

EVIDENCE DOSSIER

Creatine Pure+: Ingredient Evidence Dossier

Formula facts, published research on each ingredient at the amount used, safety information, and lab testing.

Published by Stellar Health Labs about its own product. This dossier is published by Stellar Health Labs, the company that makes and sells Creatine Pure+.

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Applies to: formula V1, label revision TBD, lot R604400.

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Independent scientific review of this version: pending.

Scope. This dossier summarizes research relevant to normal structure and function in generally healthy adults. Research conducted for other purposes is outside the scope of this document.

Disclaimer — These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure, or prevent any disease.

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§1 Key points

- **What it is:** an unflavored creatine monohydrate powder, one ingredient, 5 g (5,000 mg) per 1-scoop serving, 50 servings per container. → [§3](#)
- **This product itself has not been tested in a clinical trial:** the research described here was conducted on creatine (creatine monohydrate), sometimes at different amounts or in different forms. → [§4](#)
- **Where the human evidence is strongest and weakest:** the human research is strongest for muscle strength and high-intensity exercise performance (high certainty at the ingredient level), moderate for gains in lean body mass alongside resistance training, and lower and more mixed for cognition. → [§2](#)
- **Dose honesty:** our 5 g per day is the standard maintenance amount used across the human studies — this is one of the few ingredients where our amount matches the studied amount directly. An optional "loading" phase (about 20 g/day for 5–7 days) is described in the literature but is not required. → [§2](#)

- **Safety headline:** creatine is one of the most-studied supplements and has been well tolerated in healthy adults; talk to a healthcare professional first if you are pregnant or nursing, under 18, have a kidney condition, or take prescription medication. → [§6](#)
- **Testing:** the current lot (R604400) was third-party tested for identity/potency, heavy metals and microbial safety, and passed; lot results are available by lot number on request. → [§7](#)

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§2 At a glance

Ingredient (form)	Amount per serving	Research area in healthy adults	Certainty of human evidence	Amounts studied in people (daily)	Our amount vs studied
Creatine monohydrate	5,000 mg	Muscle strength and high-intensity exercise performance*	High	3–5 g maintenance (optional 20 g/d loading for 5–7 days)	Within range (5 g is the standard studied maintenance dose)
Creatine monohydrate	5,000 mg	Gains in lean body mass alongside resistance training*	Moderate	3–5 g maintenance	Within range
Creatine monohydrate	5,000 mg	Cellular energy (ATP regeneration) — mechanism*	Established mechanism	3–5 g maintenance	Within range
Creatine monohydrate	5,000 mg	Cognition in healthy adults*	Low	5–20 g	Within range (at the low, maintenance end)

Caption: "Certainty describes how confident we are in the published human research on the **ingredient**, not the tested effect of this product. See [Methods](#) and the certainty scale (Appendix A of this document)."

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§3 Formula and label facts

Transcribed from the Supplement Facts panel (label artwork on file). Values marked TBD await confirmation of the physical label revision (see [Open Items](#)).

- **Serving size:** 1 scoop (5.6 g) · **Servings per container:** 50 · **Net weight:** ~250 g · **Directions (as on label):** "TBD — transcribe verbatim from label" (typical use: mix 1 scoop in 8–12 oz of water or juice once daily).
- Because the directions are one serving per day, per-serving and per-day amounts are the same.
- **Scoop-vs-servings note:** the scoop is 5.6 g and the supplier panel states 50 servings; $250\text{ g net} \div 5.6\text{ g} \approx 44.6$ scoops. This is a supplier-label inconsistency carried on the panel; the dossier reports the panel figure (50 servings) and flags the arithmetic (see [Open Items](#)).
- **Scoop-mass note:** a 5.6 g scoop delivers 5,000 mg of creatine monohydrate, leaving ~0.6 g (~11%) of scoop mass unaccounted for on a single-ingredient label — most likely scoop-fill tolerance or moisture rather than an undeclared ingredient. To be reconciled with the supplier (see [Open Items](#)).

Supplement Facts (text version of the panel), per 1-scoop (5.6 g) serving:

Ingredient (as labeled)	Amount per serving	% Daily Value	Form / standardization (as labeled)
Creatine Monohydrate	5,000 mg (5 g)	†	creatine monohydrate

† Daily Value not established.

