

 FREE BUYER WARNING REPORT

Do NOT Buy another *NAD+* Until You Read This Shocking Report!

5 warnings every buyer needs to hear before ordering NAD+ online, and exactly how to protect yourself.



🚩 READ THIS FIRST

Stop. Before you order another vial.

You would never take a pill from a stranger's unlabeled bottle. Yet every day, people order NAD+ online from sellers they know nothing about, and inject it.

Most of these storefronts operate outside the regulated pharmacy system. No inspector checks what goes into the vial. No one confirms the label is true. And from the outside, a careful seller and a careless one look exactly the same: the same polished website, the same glass vial, the same promises.

64

deaths from one contaminated-injection outbreak

43%

of the labeled dose in the weakest product lab-tested

5,000+

smuggled peptide shipments seized at one US port

This report will not tell you where to buy NAD+, whether to use it, or what dose to take. It makes no claim about what NAD+ does for your health, and it is not medical advice; any decision about an injectable belongs with a licensed prescriber. What it will do is show you the five ways an online purchase goes wrong, and exactly what to check before you hand over your money.



5 warnings: the ways an unregulated online purchase goes wrong, and how to protect yourself from each

8 questions to ask before you pay: how a seller answers tells you almost everything

How to spot a fake Certificate of Analysis: what a real one must show, and the red flags that mean walk away

Sources: every government record and study behind these warnings

5 warnings every NAD+ buyer needs to hear

⚠️ WARNING 01

That "research use only" label may be a legal dodge

If a vial says "not for human consumption" but the website talks about energy, aging, or recovery, the FDA has a word for that product: a drug.

NAD+ has not been approved by the FDA as a drug, and it is not on FDA's finalized list of bulk substances that compounding pharmacies are allowed to use under Section 503A of the Food, Drug and Cosmetic Act. In a proposed rule published September 5, 2019, FDA proposed that nicotinamide adenine dinucleotide *not* be included on that list (Federal Register, 84 FR 46683). Separately, the reduced form, nicotinamide adenine dinucleotide disodium reduced, has been placed in the interim policy's Category 2, the category FDA uses for substances that raise significant safety concerns.

The practical meaning for a buyer is simple. Whatever lawful route exists for this compound runs through a state-licensed pharmacy compounding it for a specific patient under a valid prescription. None of that describes a direct-to-consumer website selling vials to anyone with a credit card and no prescription involved.

Many online sellers work around the "not an approved drug" problem with a label: "for research use only," "not for human consumption." The FDA has made clear that label alone does not settle the question. In a February 7, 2024 warning letter to US Chem Labs, the agency found that despite "research chemicals only" and "not for human consumption" language on the label, the company's own website described its semaglutide and tirzepatide products in terms of treating diabetes and controlling blood sugar, which the FDA said established the products were intended as human drugs regardless of the label. That is not an isolated reading; the agency has issued warning letters on the same reasoning to other online sellers, pointing to health claims and customer testimonials on company websites and social media as evidence of intended use.

⚠️ LOOK OUT FOR

Any health benefit, use case, or customer result anywhere in the seller's marketing: website, social media, product description, reviews. If you see one, the "research use only" label is not protecting anyone. Treat it as a red flag, not a selling point.

⚠️ WARNING 02

You may be paying for a dose you are not getting

When researchers lab-tested a comparable injectable bought from three online shops, every product came back under the labeled dose. The weakest held just 43 percent of it.

Nothing in the direct-to-consumer research-chemical market requires that a vial actually contain the labeled compound at the labeled strength. A peer-reviewed study published in *Drug Testing and Analysis* (Breindahl et al., 2015) tested vials of melanotan II, a similar injectable peptide product, purchased from three online shops that each advertised 10 mg per vial. Laboratory analysis found the actual content ranged from 4.32 mg to 8.84 mg, meaning every vial tested was understrength, and the study also found impurities in the products. That is an independent, third-party lab result, not a marketing claim, and it illustrates a structural problem with this entire unregulated distribution channel, not a one-off bad batch.

Labeled strength against measured content

Melanotan II vials bought from three online shops; peer-reviewed laboratory analysis



Every vial tested contained less than the labeled amount.

Breindahl et al., *Drug Testing and Analysis*, 2015.

Labeled strength against the measured range reported in the study.

⚠️ PROTECT YOURSELF

Demand third-party lab testing for your specific batch, not the product line in general. Then verify that result yourself on the testing lab's own website. A PDF the seller emails you does not count.

⚠️ WARNING 03

That vial could carry bacteria straight into your bloodstream

64 people died. The pharmacy that made their injections was licensed.

