How To Stay Young With Bioregulators Transcript

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Introduction to Peptides and Aging

With the peptide theory of aging, we know that the human body makes its own bioregulator peptides really, really well when we're young. And like so many other things, We don't make them as efficiently when get older or when you get sick or we are under undue stress.

The peptid theory that was put forward by Professor Cavinson, it's wildly simple, but if you have any understanding of human physiology, you understand that those 12 par marks of aging will also impact the peptide theory of ageing and vice versa.

So all of these things are intertwined. It's not an either or. This is Doctor Talks. Hey everyone, welcome back to the Peptide Summit. It's Dr. Jenn here.

We have a great interview today. Natalie Nidham is a self-proclaimed science geek with a passion for human health. She is the host of the Biohacking Superhuman Performance Podcast.

If you haven't listened to it, it's amazing. She is a certified holistic nutritionist and an epigenetic coach with a keen focus on human longevity and health span.

A few years ago, she stumbled upon peptides at a health optimization conference. She was captivated by the potential of these tiny proteins and what they represent for human health.

she believes they will truly continue to revolutionize medicine. Nat's passion is looking at longevity through the lens of all we can do in every area of our lives to promote vibrant health, boundless energy, focusing on a healthy mind and body.

She works with clients one-on-one, manages two large and growing communities, and speaks frequently at international conferences on the regenerative powers of peptides and peptide bioregulators.

Welcome. Thank you. You are the go-to for peptides and bioregulators, and we are so happy to have you here today. Well, thank you, it's an honor to be here.

I really appreciate being here, Thank You. Yes, of course. Well, let's dig right in to the meat. And well, maybe first, before we dive into bioregulators, you said you just discovered peptides at a conference and you were like, what are these?

Cause I think this is what happens to everyone. You hear the word peptide and people think of collagen peptids and your like no, it's more than that. Yeah, no.

Discovering Peptides at a Conference

It's so much more that and it is, and its truly like I had been mentioned to me couple years before by someone who wasn't particularly, he wasn' very committed, right?

He kind of went, have you heard about these things called peptides? And I'm like, No, I haven't heard of them, right? But then I was at this conference, and if people have heard me speak before, they've probably heard this story, so I'll keep it very short, but I, was tired and I needed to sit down.

I literally found a chair in front of a stage and there was a guy standing there talking about these, you know, he was talking whatever and he said a few things that just really caught my attention.

And then next thing you, know I'm on the edge of my seat going, Wow, did he just say that? Did he say, that and at the time he was talking about, I think the peptides, he talked about BPC 157. He was, talking, about melanotan too.

And he, talked, a pitalon and by the pidalon, was he talking. About that old people study that, Kevinson did way back. And by the end of it, my jaw was on the floor.

I'm tapping the guy's shoulder in front of me going like, is this guy for real? Like, I didn't know who he was. Like is he making this up? And the guys turned around to me and he turns out this guys owned a compounding pharmacy.

And he's like oh yeah, no, this is real. This is the future of medicine. From that day on I was kind of obsessed. I tried to step away from the shiny new toy and I just couldn't.

I kept getting drawn back and drawn and at the end of the day, it's become the thing that I talk about the most. As much as I think that it is really important for people to keep in mind that these are very powerful, They're a very important tool, and they still, even as powerful and magical and amazing as they are, they're still part of the toolkit.

But I think they can be a real mover of a needle, as it were. they work with the body because they are fundamentally native to the Body. So this is one of those things where we're not bringing in a medication that's designed to block a pathway or amplify a And kind of very often what happens with drugs, which can be the negative, is they're very effective at blocking or amplifying a pathway, but they don't really concern themselves with the fallout.

And sometimes they prevent the body from having its own checks and balances that it all generally has in place, right? So, for example, if you look at exogenous growth hormone, you introduce synthetic growth hormones into the body, and because it has negative feedback loops to produce growth hormon, your body will at some point say, okay, well, we've got enough.

