5 GLUTATHIONE MISTAKES Most People Make | Doctor Reveals Transcript

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What Glutathione Actually Does in the Body

Glutathione requires a whole host of Glutathione requires a whole host of other cofactors and what we found in other cofactors and what we found in working with people in a experimental working with people in a experimental model of radiation burns, which uh model of radiation burns, which uh Hello and welcome to YouTube channel.

Hello and welcome to YouTube channel. I'm Dr. A and on this channel we talk I'm Dr. A and on this channel we talk about all things integrative health, about all things integrative health, holistic health care, many, many other holistic health care, many, many other things around medicine. But today we things around medicine. But today we want to jump into a question combo want to jump into a question combo questions that came up. So I kind of put questions that came up. So I kind of put them all together and it's what kind of them all together and it's what kind of uh mistakes might somebody make taking uh mistakes might somebody make taking or using glutathione. But you might or using glutathione. But you might wonder, well, you talk a lot about wonder, well, you talk a lot about glutathione on the channel, remind me glutathione on the channel, remind me what it does. Well, it's one of the core what it does. Well, it's one of the core antioxidants in your body. So there are antioxidants in your body. So there are two core water-soluble antioxidants that two core water-soluble antioxidants that work with one core fat-soluble work with one core fat-soluble antioxidant and then all the other antioxidant and then all the other antioxidants are built around that. The antioxidants are built around that. The two water-soluble are glutathione and two water-soluble are glutathione and vitamin C and then vitamin E is in vitamin C and then vitamin E is in fat-soluble membranes. They all help fat-soluble membranes. They all help each other out. They help each other each other out. They help each other recycle. Because glutathione can get recycle. Because glutathione can get used up in inflammatory conditions, used up in inflammatory conditions, other diseases, we might find ourselves other diseases, we might find ourselves in a place where we're recovering from in a place where we're recovering from something or we need extra, etc. and so something or we need extra, etc. and so we might find ways to supplement. So we might find ways to supplement. So what are ways that that can maybe not go what are ways that that can maybe not go as well as we wanted it to. And of as well as we wanted it to.

Why You Need Vitamin C and Vitamin E Together

And of course these are all individual, but course these are all individual, but these are just some ideas that came up these are just some ideas that came up through some questions that we got. So through some questions that we got. So the first one is not remembering the the first one is not remembering the three that we just talked about. And three that we just talked about. And that of course is the synergy between that of course is the synergy between vitamin C and glutathione and vitamin E, vitamin C and glutathione and vitamin E, E like Edward. Now vitamin C we don't E like Edward. Now vitamin C we don't make in our body. Humans don't make it.

make in our body. Humans don't make it. Other animals do. So we have to get it Other animals do. So we have to get it in our diet or through supplements uh in our diet or through supplements uh and it's water-soluble. So pretty much and it's water-soluble. So pretty much what comes in goes out within a 24-hour what comes in goes out within a 24-hour period with a little bit of storage in a period with a little bit of storage in a couple of places. Vitamin E is couple of places. Vitamin E is fat-soluble. We tend to get that in food fat-soluble. We tend to get that in food as well. And then glutathione is made by as well. And then glutathione is made by the human body from three amino acids the human body from three amino acids being glutamine, cysteine, and glycine.

being glutamine, cysteine, and glycine. So, our liver primarily synthesizes this So, our liver primarily synthesizes this tripeptide glutathione. So, we want to tripeptide glutathione. So, we want to keep the family together. And so, we keep the family together. And so, we always want to remember if we're going always want to remember if we're going to be supporting glutathione, we want to to be supporting glutathione, we want to make sure we're getting enough either make sure we're getting enough either dietary, supplemental, or some combo of dietary, supplemental, or some combo of the above of its helpers vitamin C and the above of its helpers vitamin C and vitamin E.

vitamin E. We also want to remember that when we're We also want to remember that when we're sick and inflamed, which would be times sick and inflamed, which would be times we might need more glutathione, vitamin we might need more glutathione, vitamin C and vitamin E might be taxed more as C and vitamin E might be taxed more as well. So, that's the first thing is well. So, that's the first thing is remember to keep the family together.

remember to keep the family together. Now, people will often comment, "Well, Now, people will often comment, "Well, there's other antioxidants. There's ones there's other antioxidants. There's ones that are stronger." That is true. All that are stronger." That is true. All true. But, your body is set up to true. But, your body is set up to operate with these three, vitamin C, operate with these three, vitamin C, vitamin E, and glutathione, as its base.

vitamin E, and glutathione, as its base.