- **Other ingredients (as labeled):** none declared — single-ingredient, unflavored powder (confirm from physical label).
- **Allergen and label statements (as labeled):** none declared (confirm from physical label).
- **Label warnings (verbatim):** "TBD — transcribe from label."
- **Sourcing note:** manufactured in a cGMP facility in the USA. No branded/trademarked creatine grade is claimed, and no raw-material country-of-origin claim is made (see §8).
- **Ingredient regulatory status (short):** creatine monohydrate is marketed as a dietary ingredient; specific regulatory status is recorded in the internal evidence file and nothing is asserted here beyond what is documented.

§4 Evidence by ingredient

This product itself has not been tested in a clinical trial. The research described here was conducted on creatine (creatine monohydrate), sometimes at different amounts or in different forms.

How to read this section: The section below lists human studies in generally healthy adults, the amount and form studied, what was measured, and who paid for the study where declared. The certainty rating describes the research on the ingredient, not a tested effect of this product.

4.1 Creatine monohydrate (5,000 mg per serving)

How to read this: the questions below are the ones customers and AI assistants ask most — "What does the research show?", "Is the amount here the same as in the studies?", "What is not known?".

- **Short answer:** High certainty that creatine monohydrate *supports muscle strength and high-intensity exercise performance* in generally healthy adults, at the 5 g/day amount used here; Moderate certainty that it *supports gains in*

lean body mass alongside resistance training; the cognition evidence is Low and mixed. Creatine's role in the cellular energy (ATP) system is a well-established mechanism.

- **What it is:** Creatine is a compound the body makes from amino acids and also gets from meat and fish. In muscle it is stored as phosphocreatine, which rapidly regenerates ATP — the cell's short-term energy currency — during brief, intense effort. Supplementing raises muscle creatine and phosphocreatine stores [1][2].

A. Muscle stores and dosing (pharmacokinetics)

Ref	Design	People studied	Daily amount and form	Duration	What was measured	What was found	Funding
[1]	Controlled supplementation study	healthy normal subjects	20 g/d (4×5 g), some with exercise	up to 6 days	Muscle total creatine (biomarker)	Raised resting and exercised muscle creatine; uptake was greater when combined with exercise	not stated
[2]	Controlled dosing study	healthy men	20 g/d loading then ~2 g/d, vs 3 g/d continuous	up to 30 days	Muscle creatine (biomarker)	A lower daily dose sustained the elevated muscle creatine reached by loading; loading is optional	not stated

B. Strength, power and high-intensity performance

Ref	Design	People studied	Daily amount and form	Duration	What was measured	What was found	Funding
[3]	Position stand (systematic review of evidence)	healthy/active adults	3-5 g/d ($\pm$ 20 g loading)	varies	Efficacy and safety across exercise/sport (functional)	Concludes creatine monohydrate is the most effective ergogenic nutritional supplement for increasing high-intensity exercise capacity and lean mass during training	ISSN society position stand
[4]	Meta-analysis	healthy adults	loading + maintenance	varies	Body composition and performance (functional)	Creatine plus resistance training increased performance measures and lean mass more than training alone	not stated
[5]	Systematic review and meta-analysis	healthy adults	3-5 g/d ($\pm$ loading)	varies	Lower-limb strength (functional)	Improved maximal lower-limb strength vs placebo	not stated
[6]	Systematic review and meta-analysis	healthy adults	3-5 g/d ($\pm$ loading)	varies	Upper-limb strength (functional)	Improved upper-limb strength performance vs placebo	not stated
[7]	Review (of creatine + resistance-training studies)	healthy adults	5 g/d with resistance training	varies	Muscle strength and weightlifting performance (functional)	Concludes creatine + resistance training augments strength and weightlifting gains vs training alone	not stated
[9]	Randomized controlled trial	healthy individuals (14 untrained men)	5 g/d (post loading)	recovery window after exercise	Recovery of muscle force after eccentric damage (functional)	Enhanced recovery of muscle force vs placebo after eccentrically-induced muscle damage	not stated

C. Lean body mass (with resistance training)

Ref	Design	People studied	Daily amount and form	Duration	What was measured	What was found	Funding
[8]	Meta-analysis	older adults (resistance training)	3–5 g/d (±loading)	≥6 weeks training	Lean tissue mass and strength (functional)	Creatine during resistance training increased lean tissue mass and strength more than training alone in older adults	not stated