We can stop making our own. That's a problem, because then you kind of can't come off the stuff. Whereas there's category of peptides called growth hormone secretagogues that stimulate your body to make its own growth hormones.

And in that case, it leaves that feedback loop kind intact. It's not a perfect science. You still have to be mindful that you don't overuse the growth-hormone secretogogues.

But it's much more nuanced approach. to promoting growth hormone in the body than just bringing it in from the outside and overwhelming your whole system.

Yes, and I loved the point that you brought up that these are great, but you still have to work on your general health, you know, like sleep and gut health and all the things.

And in my practice, I will kind of, sometimes I'll pull out, well, peptides kind like the big guns, right? So sometimes, pull them out right away, usually not until the second or third appointment.

I'm working on their gut, health. But if people have done all those basic things and they're stuck, it can really move the needle and really put their body back in balance.

And that's what's so great about them. As you said, you're not getting these nasty medication side effects. Yeah, 100%. I think one of the ways to encourage people, because it's not to say that something like a BPC 157 can't help someone even before they've made changes, right?

If you have someone with lots of gut issues, sometimes that BTC will give them that little toehold.

How Bioregulators Differ from Peptides

It'll help them to feel that a little bit better so that they can then make the other change, you know, they, can do all

the stuff. And I know you're going to be having Kyle on, like there, there's an oral formula of BPC one by seven for gut health, but I mean, I've been yapping about this stuff for two years, ever since I just, he discovered me on my Facebook group and reached out and that was when I had him on the podcast.

But, with something like that, sometimes it can be the domino that we flip, we help. for the client, or in your case the patient, to help them feel that much better so that they can do the rest.

But remember that if you've taken care of the basics, like you're talking about, the sleep and the diet and all the things, you actually may not need as much.

You don't have to spend as money. And the peptides or the bioregulator, whatever it is that you introduce, even sometimes the supplements, they could do a better job.

Because as you know, as Dan Stickler says, who's the guy as it turns out, he's Dr. Dan sticklers, the guys I first heard talk about peptides as he taught us in is that you can't optimize a body that's, that out of balance, right?

We, in order to get optimized, to be better than baseline, you have to homeostasis. You have get to a balanced state and only once you're in a balance state, can you actually optimize.

That's a great point. And it makes me think of I'm looking at my cold plunge right now that's in front of me. There's so much drama over that. It's like, well, of course, if you're in a health crisis, you shouldn't be getting in our cold tub.

Like that should be, yeah, but it's not common sense for everyone. You know, I started cold plunging cause my thyroid, You Know, was in remission for my Hashimoto's.

I felt at a good place health wise. So then I added that in as a biohacking tool. Yeah, we ought to use common sense when we talk about all these things, too.

So let's talk the peptide bioregulators. And so some people are like, okay, I just learned what peptides are. Now you're trying to talk to me about bi oregulars?

Because that happens a lot. Yeah, I know. So they're not that different. You know what, guys? Think of a peptide only littler. As you guys know, a peptide is a protein that is 50 amino acids or less in length, right?

The bioregulator is peptides that are a less than 50-amino acids. However, in the case of the bi oregulation, it's at most four amino acid and as few as two amino-acids, so it is really These are really teeny tiny messaging proteins.

And they're not, and whereas the BPCs and the CJCs of the world are messengers, right? So they are chemical messangers, they attach to a receptor, They initiate a cascade.

They may even through that receptor influence the expression of genes. What the bioregulator is able to do, because it's so tiny, is it seems, it is, able, to get across the cell membrane.

It is going to use a transporter, but it crosses the It gets into the nucleus of the cell and it actually binds to your DNA. And by binding at a very specific site on the DNA, it'll up-regulate the production of proteins, which helps us with rejuvenating and restoring function at the cellular level in specific tissues, glands, and organs.

But you know what's interesting is you talk, I know that you presented at A4M on GHK copper, which is everybody's favorite peptide these days. There's a lot of people that believe that it should have been classified as a bioregulator because it's only three amino acids.

