Prokineticin 1 (EG-VEGF)

Also called: PROK1; EG-VEGF; Prokineticin-1; PK1; Endocrine gland-derived VEGF

What it is

Prokineticin 1 (PROK1), known as EG-VEGF, is an endogenous ~86-amino-acid AVIT-family angiogenic peptide and the sister of prokineticin 2. It drives blood-vessel growth selectively in reproductive and endocrine tissue and is central to the corpus luteum, embryo implantation and placentation (PMIDs 16320832, 34215801), signalling through PROKR1 and PROKR2. Its maternal blood level is a biomarker of pregnancy complications — it predicts spontaneous preterm birth (PMID 37963927) and keeping it high reproduces preeclampsia in mice (PMID 29197014). It is a research peptide and biomarker, 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 prokineticin 1 / EG-VEGF (searched November 6, 2026). It is an endogenous human peptide; there is no therapeutic development of PROK1 itself, and no registered interventional trial of giving it to people. It is studied as a pregnancy biomarker, and its receptors (PROKR1 / PROKR2) as drug targets, which remain preclinical.

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

No established human dose

Prokineticin 1 / EG-VEGF is an endogenous human peptide that has never been given to people as a treatment. The human evidence is blood levels (a biomarker of pregnancy complications) and tissue studies, not administration; the interventional work is in animals and cells — and because too much EG-VEGF harms a pregnancy, there is no case for giving it.

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):

• **Maternal EG-VEGF predicts spontaneous preterm birth** (Human, 2023). In a prospective multicenter cohort of 200 pregnant women at high risk of placenta-mediated complications, those who went on to have a spontaneous preterm birth had higher serum EG-VEGF at 24, 28 and 32 weeks. At 32 weeks the test reached an area under the curve of about 0.9 with 100% sensitivity for predicting spontaneous preterm birth, supporting serum EG-VEGF as a biomarker in high-risk pregnancies — an observational, predictive study, not a treatment. **PMID 37963927**

Interactions

A PubMed search for interaction studies of this compound with any drug (November 6, 2026, 1 record) 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 prokineticin 1 to people • High maternal EG-VEGF is associated with pregnancy complications — preeclampsia, growth restriction and preterm birth (PMIDs 37963927, 28782224) • In animals, keeping EG-VEGF elevated in early pregnancy reproduces preeclampsia (PMID 29197014), so raising it would be expected to harm a pregnancy • Material sold online as 'prokineticin 1' or 'EG-VEGF' 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 EG-VEGF • It is a laboratory research peptide and pregnancy biomarker, not a treatment • Its elevation in disease is an association and a warning sign, not a reason to take it

Five questions to ask

1. Prokineticin 1 (EG-VEGF) 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 Prokineticin 1 (EG-VEGF)? 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 prokineticin 1 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.