Choosing the Right Form of Glutathione

And so, after the base, then you can add And so, after the base, then you can add on all the other antioxidants that you on all the other antioxidants that you want. The next mistake might be using or want. The next mistake might be using or taking the wrong form. Now, in the past, taking the wrong form. Now, in the past, it was considered that oral glutathione it was considered that oral glutathione didn't absorb very well. And if you just didn't absorb very well. And if you just take glutathione take glutathione as an unchanged molecule, the tripeptide as an unchanged molecule, the tripeptide side glutathione, like in a powder, that side glutathione, like in a powder, that does not absorb orally if you eat it does not absorb orally if you eat it very well. A little bit absorb, but not very well. A little bit absorb, but not too much. But, in the last uh few too much. But, in the last uh few decades, we have developed delivery decades, we have developed delivery methods that increase glutathione methods that increase glutathione absorption. And the two that have absorption. And the two that have research for oral use are either acetyl research for oral use are either acetyl glutathione, a c e t y l acetyl glutathione, a c e t y l acetyl glutathione, or liposomal glutathione.

glutathione, or liposomal glutathione. And there's some liposomal glutathiones And there's some liposomal glutathiones that are actually S-acetyl glutathione that are actually S-acetyl glutathione in a liposomal form. Either of those in a liposomal form. Either of those will absorb and they will absorb much, will absorb and they will absorb much, much better than a dry powder. So, if much better than a dry powder. So, if you have a Sometimes you get like a very you have a Sometimes you get like a very inexpensive glutathione supplement, it inexpensive glutathione supplement, it will be not S-acetyl glutathione, not will be not S-acetyl glutathione, not liposomal glutathione, it's just dry liposomal glutathione, it's just dry powder. You're not going to absorb very powder. You're not going to absorb very much of that. So, that's that's one much of that.

When Injectable Glutathione Makes Sense

So, that's that's one thing. The other is that sometimes thing. The other is that sometimes people want a non-oral version and there people want a non-oral version and there there's other ways to get it, but there's other ways to get it, but sometimes they'll go to a doctor who sometimes they'll go to a doctor who injects it into them, right? Now, this injects it into them, right? Now, this is not a mistake. It's often used when is not a mistake. It's often used when you get really low or super inflamed or you get really low or super inflamed or you have to heal after, you know, some you have to heal after, you know, some traumatic event or something and your traumatic event or something and your healthcare provider wants to increase healthcare provider wants to increase the level in your body. And so, in order the level in your body. And so, in order to do that beyond what you can take to do that beyond what you can take orally, there are injectable forms. So, orally, there are injectable forms. So, glutathione can be injected on the type glutathione can be injected on the type into the muscle. It can be injected into the muscle. It can be injected subcutaneously and it can be injected subcutaneously and it can be injected intravenously, but you have to make sure intravenously, but you have to make sure that obviously it is an injectable form.

that obviously it is an injectable form. The healthcare provider is getting it The healthcare provider is getting it from a pharmacy that's licensed to make from a pharmacy that's licensed to make such things and they're using it within such things and they're using it within the proper bounds of the type of the proper bounds of the type of glutathione that it is. So, for example, glutathione that it is. So, for example, sometimes there's another prescribed sometimes

there's another prescribed glutathione used in a nebulizer. You glutathione used in a nebulizer. You know, like you might use for your asthma know, like you might use for your asthma or something. You can put glutathione in or something. You can put glutathione in there, but some of the forms that are there, but some of the forms that are made sterile for injection are not made sterile for injection are not appropriate in the nebulized form. So, appropriate in the nebulized form. So, your healthcare provider has to make your healthcare provider has to make sure you're getting the right form for sure you're getting the right form for the right application. Now, a lot of the right application. Now, a lot of people will say, "Well, why would I get people will say, "Well, why would I get it injected when I can take it orally?" it injected when I can take it orally?" And the answer is you may not need to, And the answer is you may not need to, but think of an injectable, a parenteral but think of an injectable, a parenteral application as say filling the tank. You application as say filling the tank. You get really behind because you're got a get really behind because you're got a lot of stressors or you're healing, etc.

lot of stressors or you're healing, etc. This is a way to get your levels up and This is a way to get your levels up and then the oral supplementation that then the oral supplementation that you're doing you're doing acetyl glutathione liposomal or acetyl glutathione liposomal or precursors, that will work better precursors, that will work better generally for you. So, it is not a right generally for you. So, it is not a right or wrong answer.