It absolutely influences the expression of DNA. a bajillion times over. I always think of it as maybe it's a little bit of a thing like champagne, where unless the grapes are grown in a specific region in France, you're not allowed to call it champagne.

The bioregulators were discovered, developed, and researched primarily in leadership by a man by the name of Professor Kavansin from Russia, Vladimir Kavenson.

And he didn't discover JHK, Lauren Picard did. Yeah, isn't that funny? Because yeah, it's just the three, but it is, well known as a peptide. It's like in that class.

And the gene expression, the studies on how many genes it turns on and off is so cool. Is it like a thousand or four thousand? Like I've seen both numbers bandied about.

Yeah, and it's around like 60 to 70% of our genes it like affects or something. It just has really high gene expression. And one thing that I feel like people are also turned off by peptides and bioregulators because there's like, oh, there is not a lot of research and that's not true either.

Yeah. Well, I know. You're looking like no way. Well, I'm talking about when I talk to like conventional doctors that have never heard of peptides and bioregulators.

They're like, well, a farm rep didn't come in with that. Do you really want to wait that long? Yeah. So the bi oregulator are those tiny little proteins.

they are able to influence genetic expression. so they're classical epigenetic switches and they. you make them, like your body makes them. And that feeds into Cavinson's theory, the peptide theory of aging, which is, you know, we have all these different theories of ageing and there's probably truth to all of them and certainly the hallmarks of aging is the It's the leading theory right now, and there were six, then there nine, now there's 12, probably by next year there'll be 15. Ultimately, it's basically scientists elucidating how, at a cellular level, things shift in the human body that either cause aging or is caused by aging, like it is a bit of a chicken or the egg thing.

With the peptide theory of aging we know that the body makes its own bioregulator peptides really, really well when we're young.

Peptide Theory of Aging and Research

And, like so many other things, we don't make them as efficiently when we get older or when get sick or we're under undue stress, whether it's chemical stress or emotional stress.

lions or whatever. I was going to say saber-toothed tigers, but there aren't too many of those around anymore. So basically, the peptide theory of aging that was put forward by Professor Cavinson, it's wildly simple.

But if you have any understanding of human physiology, you understand that those 12 par marks of ageing will also impact the peptide theory of aging and vice versa.

So all of these things are intertwined. It's not an either or. The fact of the matter is when you bring up research, you look at bioregulators, there's probably more human research on bi oregulator peptides than there is on any other peptid.

because for 40 years, four decades, and maybe not for, you know, probably for two of those four, decades. Kevinson had a blank check, carte blanche, thousands, millions of people he could like run experiments on and not evil scientist experiments, more like, this group's going to get polyvitamins, that group is going get these bioregulator peptides.

And let's see how what their outcome is. And I think the other thing that's really interesting about the bioregulators is they're exceptionally good for people who are older, right?

Because the one of the reasons why the bio regulators have such a high safety profile is something that I mentioned earlier, which is homeostasis. The bi oregulator is really working hard to bring you back into balance.

It's not trying to push you into superhuman land, it's not trying to suppress anything. It's really saying, let's allow the body to self-regulate. Let's restore the ability of the to body self regulate and to be in a state of balance.

Yeah. And that's what makes it so unique. So the thyrogen bioregulator, that one, you give it to hyper and hypo thyroid patients. That's, what's really cool.

Hashimoto's patients, Graves patients I can use this on, and that different from other things. But when we talk about peptides too, I mean, things like thymus and alpha one or thimus beta four to restore their immunity with these autoimmune type problems, which are just running rampant right now.

But that's like Natalie said, it's bringing it into homeostasis. So with the thyroid, I think is a good example of that one. What is your favorite bioregulator?

I know. Yeah, you know, that's like, who's your favorite child? It depends on the day, right? I think that, it's interesting. I mean, I've spoken most as my desert island bioregulator.

which is the pineal gland bioregulator. And in part because the Pineal Gland itself is so critical for the most crucial aspect of human health, and that is regulating circadian rhythm.