An injectable product that is not manufactured to sterile standards can introduce bacteria, fungus, or bacterial endotoxins directly into the bloodstream. This is not a theoretical risk. In 2012, contaminated injectable steroids from the New England Compounding Center caused a

multistate fungal meningitis outbreak; the CDC and FDA later confirmed fungal and bacterial contamination in sealed vials, and the outbreak was tied to more than 750 infections and at least 64 deaths (CDC MMWR, October 2012; FDA, Multistate Outbreak of Fungal Meningitis and Other Infections). That facility was a licensed compounding pharmacy operating under at least some regulatory oversight. A direct-to-consumer research-chemical seller typically operates under none.

Legitimate sterile compounding in the United States follows USP General Chapter <797>, which sets minimum standards for the environment, personnel training, and testing of compounded sterile preparations, including bacterial endotoxin testing for products made from nonsterile components and sterilizing filtration for high-risk preparations (U.S. Pharmacopeia). A seller who cannot describe how their product was sterilized, or who cannot produce endotoxin or sterility test results, is asking a buyer to trust an injectable product with none of those safeguards behind it.



⚠️ PROTECT YOURSELF

Ask, in writing, whether the product passed sterility and bacterial endotoxin testing, and for the method and the results. If the seller cannot answer, or hides behind the "research use only" label, walk away.

⚠️ WARNING 04

That "lab certificate" may have been made in a word processor

A Certificate of Analysis looks official. That is exactly why it gets faked.

A Certificate of Analysis (COA) is supposed to be independent proof of what is in a specific batch. In the online peptide and research-chemical market, fabricated COAs are a documented problem: a seller can produce a professional-looking PDF with invented purity numbers and a

testing lab name that either does not exist or never ran the test. A COA that cannot be checked against anything outside the seller's own website is not evidence, it is a claim in a different format.

⚠️ LOOK OUT FOR

Any certificate you cannot verify anywhere except the seller's own site. "How to spot a fake Certificate of Analysis," later in this report, shows you exactly what to check.



⚠️ WARNING 05

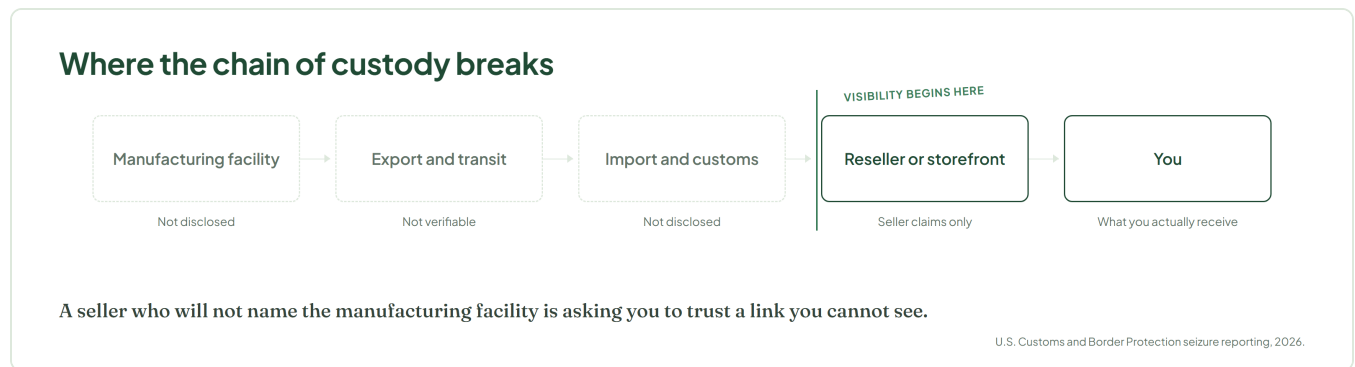
No one may know where your vial really came from

In just over three months, customs officers at one US port seized more than 5,000 peptide shipments hidden in mislabeled cartons.



A large share of the online research-chemical and gray-market peptide supply originates overseas and is imported without the oversight that applies to approved pharmaceutical products. U.S. Customs and Border Protection reported that officers at the Port of Cincinnati seized more than 5,000 individual peptide shipments between December 2025 and March 25, 2026, concealed inside roughly 300 mis-manifested cartons from China; the shipments included

GLP-1 compounds and other unapproved peptides. CBP Port Director Eric Zizelman said noncertified or unlicensed chemicals "present a serious health risk to those who use them" because their manufacturing conditions and authenticity cannot be verified (CBP, 2026). A product that moved through that kind of supply chain has no verifiable chain of custody: no confirmation of what facility made it, under what conditions, or whether the vial you receive is even what left that facility.



Where a buyer can and cannot verify what happened to the product.

⚠️ PROTECT YOURSELF

Ask who made the product and where. A seller who will not name the facility is asking you to trust the one link in the chain they refuse to show you.

⚠️ BEFORE YOU PAY

8 questions to ask any seller before you pay a cent

Copy these into an email. How a seller answers tells you almost everything.