D. Cognition (healthy adults)

Ref	Design	People studied	Daily amount and form	Duration	What was measured	What was found	Funding
[10]	Systematic review of RCTs	healthy individuals	5–20 g/d	varies	Cognitive-function measures (functional)	Some measures (e.g., short-term memory, reasoning) improved in certain conditions; results overall were mixed	not stated
[11]	Narrative review	healthy adults	varies	varies	Brain creatine and cognitive processing (biomarker + functional)	Supplementation can raise brain creatine and may support cognitive processing under demanding conditions; more human trials are needed	not stated

- **Certainty: High** for muscle strength and high-intensity performance — several RCTs summarized in systematic reviews and meta-analyses [4][5][6] and a narrative review [7] (not itself a primary trial), plus a society position stand [3], all consistent, **within the studied dose range and in the studied form** (creatine monohydrate). **Moderate** for lean body mass with resistance training [4][8]. **Established mechanism** for the cellular-energy (ATP/phosphocreatine) role [1][2]. **Low** for cognition — few, small, mixed human trials, with clearer signals only under stressors such as sleep deprivation [11].
- **Our amount vs studied amounts:** studied 3–5 g/day maintenance (optional ~20 g/day loading for 5–7 days); ours 5 g per serving → **Within range** (5 g is the standard studied maintenance dose). **Form: Same** (creatine monohydrate — the form used in the large majority of the human research).
- **Mixed or null findings:** cognitive outcomes are inconsistent across studies [10]; creatine's performance benefit is specific to short, high-intensity efforts, not endurance [3][4]. Response varies between people, and those who already eat a lot of meat/fish may respond less [3].
- **What is not known:** the size of any cognitive effect at a 5 g/day maintenance dose in healthy adults, and long-term outcomes beyond the durations studied.

§5 How the ingredient works

This section explains why creatine is offered as a single ingredient at 5 g. It describes a formulation rationale, not a demonstrated effect of this product.

Creatine Pure+ is a single-ingredient product: creatine monohydrate at 5 g, the amount and form most used in the human research [3][14]. There is no blend and no proprietary mixture — the rationale is simply to deliver the studied ingredient at the studied maintenance dose, in the studied form, without additives. Creatine is studied for its role in the phosphocreatine system, which regenerates ATP during brief, intense effort [1][2].

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§6 Safety

Summary: creatine monohydrate is one of the most extensively studied dietary supplements and has been well tolerated in healthy adults in both short- and long-term studies; the practical points below are the common, minor effects and the situations where a clinician should be consulted first.

Per-ingredient safety table:

Ingredient	Established upper limit (source)	Our daily amount	Side effects reported in human studies	Known interactions (by drug class / mechanism)
Creatine monohydrate	None established	5,000 mg	Generally well tolerated; the most commonly reported effects are minor weight gain from water retention and, mainly at high loading doses, occasional stomach upset [3][13]	No well-established drug interactions; because creatine is cleared by the kidneys, people with kidney conditions or taking medications that affect the kidneys should consult a clinician first [3][12]

- **Long-term data:** long-term creatine supplementation did not significantly affect clinical markers of health in the studied populations [12], and reviews of common concerns (kidney function, hydration, cramping, hair loss) have not found support for them in healthy people [13].
- **Talk to a healthcare professional before use if you:** are pregnant or nursing; are under 18; have a kidney condition or take medications that affect the kidneys; take prescription medication; or have a scheduled surgery.
- **Allergens:** none declared (confirm from label). **Label warnings:** TBD — transcribe verbatim from the label.
- **Hydration:** because creatine draws water into muscle, drink adequate fluids.
- **Report a problem:** contact Stellar Health Labs (hello@stellarhealthlabs.com); adverse events can also be reported to FDA MedWatch (<https://www.fda.gov/safety/medwatch>).

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§7 Quality and lab testing

The **label specification** and the **lot result** are shown as separate columns. A missing value renders as "not tested on this lot", never as an inferred default.