It also is a master endocrine regulator. So if we have a way in health and in functional medicine that you practice and all of these things, what we're trying to do is How far upstream can we possibly make a positive impact to allow the body to do what it does best on its own?

The less we intervene, the better off it's all going to be. Generally speaking, human intervention in human body, unless you've been in a car accident or something and you need someone to put Humpty Dumpty back together again, Generally speaking, as much as we can get ourselves out of the way, the body has ways of healing and restoring itself that are unique, that we still can't reproduce.

And so the cool thing about the pineal gland bioregulator is by normalizing melatonin levels, by restoring circadian rhythm, by having this kind of upstream, kind-of downstream regulation effect on the endocrine system, which doesn't mean that all of, just to be clear, doesn' mean all your hormones are magically going to come into balance, but it kind has that influence.

And with a side hustle that it activates telomerase that restores the telomeres on your DNA, we can take care of a lot of things just by getting those things kind of taken care.

So that is, by and large, my desert island bioregulator. But the other one that's becoming a close second, and this is partially driven by some research I've been doing and you know, kind of digging around is the bioregulator that sounds like it should be the pineal gland bi oregulator, only it's not, called pinyalon.

And panyalon is, if you look it up, it is brain bi regulator or the central nervous system bi-regulator. It also influences the pinal gland, but it also influence the entire nervous And again, like everything's coming from the brain, the signals and the messages to your heart, to you lungs, your kidneys to regulate your blood pressure, everything is coming up here.

So maybe I'm going to have to modify my opinion and say, you know, pineal on and epithelon, that two brain bioregulators might have be the top picks. Well, it makes a lot of sense and so many people are just dysregulated from that nervous system.

And then that's impacting all their other functions of their organs. We see this a lots. Oh, especially gut health. If they're not regulated, then their gut's health is going to be a mess.

So I love those too. So how, if someone's out there and they're like, well, bioregulators, what, how the heck do I use them? Right? So similar to peptides, these are something that you're cycling in and out.

Yeah. So maybe let's enrich the conversation a little bit by saying there are available about 21 different bioregulators, right? And so they correspond to 21 organs, organ systems, glands.

Rattling off the big ones, we've got the heart, the kidneys, lungs, stomach, muscle, bone marrow, adrenal glands, thyroid gland, eyes. Cartilage is a big one.

And we talked about the brain, the pineal gland. So, you know, if we step back and we say, okay, first of all, it's the pancreas. If we have people that are having metabolic issues, So what we're going to do is we are going say, okay, so what are the systems, what the organs that are being challenged here?

What are organs maybe have had some damage? what organs are fatigued? It's like if you imagine the tread on your car tires, where the treads been kind of worn down a little bit, you're kind skidding a tiny bit.

Favorite Bioregulators and Organ Stacking

I once rented a car where a tread was completely gone on the tires I didn't notice. It was like driving on ice and I was in Florida. It's crazy. So what we want to do is we wanna restore the tread on those tires to get back the grip, for our organs to be able to work again.

If we have someone, let's say, who's got crazy blood sugar regulation issues, and we know that that engenders a whole lot of other problems down the road, obviously we're all gonna sit there and go, okay, pancreas.

Pancreas needs attention. We need to give the pancreas some love. Who else? liver, liver is going to be involved here, so we want to give the liver some love.

And we almost always want bring in the blood vessel bioregulator, at least for part of the cycles, right? Because those blood vessels, the integrity of that endothelium of those vessels is gonna be critical in terms of getting nutrients to the cell and removing waste products from the cells.

So definitely we want to be looking at what's going on. So for example, another example might be with cardiovascular heart issues or blood pressure issues.

The cool thing is for someone like you who's a medical doctor and you've got all the labs in front of you and all of the data that you need in the front, you have a sense in this patient, are the kidneys involved here?