- ☐ Does any of the seller's marketing, anywhere, describe a health benefit or use case? (If yes, the "research use only" label is not accurate.)
- ☐ Is batch-specific third-party lab testing available, and can it be verified on the testing lab's own website, not just as a file the seller sent you?
- ☐ Will the seller name the specific test methods used (identity, purity, sterility, bacterial endotoxin) and provide the numeric results, not just a pass/fail statement?
- ☐ Will the seller name the manufacturing facility?
- ☐ Does the seller disclose country of origin and how the product entered the country?

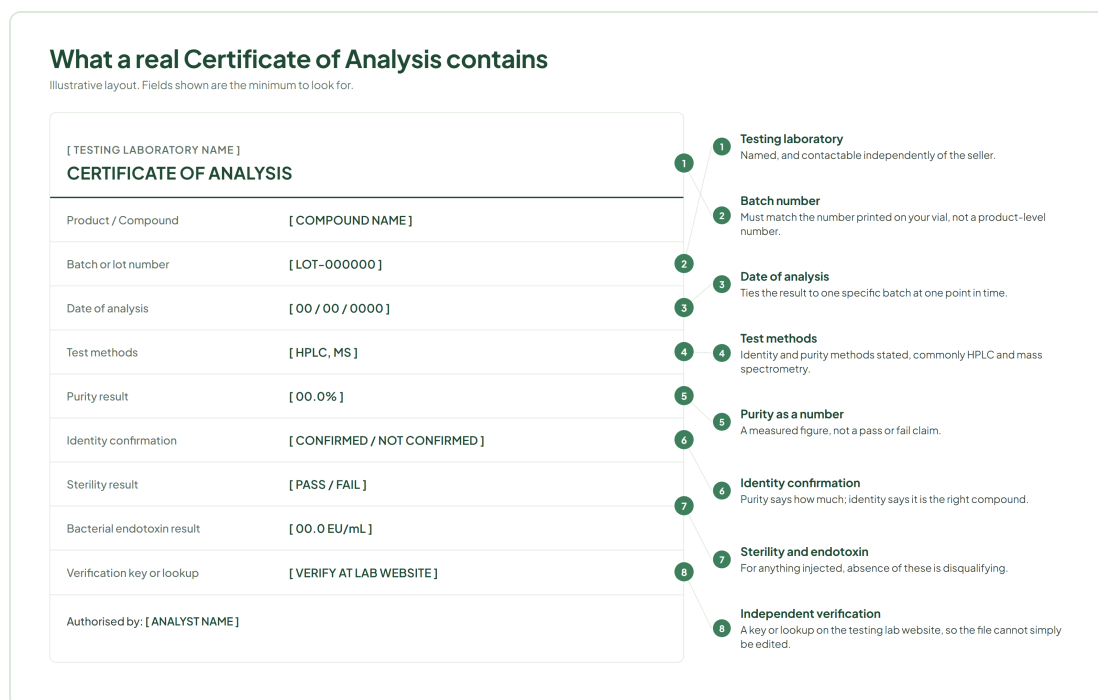
- Is the batch or lot number printed on the physical vial, and does it match the number on the COA?
- How old is the COA relative to when this specific batch was produced? A COA from a different, older batch tells you nothing about what is in your vial.
- Does the seller have a way for you to reach the testing lab directly, independent of the seller's own site?

⚠ **Stop** if a seller cannot answer most of these, or answers by pointing back to a "research use only" disclaimer. That dodge is your answer. Do not buy.

⚠ SPOT THE FAKE

How to spot a fake Certificate of Analysis

A legitimate COA for an injectable product should include, at minimum: the specific batch or lot number (matching the number on your vial, not a generic product-level number); the date the batch was tested; the name of the testing laboratory; the test methods used for identity and purity (commonly HPLC and mass spectrometry); the measured purity result as a number, not just a claim; and, for anything intended to go into the body, sterility and bacterial endotoxin results.



The fields a legitimate certificate carries, and what each one is for.

The strongest COAs include a way to verify the result independently: a task number, unique key, or lookup tool on the testing lab's own website that lets you confirm the document was not altered. A COA that exists only as a PDF or image, with no independent lookup, can be edited by anyone with basic photo-editing software, and there is no way to tell from the document alone whether it was.

 RED FLAGS: WALK AWAY IF YOU SEE ANY OF THESE

A COA with no batch number, or a batch number that does not match your vial; a lab name that cannot be found or contacted independently; a single COA reused across many batches or listed as covering "this product line" rather than one specific batch; and, for any injectable product, the complete absence of sterility or endotoxin data.

DOCUMENTATION

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ABOUT THIS GUIDE

This document is general consumer information about purchasing practices. It is not medical advice and is not a substitute for consultation with a qualified healthcare professional. Nothing in this guide is intended to diagnose, treat, cure, or prevent any disease.

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