Chromofungin

Also called: Chromofungin; Chromogranin A (47-66); CgA47-66

What it is

Chromofungin is a chromogranin A(47-66) peptide from the vasostatin-I region of CgA (UniProt P10645). The most active antifungal fragment of vasostatin-I, it is a helical antimicrobial peptide that crosses fungal membranes and inhibits calcineurin (PMID 11451958), and a broad anti-inflammatory peptide — depleted in ulcerative-colitis tissue and able to calm colitis via M2 macrophages and NF-kB inhibition (PMIDs 28827109, 28951733), protect the heart in ischemia/reperfusion (PMID 26151429) and shield neurons and endothelial cells (PMIDs 38795392, 39358914). It is an endogenous-derived research peptide, not an approved medicine, and has never been given to people as a treatment.

Approval status

Research Chemical. Not a drug: Drugs@FDA and the openFDA label endpoint hold no record, and FDA GSRS and ChEMBL hold no substance record for chromofungin (searched November 6, 2026). It is a chromogranin-A-derived peptide; there is no therapeutic development of chromofungin itself, and no registered interventional trial of giving it to people. It is studied as an antimicrobial and anti-inflammatory peptide and an inflammatory-bowel-disease lead.

Dosing, as printed in the page's Recommended Dosing box

No established human dose

Chromofungin is a chromogranin-A-derived peptide that has never been given to people as a treatment. The human study measures the body's own peptide in colon tissue, and the rest of the work is in animals and cells, where chromofungin is applied at experimental amounts that do not carry over to people.

Educational information, not medical advice. None is a recommendation for you. An unapproved compound has no established safe or effective human dose, and products sold for "research use only" are not made or tested for people. Talk to a doctor before acting on anything on this site, including before you start, stop or change any medicine or dose.

Key human evidence

The 1 human study carded on the page (6 study cards in all):

• **Chromofungin is depleted in ulcerative colitis and calms macrophages** (Human, 2017). In tissue from people with active ulcerative colitis, chromofungin (CgA exon-IV) messenger RNA was downregulated versus healthy individuals and correlated negatively with pro-inflammatory (M1) macrophage cytokines, TLR-4 and NF-kB activity. In mouse colitis and in cultured macrophages, chromofungin treatment reduced disease severity and pro-inflammatory activation and migration through NF-kB — making it a candidate target in inflammatory bowel disease (a human observational plus preclinical study). **PMID 28827109**

Interactions

A PubMed search for interaction studies of this compound with any drug (November 6, 2026, 0 records) found none in people. That is not evidence that it is safe to combine with anything.

Side effects and cautions

Reported side effects	Contraindications and cautions
• No human adverse-event data exist: no published study has administered chromofungin to people • In animals and cells it is anti-inflammatory, cardioprotective and antimicrobial (PMIDs 28951733, 26151429, 11451958) — preclinical signals, not a human safety profile • The human study measures reduced chromofungin in ulcerative-colitis tissue, not a treatment (PMID 28827109) • Material sold online as 'chromofungin' is an unregulated research chemical of unverified content	• Not a medicine: no FDA application or label, and no approval anywhere • No human dosing, interaction, pregnancy or long-term safety data exist for administered chromofungin • It is a laboratory research peptide and an inflammatory-bowel-disease lead, not a treatment • Its effects on immune cells, the heart and calcineurin signalling warrant caution in any use

Five questions to ask

1. Chromofungin is listed here as "Research Chemical". What does the evidence on this sheet mean for someone in my situation, and is there an approved treatment I should consider instead?
2. Here are the medicines and supplements I take. Do any of them interact with Chromofungin? This sheet records none published, which does not mean none exist.
3. Which side effects should make me stop and call you, for example no human adverse-event data exist: no published study has administered chromofungin to people?
4. Do any of the cautions on this sheet apply to me, such as: Not a medicine: no FDA application or label, and no approval anywhere?
5. What should we check before I start and while I am on it (blood tests, blood pressure, weight), and how often?

Grey Peptides is a vendor-neutral encyclopedia: it sells nothing and names no seller. This sheet is educational, not medical advice, and is not a prescription.