Because the kidney is very often get forgotten when it comes to blood pressure. Whether they're a driver or they are suffering the consequences of high blood-pressure, kidneys need some attention.

We have the heart that needs attention, we have blood vessels that need attention maybe that central nervous system needs attention. Maybe we need to pay attention to the brain a little bit.

So we start to build these stacks in a woman who's perimenopause, for example, and her hormones are all over the place, her ovaries are like, you know, breathing their last gasp, they're kind of passing the baton over the adrenals who are like, what are you talking about?

Like, well, why me? I've been carrying you for like a bajillion years and you're telling me I need to take over? So now we might say, okay, here we're going to give the ovaries some love.

We're gonna give adrenal glands some loves. The adranals are going be hanging on to the thyroid, dragging it down saying, whoa, we need slow down. So we're going to have to give the thyroid some love.

And let's not forget what we talked about at the very beginning, our master endocrine regulator, the pineal gland, is going play a role here as well. So, we are going now to start to build a protocol and stacks paying attention to all of these different pieces.

And it's so cool and I love how you described all of that because it is all related. You know, all these organ systems, they pool on each other. If one is out of balance, like help me get back into balance.

And then we, you know most people get on medications or get antidepressants or sleep aids and it never ends well. It never end well, so I loved how explain that they stack because they are all leaning on one another.

And all they want to do is get into homeostasis. And I've seen, I know you've seeing it so, so many times. Once your body gets back into Homeostasus, it just breathes and it can work right.

and this is where these methods that we use are not well received all the time in the conventional community because it's not, through a drug company and whatnot, but.

And it's very unfortunate. So with these bioregulators, there's a more aggressive plan that you can do if someone has more an acute or emergent situation, and then there is kind of more maintenance things.

Can you go through those a little bit? Yeah. So, I mean, so one thing I want to stress here as well is when you look at the research on the bioregulators, don't forget that very often they get used in conjunction with conventional treatments.

There is value to modern medicine. Like there is. The problem is when you use it as the only lever, you leave yourself exposed to real trouble. So I want to say that because in a world where you have someone who really has major medical issues going on.

You're going to want to bring all the tools to bear. But the difference might be that you're not saying to someone you are using a PPI for the rest of your life because that's your solution.

Right? You might say to them, look, you've got a bleeding ulcer. We need to change the environment of the stomach for a little minute while we get repair done and then you come off that thing.

Right? PPIs have been demonized for good reason, but they actually do have their place. So in a situation where you really have something going on, you might use the bioregulator for 30 days at first, or you might use it for 60 days.

You might, instead of two capsules a day, you use two capsule twice a or three times a. This is where the use of bioregulators, I feel, has a lot more art and nuance to it than it leaning only on science.

Whether it's because we don't have the data or if it is because different, it's allowing for different people to respond differently and for the physician to really look at the patient and say, okay, what do I think this person needs?

Where do i think we can really support them and help them? And so that one to two months of intense course and then what they might do is you know you start to see the needle moving, you started to things kind of coming back into balance and now you might say okay let's kind Let's let you fly on your own for a few minutes here and let's do like little 10-day pulses every month to see if just giving that stimulus for 10 days and then stepping away for 20 and 10 day and stepping way for twenty can help to those results to kind of stick.

Yes, absolutely. And then in the long-term studies that they did in Russia, this was something that, they continued all year round, right? When they were using the epitalin.

Well, so again, it depended on the study, right? So I think that, and the funny thing, well, the interesting thing is about the Russian work is that some of it was really well translated and some it wasn't well-translated.

Like, for example, there was a lot of confusion around dosing of the synthetic epitalon for the longest time. For the long time, you had people running around saying it's 10 milligrams a day for 10 days or 20 days.

As it turns out, it's not 10 milligrams a day of the synthetic. It's 10 mg a of day the biologic, which is not nearly as

concentrated. If you're talking about the synthetics, actually 100 micrograms a date, 100 times less than the 10mg.

