QRFP (26RFa)

Also called: QRFP; 26RFa; 43RFa; QRFP-26; QRFP-43; Pyroglutamylated RFamide peptide; P518

What it is

QRFP (pyroglutamylated RFamide peptide), also called 26RFa, is an endogenous RFamide neuropeptide discovered in 2003 and the natural ligand of the receptor GPR103. Made mainly in the hypothalamus, it stimulates appetite — especially high-fat-food intake — and locomotor activity, partly via orexin neurons (PMID 36251705), and it regulates glucose homeostasis in an incretin-like way (PMID 31084498), an effect lost in obesity. It exists as 26- and 43-amino-acid forms. It is a research peptide, not an approved medicine, and has never been given to people in a published trial.

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 QRFP / 26RFa (searched November 6, 2026). It is an endogenous human neuropeptide; there is no therapeutic development of QRFP itself, and no registered interventional trial of giving it to people. Both agonists and antagonists of its GPR103 receptor remain research tools.

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

No established human dose

QRFP is an endogenous neuropeptide that has never been given to people as a treatment. It is studied in animals and cells — given into the brain of rodents to probe appetite and glucose control, or added to cultured cells — not administered to patients.

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

No human study is carded on the page; its 6 study cards are reviews, animal or cell work. The first 2:

• **IUPHAR review of 26RFa/QRFP and its receptor** (Review, 2017). The definitive review of the 26RFa/QRFP–GPR103 system. 26RFa was first isolated from frog brain and, with its extended form QRFP, identified as the ligand of the former orphan receptor GPR103 (now the QRFP receptor). In mammals the peptide is made almost only in hypothalamic nuclei, and the receptor is widespread in brain and peripheral tissues (bone, heart, kidney, pancreas, testis). QRFP controls energy homeostasis, bone formation and nociception, and selective agonists and antagonists have been developed as tools and potential drug leads. **PMID 28613414**

• **QRFP a key regulator of glucose homeostasis** (Animal, 2019). In mice, blocking the QRFP receptor reduced the incretin effect and insulin sensitivity, while giving QRFP attenuated glucose-induced hyperglycemia — marking QRFP as a key regulator of glucose homeostasis. In diet-induced obese, hyperglycemic mice this action was lost: the insulin-stimulating and insulin-sensitising effects of QRFP disappeared, its receptor was downregulated in pancreatic islets and insulin-target tissues, and the peptide's release kinetics were altered — a resistance that develops in obesity. **PMID 31084498**

Interactions

A PubMed search for interaction studies of this compound with any drug (November 6, 2026, 2 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 QRFP to people • In animals it is orexigenic — it increases appetite, high-fat-food intake and body weight (PMIDs 36690209, 35093951) • Its metabolic effects are context-dependent and are lost in obesity, where its receptor is downregulated (PMID 31084498) • Material sold online as '26RFa' or 'QRFP' 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 QRFP • It is a laboratory research peptide, not a treatment • Its appetite-driving action would be expected to increase, not reduce, food intake and weight

Five questions to ask

1. QRFP (26RFa) 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 QRFP (26RFa)? 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 qrfp 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.