- **Lot:** R604400 · **Tested:** May 2026 (identity/assay 2026-05-08; microbial 2026-05-11; heavy metals 2026-05-12)
- **Laboratory:** an independent third-party laboratory. The heavy-metals screen used an ISO/IEC 17025-accredited ICP-MS/MS method (separate report, lot 500100525629A). The laboratory and the ingredient supplier are not named because the certificate identifies the supplier; the accreditation body and certificate number are pending on file (see [Open Items](#)).
- **Availability:** **Current lot R604400 — lab results on request.** The COA PDF is not hosted publicly because it identifies the supplier; lot results are provided by lot number on request (`/pages/request-coa`).

Testing — lot R604400:

Test	Method	Label claim / specification	Lot result	Reference limit	Result vs spec
Creatine monohydrate (identity/assay)	HPLC	≥99% (NLT 99%)	100.44%	—	Meets
Lead (Pb)	ICP-MS	—	Not detected (<0.001 ppm)	USP <2232>	Meets
Arsenic / Cadmium / Mercury	ICP-MS	—	Not detected (<0.001 ppm)	USP <2232>	Meets
Escherichia coli / Salmonella / S. aureus	USP microbial	Absent	Absent	Absent	Meets
Total plate count / yeast & mold	USP <2021>	within limits	<10 CFU/g	USP limits	Meets

- **Not tested on this lot:** the creatine-specific impurity panel (creatinine, dicyandiamide, dihydrotriazine) was **not** measured on lot R604400. These impurities were measured within limits on a prior production lot, but a certificate reports only the results for the lot and tests listed, so no impurity value is claimed for R604400 here. A certificate of analysis reports results for the lot and tests listed. It does not show how the product will affect any individual.
 - **Testing program:** each production lot is third-party tested for identity, contaminants, heavy metals and microbial safety; lot-specific results are made available by lot number on request.
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§8 Manufacturing

- **Made by:** manufactured in a cGMP facility in the USA from globally sourced ingredients, operating under FDA's dietary-supplement current Good Manufacturing Practice rule (21 CFR Part 111). The manufacturer's name is held confidential.
- **Facility certifications (issuer · standard · certificate # · expiry):** cGMP; specific facility certificate documentation is pending on file.
- **Key raw material:** creatine monohydrate. No branded/trademarked creatine grade, and no raw-material country-of-origin claim, is made.
- **Packaged in / country of manufacture:** USA.
- (This is a dietary supplement; it is not approved or registered as a drug by the FDA, and no such status — nor any country-of-origin claim beyond USA manufacture — is claimed.)

§9 Limitations of this dossier

This product itself has not been tested in a clinical trial. The research described here was conducted on creatine (creatine monohydrate), sometimes at different amounts or in different forms.

- **Population and outcome fit:** most creatine research is in exercising or athletic adults; the strongest outcomes are for short, high-intensity performance and, with resistance training, lean mass. Endurance and cognition are weaker or mixed.
- **Individual variation:** people who already have high muscle creatine (for example, regular meat/fish eaters) may respond less; some individuals are "non-responders" [3].
- **Cognition evidence is Low and mixed** [10][11]; no cognitive claim is made beyond "studied for a role in cognition".
- **Label transcription pending:** directions, other ingredients, warnings, SKU/GTIN and the label revision are pending physical-label artwork; the scoop-vs-servings arithmetic ($250\text{ g} \div 5.6\text{ g} \approx 44.6$ vs a stated 50 servings) needs supplier reconciliation.
- **Testing scope:** the current lot has identity/assay, heavy metals and microbial results, but not the creatine-specific impurity panel; the COA is not published publicly (it names the supplier).
- **Funding transparency:** many of the primary creatine reports did not state their funding, and several reviews are authored by sports-nutrition researchers with known industry ties. This is noted for transparency; the ratings rest on the consistency of multiple independent trials and meta-analyses, not on any single funded study. Full-text funding statements will be recorded in the internal evidence file before publication.
- **Scope:** this dossier covers research relevant to normal structure and function in generally healthy adults only.