So when we look at what they did in some of those studies, in the old people study, and I call it the Old People Study because that's what the called it.

To be clear, I'm not calling anybody old. I am just saying that what they did is it sounds like they gave them the epitelon continuously for two years and then checked in at six years, and at 12 years again.

And the group that got the had a way lower mortality rate. I believe it was 44% lower mentality rate than the control group who had been given polyvitamins.

So everybody got something, nobody knew what they were getting. One group was getting epithelium, which is a very specific extract of the pineal gland that is an intramuscular injection.

And in that case, it may have been 10 milligrams, but it's a product that we actually don't see outside of Russia. whereas the control group who were getting also an injection of polyamovitamins was, but both groups, it was a two-year stint and then they were followed to see how they fared after six years and after 12 years.

And then that study was repeated with elderly people, unless the first one was elderly and the second one, whatever. The second was 75 to 85 year olds and those people he only he only followed them for six years because, of course, they're much older.

He didn't really expect them to live that long.

Dosing, Cycles, and Study Findings

And the first group got the polyvitamins, the second group just epithalamin, which is the pineal gland bioregulator, and the third group, got epitalamin and thymalin, thimus bi regulator.

That third crushed it. It's impractical with humans to see what the longevity is because we just live too bloody long. So what he was looking at is mortality.

Can we reduce the mortality rate by administering these compounds? And so the control group had an 88% mortality after six years. They were pretty much out of the picture.

And these are people living in fairly harsh conditions in Siberia or something, which Sabah area is a beautiful place, don't get me wrong, but they were not living an easy life.

And then the epitelon group did better and the exact numbers are escaping me at this very minute, I apologize. But the guys that did the best were the people that got the Epithelium, the pineal gland bioregulator and a thymus bi oregulated.

And it makes sense, right? Because look at a lot of like the newest hallmark of aging, inflammation is inflammation of the system. This is dysregulated immunity.

So if we can keep our immune system happy and balanced, We're going to do better in every way because that low-level inflammation, which is a dysregulation of the immune system, is ultimately what's being linked to metabolic disease, neurodegenerative disease like cardiovascular disease.

All the things. Yes. I often explain to my patients, I'm like, you can't have disease without inflammation. It just doesn't happen. So we need to bring your inflammation down.

And so I love all those studies. it's so fascinating. Why isn't this being handed out? Anyway. We're doing our best. Here you are. Here I am. That's what's great.

Spreading the word. Now you did mention synthetic. So there are more natural bioregulators, you know, coming mostly from cows. And then the synthetic, can you explain the difference and what is better?

Is one better than the other? Yeah, so definitely the biologic or the natural bioregulators are typically extracts from young cows. They can also be extract from sheep, young and young pigs.

Now, one thing for people to remember is by the time you get your capsule of bi oregulator, there's no animal protein left in there except for those peptides.

So it is unrecognizable as pig, sheep. or cow, it is just bioregulator peptide and maybe with some cofactors from that tissue. So I think it's important to understand that because, you know, people worry about prion disease, they worry, about all kinds of stuff.

And this stuff has been so refined. It's been dealt with so deeply, if you will, that by the time it gets into that capsule, You have none of the messy stuff left.

And one of the things I like to talk about is, you know, one other way to get some bioregulators into your life is to eat organ meats, because that's where they're getting the bi regulators from.

So, which feeds into ancestral nutrition and ancestral ways of healing. If somebody had a heart condition, they would feed them heart. if somebody has a lung condition they will feed the lung.

Like it's a really interesting thing that this ancient wisdom is kind of baked into human into human, I don't know, humanity, let's just say. I try to sneak all the organ meat into my family's meal.

So, because it's really funny, so I put like liver into taco night one time, and I could taste it because I knew it was in there, So I'm like, oh, this tastes gamey.

Is anyone going to notice? And they're all just like eating it. This is amazing, mom. I never tell them. But yeah, but that's good. It's for my kids. We don't anymore, which is very unfortunate.