The Cofactors Your Glutathione Needs

It's just get the right or wrong answer. It's just get the right form for what you're trying to do. The form for what you're trying to do. The third thing is really neglecting the third thing is really neglecting the cofactors. So, for example, with vitamin cofactors. So, for example, with vitamin C and vitamin E, they don't require a C and vitamin E, they don't require a lot of cofactors to cycle between their lot of cofactors to cycle between their oxidized and reduced form. Glutathione oxidized and reduced form. Glutathione uses a ton of cofactors. And so, where uses a ton of cofactors. And so, where vitamin C just needs glutathione to vitamin C just needs glutathione to work, for example, glutathione requires work, for example, glutathione requires a whole host of other cofactors. And a whole host of other cofactors. And what we found in working with people in what we found in working with people in a experimental model a experimental model of radiation burns, which nobody wants, of radiation burns, which nobody wants, we found that we got better outcome by we found that we got better outcome by supporting the glutathione with its supporting the glutathione with its cofactors. So, what are the cofactors cofactors. So, what are the cofactors for glutathione? Well, they include a for glutathione? Well, they include a number of B vitamins, primarily B2, B3, number of B vitamins, primarily B2, B3, and vitamin B5, actually, a lesser known and vitamin B5, actually, a lesser known one. They include a number of minerals one. They include a number of minerals for cofactors. Magnesium is sort of a for cofactors. Magnesium is sort of a big macro one. Selenium and zinc are big macro one. Selenium and zinc are very involved. And then also vitamin C very involved. And then also vitamin C is supportive as well. So, making sure is supportive as well. So, making sure you have your cofactors. Now, a lot of you have your cofactors. Now, a lot of people will say, "Well, let's say I people will say, "Well, let's say I didn't just have surgery. I'm not didn't just have surgery. I'm not recovering from it. I just want to kind recovering from it. I just want to kind of keep my glutathione cofactors going." of keep my glutathione cofactors going." Number one, diet. Make sure you have all Number one, diet. Make sure you have all these trace elements, the minerals and these trace elements, the minerals and vitamins and stuff in your diet. Number vitamins and stuff in your diet. Number two, if you're going to supplement them, two, if you're going to supplement them, a lot of people in their multivitamin, a lot of people in their multivitamin, the B vitamins aren't that strong in a the B vitamins aren't that strong in a multivitamin. So, they might take a B multivitamin. So, they might take a B complex. That can be helpful.

complex. That can be helpful. And then what I will usually do with And then what I will usually do with patients is have them take a patients is have them take a multi-mineral instead of just separate multi-mineral instead of just separate minerals. If it's for maintenance, that minerals. If it's for maintenance, that way it's just in one pill. You can way it's just in one pill. You can get a multi-mineral that has a number of trace multi-mineral that has a number of trace minerals including zinc and selenium.

minerals including zinc and selenium. And then it'll have some magnesium, etc. And then it'll have some magnesium, etc. And of course, you should be getting And of course, you should be getting this also from your diet. The next thing this also from your diet.

Best Glutathione Precursors and Building Blocks

The next thing would be not having enough building would be not having enough building blocks. So, we said earlier that the blocks. So, we said earlier that the liver can make glutathione. It's a liver can make glutathione. It's a tripeptide. So, that's the three amino tripeptide. So, that's the three amino acids together. And if we supplement the acids together. And if we supplement the constituent amino acids or even constituent amino acids or even pre-precursors, we'll talk about that, pre-precursors, we'll talk about that, then that can help us to improve the then that can help us to improve the liver's ability to create glutathione.

liver's ability to create glutathione. Now, in some other videos, we've talked Now, in some other videos, we've talked about problems with the liver about problems with the liver and generally in the body having single and generally in the body having single nucleotide polymorphism, some genetic nucleotide polymorphism, some genetic issues in the formation of glutathione.

issues in the formation of glutathione. For those people, precursors don't work For those people, precursors don't work quite as well. quite as well. But generally speaking, you would think But generally speaking, you would think of precursors either as primary, so of precursors either as primary, so that's the three constituents of the that's the three constituents of the tripeptide. And so, that's glutamine, tripeptide. And so, that's glutamine, cysteine often found as N-acetylcysteine cysteine often found as N-acetylcysteine NAC, NAC, NAC, and then glycine, the amino acid. So, and then glycine, the amino acid. So, you could take that. Now, there's you could take that. Now, there's information on we've got a video on information on we've got a video on GlyNAC which is just glycine and GlyNAC which is just glycine and N-acetylcysteine.