§10 Methods: how this dossier was prepared

- **Search:** PubMed/MEDLINE, the Cochrane Library, ClinicalTrials.gov, NIH ODS and the ISSN literature were searched on 2026-09-23 (search strings and counts are kept on file in the internal evidence file). Screening moved from records identified → screened → included, with disease-population and disease-titled records routed to the internal file.
- **Inclusion:** human studies of creatine (creatine monohydrate) in generally healthy adults, reporting outcomes related to normal structure or function; systematic reviews and meta-analyses first. Laboratory and animal research is labeled as such.
- **Verification:** every reference was checked against PubMed for existence, bibliographic accuracy, retraction status and disease-title flag using ``verify_pmids.py``; every cited PMID returned status OK-MACHINE on 2026-09-23, and each was read for relevance to the ingredient and statement it supports.
- **AI-assistance line:** Parts of this dossier were drafted with AI assistance. Every reference was verified against PubMed and read by the preparer before publication.
- **Certainty ratings:** an adaptation of the GRADE approach (Appendix A). There is no overall product score.
- **Conflicts of interest:** Stellar Health Labs makes and sells this product. Reviewer compensation, if a reviewer is named in a later version, is disclosed with the byline.
- **Corrections:** errors are corrected promptly and recorded in the version history (§13). Report an error: hello@stellarhealthlabs.com.

§11 Common questions

- **How much creatine is in one serving, and how do I take it?** Each 1-scoop (5.6 g) serving provides 5,000 mg (5 g) of creatine monohydrate; there are 50 servings per container. Mix one scoop in water or juice once a day. → [§3](#)
- **Has Creatine Pure+ itself been clinically tested?** No. The finished product has not been tested in a clinical trial; the research here is on creatine (creatine monohydrate). → [§4](#)
- **Is 5 g the amount used in studies?** Yes — 3–5 g per day is the standard maintenance amount across the human research, so our 5 g is within the studied range. A loading phase (about 20 g/day for 5–7 days) is optional. → [§2](#)
- **Do I need to "load"?** No. Loading fills muscle stores faster, but a steady 5 g/day reaches the same level over a few weeks [2]. → [§4](#)
- **What was this lot tested for?** Lot R604400 was third-party tested for identity/potency (assayed at 100.44%), heavy metals (none detected) and microbial safety (pass). Results are available by lot number on request. → [§7](#)
- **Is it safe for my kidneys?** Creatine has been well tolerated in healthy people, and long-term studies have not shown harm to clinical health markers [12] [13]. If you have a kidney condition or take medications that affect the kidneys, check with a clinician first. → [§6](#)
- **Who should not take it?** Talk to a healthcare professional first if you are pregnant or nursing, under 18, have a kidney condition, take prescription medication, or have surgery scheduled. → [§6](#)

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§12 References

Numbered in order of first citation. Every entry links to PubMed and to the DOI where available. Only citations that passed the public-citation filter appear here.

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14. Wax B, Kerksick CM, Jagim AR, et al. Creatine for exercise and sports performance, with recovery considerations for healthy populations. *Nutrients.* 2021;13(6):1915. doi:10.3390/nu13061915 PMID: 34199588 . — Used in: §5.

§13 Review, authorship and disclosures

- **Prepared by:** Stellar Health Labs. Parts of this dossier were drafted with AI assistance; every reference was verified against PubMed and read by the preparer before publication.
- **Independent scientific review of this version:** pending.
- **Disclosure:** This dossier is published by Stellar Health Labs, the company that makes and sells Creatine Pure+.
- **Disclaimer:** These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure, or

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<https://stellarhealthlabs.com/pages/evidence/creatine-monohydrate>

Version history

Version	Date	Type	What changed	Scientific review
1.0.0	2026-09-23	Major (draft)	First draft prepared for internal review	pending

Superseded versions: none.

Appendix A — Certainty scale (GRADE-adapted; published with every dossier)

Rated per ingredient, per outcome, for human evidence in generally healthy adults. There is no product-level composite score and there are no letter grades.

Rating	Meaning
High	Several well-conducted human trials, usually summarized in a systematic review, show consistent results. Further research is unlikely to change this conclusion much.
Moderate	Human trials point in the same direction, but there are fewer of them or they have limitations. Further research could change the size of the effect.
Low	Human evidence is limited, inconsistent, or indirect (for example, different amounts or forms from ours). The true effect may be substantially different.
Very low	Very limited human evidence (for example, one small or uncontrolled study). We can't draw a conclusion.
Preclinical only	Only laboratory or animal research exists for this outcome. It tells us about possible mechanisms, not about effects in people.

Basis: the GRADE Working Group approach (Guyatt et al., BMJ 2008; GRADE Handbook). The adaptation is described openly as ours, not as an official GRADE assessment.

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