repeat as needed, especially post-flare; TB-500 may be avoided in cancer history unless cleared by provider
Thymosin Alpha-1	6–12 weeks for immune reset	Repeat 2–3x/year for maintenance

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<b>Thymulin</b>	4–6 weeks per immune cycle	Ideal during recovery or chronic fatigue states; repeat as needed
<b>Selank</b>	Ongoing or cyclic 4 weeks on / 2 weeks off	Good long-term support for stress and immune modulation
<b>Epitalon</b>	10–20 days per quarter	Use with caution in cancer history due to telomerase activity
<b>GHK-Cu</b>	4–8 weeks, repeat as needed	Safe for use topically or SC in those with a cancer history

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## **NAD+ FOR AUTOIMMUNE DISEASE**

### How it Helps:

- Supports mitochondrial function and cellular energy (combatting fatigue)
- Reduces oxidative stress and cytokine storm potential
- Enhances DNA repair, reduces PARP-related inflammation
- Modulates immune metabolism (shift from pro-inflammatory to regulatory)

Form	Suggested Dosing	Use Case
<b>IV NAD+</b>	250mg loading doses x 3-4; Can also do monthly boosts.	Fatigue, post-flare recovery, organ stress
<b>Subcutaneous NAD+ Home Kit</b>	100 mg daily 3x/week	Maintenance mitochondrial and immune support
<b>Oral NAD+ Precursors (NR/NMN)</b>	250–500 mg/day	Milder baseline support, especially between IV/SC doses

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## **NOTES & SAFETY**

- Begin slowly, especially with NAD+ and immune-acting peptides like LL-37
- Monitor CRP, ESR, ANA, and symptom trends
- Ensure adequate hydration, mineral balance, and rest during NAD+ loading
- Integrate with conventional autoimmune care for optimal results
- **Cancer Consideration:** Patients with a history of malignancy should avoid TB-500 and Epitalon unless guided by an oncology-trained provider. Other peptides listed are considered low risk or immune supportive.

**Disclaimer:** These therapies are not FDA-approved to treat, cure, or prevent any disease. This protocol is for informational purposes only and should be used under guidance from a qualified provider.