Bradykinin

A natural signal—not a wellness treatment.



Guide prepared November 13, 2026 · profile review dates retained

KEEP IN MIND Evidence applies to the studied formulation, route, population and outcome—not every product sharing a name.

01 What is it?

Bradykinin is a short-lived signal involved in inflammation, pain, blood-vessel widening, and swelling. Its effects help explain how the body responds to injury, but the same signaling can become harmful when excessive. This profile concerns a biological messenger rather than a wellness treatment. [1]

02 Potential benefits

Contributes to normal vascular regulation and inflammatory signaling. Pain signaling helps alert the body to injury. Its pathway led to major insights in cardiovascular pharmacology. [1]

03 Evidence & its limits

Human experiments demonstrate a blood-pressure effect, not a broad health benefit. In a small study of intravenous bradykinin , the pressure response differed between healthy participants and patients with renal hypertension, and captopril altered its potency. A measurable pathway effect is not evidence that increasing the signal is desirable. [1]

04 Risks & unknowns

Excess signaling can contribute to pain, swelling, low blood pressure, and angioedema. It helps explain some ACE-inhibitor cough and angioedema. It is not administered as a wellness peptide. [1]

05 Status & scope

A natural signaling molecule, not a wellness treatment. Human pathway experiments do not demonstrate a benefit from increasing bradykinin. [1]

06 The question to ask

Does the evidence match the exact product, route, condition and outcome being discussed? Check the full record and its review dates. This summary is selective; the product label and clinical assessment contain additional warnings and contraindications.

SOURCES / Tap a reference to open

[1] Full evidence record, references and review dates
[2] Discovery history in PubMed
[3] Historical article
[4] Rocha e Silva et al.: original bradykinin report, 1949

Selective educational summary, not treatment or dosing advice. Existing profile review dates retained; no independent clinical review.