Secretoneurin (SN)

Also called: Secretoneurin; SN peptide; Secretogranin II (SN)

What it is

Secretoneurin (SN) is an endogenous ~33-amino-acid peptide cleaved from secretogranin II (SCG2), a granin-family protein and cousin of the chromogranin-A peptides catestatin and pancreastatin. It is a chemoattractant and angiogenic signal, modulates neurogenic inflammation and neurotransmitter release (PMID 11245085), stimulates pituitary luteinizing hormone (PMID 19106223), and is released by the stressed human heart, where blood levels serve as a cardiovascular biomarker (PMID 38663366). Its receptor is a proposed but unidentified GPCR. 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 secretoneurin (searched November 6, 2026). It is an endogenous human peptide; there is no therapeutic development of secretoneurin itself, and no registered interventional trial of giving it to people. It is studied as a multifunctional peptide and, most actively, as a cardiovascular biomarker, which remain research and diagnostic uses.

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

No established human dose

Secretoneurin is an endogenous human peptide that has never been given to people as a treatment. The human evidence is its blood levels (a cardiovascular biomarker) and its presence in tissue; the functional studies are in animals and cells, 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):

• **Trans-cardiac secretoneurin gradient in Takotsubo** (Human, 2024). In 15 women with Takotsubo (stress) cardiomyopathy, plasma secretoneurin was measured simultaneously in the aortic root and coronary sinus. The concentration was higher leaving the heart (coronary sinus) than entering it — a positive trans-cardiac gradient — supporting the idea that the stressed human heart produces and releases secretoneurin; blood levels correlated with NT-proBNP and kidney function. An observational human biomarker study, not a treatment. **PMID 38663366**

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 secretoneurin to people • High blood secretoneurin is a marker of cardiac stress and worse prognosis in heart failure and critical illness (PMID 38663366) — an association and warning sign, not an effect of taking it • In animals/cells it is chemoattractant, angiogenic and stimulates luteinizing hormone (PMIDs 11245085, 19106223), so inflammatory, vascular and endocrine effects would be expected if administered • Material sold online as 'secretoneurin' 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 secretoneurin • It is a laboratory research peptide and biomarker, not a treatment • Its elevation in disease is a prognostic marker, not a reason to take it

Five questions to ask

1. Secretoneurin (SN) 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 Secretoneurin (SN)? 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 secretoneurin 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.