N-acetylcysteine. N-acetylcysteine. And that's just two out of the three. And that's just two out of the three. And so, that's another way that you can And so, that's another way that you can go. You can take them separate. You can go. You can take them separate. You can take them together. It really doesn't take them together. It really doesn't matter there. And then there's sort of a matter there. And then there's sort of a pre-precursor which is another pre-precursor which is another sulfur-bearing molecule or a thiol. So, sulfur-bearing molecule or a thiol. So, N-acetylcysteine, if you ever open a N-acetylcysteine, if you ever open a bottle of N-acetylcysteine, it might bottle of N-acetylcysteine, it might smell sulfury like maybe eggs or smell sulfury like maybe eggs or something like that.

something like that. It has kind of a cousin in in thiol It has kind of a cousin in in thiol world called alpha-lipoic acid or world called alpha-lipoic acid or thioctic acid, but usually it's thioctic acid, but usually it's alpha-lipoic acid in the supplement alpha-lipoic acid in the supplement store. And alpha-lipoic acid is what we store. And alpha-lipoic acid is what we call pre-precursor. So, it doesn't feed call pre-precursor. So, it doesn't feed right in like N-acetylcysteine does, but right in like N-acetylcysteine does, but it raises the thiol pool in the liver it raises the thiol pool in the liver and the rest of the body, meaning the and the rest of the body, meaning the sulfur uh constituent pool.

sulfur uh constituent pool. And by alpha-lipoic raising the thiol And by alpha-lipoic raising the thiol pool, it makes it easier for the body to pool, it makes it easier for the body to make its own glutathione. So, cysteine, make its own glutathione.

Why Glutathione Therapy Is a Long-Term Process

So, cysteine, glycine, glutamine, GlyNAC primary sort glycine, glutamine, GlyNAC primary sort of uh precursors, and then alpha-lipoic of uh precursors, and then alpha-lipoic acid as a secondary.

acid as a secondary. And then the fifth thing that I see And then the fifth thing that I see clinically with folks is just the sort clinically with folks is just the sort of perspective, and that's not looking of perspective, and that's not looking at it as a this is a long-term process.

at it as a this is a long-term process. So, by that, we have kind of two primary So, by that, we have kind of two primary meanings. One is, if you've gotten sick meanings. One is, if you've gotten sick or you're in recovery from a trauma, a or you're in recovery from a trauma, a surgery, a long-term illness, a long surgery, a long-term illness, a long COVID or chronic illness or something, COVID or chronic illness or something, it may take a while to build

your levels it may take a while to build your levels back up. So, you want to remember the back up. So, you want to remember the the basics. You need vitamin E and the basics. You need vitamin E and vitamin C to go with your glutathione.

vitamin C to go with your glutathione. You need the cofactor support being the You need the cofactor support being the B vitamins and the trace elements that B vitamins and the trace elements that we mentioned. And then you also we mentioned. And then you also [clears throat] want to remember whether [clears throat] want to remember whether you're going to direct support it with you're going to direct support it with acetyl glutathione or liposomal, or acetyl glutathione or liposomal, or you're going to indirect support it with you're going to indirect support it with GlyNAC, NAC, cysteine, glutamine GlyNAC, NAC, cysteine, glutamine separately, alpha-lipoic acid, whatever separately, alpha-lipoic acid, whatever you're going to do, it may take a while you're going to do, it may take a while to get built back up. Then on the other to get built back up. Then on the other end, what we mean about thinking end, what we mean about thinking long-term is because your body does make long-term is because your body does make glutathione, long-term with people often glutathione, long-term with people often we don't need because it's it's it's not we don't need because it's it's it's not inexpensive to supplement all those inexpensive to supplement all those things. Long-term we see often with things. Long-term we see often with people once they're recovered, they can people once they're recovered, they can get from their diet and maybe some get from their diet and maybe some supplements their basic the B complex of supplements their basic the B complex of vitamins, the minerals, and uh vitamins, the minerals, and uh potentially take a precursor or take a potentially take a precursor or take a low dose of uh acetyl glutathione, low dose of uh acetyl glutathione, liposomal glutathione. But, they may liposomal glutathione. But, they may only need the glutathione that they're only need the glutathione that they're taking or precursor a few days a week taking or precursor a few days a week because they've got all the cofactors because they've got all the cofactors and they've rebuilt themselves. So, a and they've rebuilt themselves. So, a lot of it has to do with are you acute lot of it has to do with are you acute or in, you know, some sort of acute or in, you know, some sort of acute need? Then, you need to fill the tank need? Then, you need to fill the tank faster. Are you in more of a chronic faster. Are you in more of a chronic state where you've been supplementing a state where you've been supplementing a long time? Things are going pretty well.

long time? Things are going pretty well. You're going to be just fine You're going to be just fine uh doing cofactors and the support uh doing cofactors and the support nutrients, and then maybe a little bit nutrients, and then maybe a little bit uh of a precursor or a liposomal or uh of a precursor or a liposomal or acetyl glutathione. All right. I'm Dr.

acetyl glutathione. All right. I'm Dr. A. I'll see you all in the next video. A. I'll see you all in the next video. Hope this answered all those questions.

Hope this answered all those questions.