And it's similar. So I had Hashimoto's, so I have to have some of my thyroid. Long, long story. pain to purpose, but I take NP thyroid and that has a little bit of that same bioregulator.

But I also take some T4 only to make it more like what our body produces. Yes, that's a great point. If you're taking liver capsules or eating liver, you are getting a bit.

It's just not as concentrated. Anyway, so getting back to the question that you asked about the synthetic bioregulators, sometimes I digress, I apologize, but I do come back the the questions.

And that is that what's happened is, that over time, as they've been studying these bi regulators, they have kind of come to identify the exact amino acid sequence that's really responsible for that genetic switch.

the switching of the genetic. Now, I will say that there are five bioregulators that are not available as synthetics, and that would be the adrenal, the thyroid, bone marrow, muscle, And there's one other one that's escaping me, but there are five of them that you won't find as synthetic.

And that could be because they basically couldn't the one. That was the most dominant. Maybe what they're saying is you need the complex that your going to find in the extract to really get the effect.

But in any event, in the case of the pineal gland, the brain, and the immune system, even lungs, kidneys, heart, stomach, liver, all those guys, we have synthetic bioregulators, which means that in a lab, they are able to re-synthesize that exact amino acid sequence in that orientation that it's in.

So this is really important because there are two bi oregulator, Vinon being one of them, And the other one might

be the iBio regulator, but there are the exact same two amino acids.

Now, how is that possible? How could you possibly have, I mean, come on, you've got two little bitty amino acids and they're doing completely different things.

And this really speaks to the sophistication and the complexity of the human body in that the way that they are arranged in a 3D plane, the ways that their bound to each other and whatever molecules are attached to them really defines how they going to interact and bind to that DNA.

So, in the lab, they're able to reproduce this exact amino acid sequence in exact orientation that it occurs in, and that way they are able now to produce it and make it available.

The thing with the synthetics is they can be administered in a couple of ways, this is a testament to how freaking small they And one of them is there's some bioregulators that are available as sublingual drops or sprays, and then you can also find them as injectable by injection, injectables.

And typically those are, they were available through compounding pharmacies and now with the FDA regulations that have come down. They're more readily available through the better research labs, but there you have to be very careful because research Labs are these days a dime a dozen and you got to really know who you're dealing with to make sure that you are getting what you think you were getting when you get that itty bitty little teeny tiny vile.

Yes, that's a great point.

Natural vs Synthetic Bioregulators

When you were talking about the bind, how they're pulled together, it's kind of like when you fold your hands one way and hold hands with someone one-way and then it feels awkward and that feels good.

It really is amazing how these affect our body at such a molecular level with the epigenetics. If people are listening, they're like, oh, this makes me kind of nervous.

Well, you can turn your genes on and off by your diet, by stress. Yes. So this is a good thing. All of these are good things. It's not just biohacking either.

it should just be looked at as getting your health back into homeostasis because we live with so many stressors, so much toxins. You almost have to work at it.

I mean, Yeah. To get your health. You do. And you have to take care of the whole machine, right? And don't forget about, you know, we were talking about this before we started recording.

Like, don' forget your spirit and your thoughts. This is going to sound whoo, humor me here for a second. But, if you think about how how there's actual clinical research that shows that being like your thoughts and your feelings can actually suppress your immune system like being incredibly stressed or being angry too much can have a negative impact on your system.

People have actually measured this drop and so not that we ought to walk around being polyana positive even when our life could be a whole lot better sometimes, but there's any work that we can do to help ourselves to be more resilient, to live in the present, in gratitude in as much as it's possible for us, is going to put us in a much, it is a little bit like what we said earlier, if you can get into a balanced state, everything else you do is gonna be amplified.

Right? So not to go too far over to the woo side, but I just think we mustn't forget that piece. Absolutely. That's so true. And one quick question to wrap up about bioregulators.

What about side effects? Are these products something that you see a lot of side-effects in, or should we be worried about that? Thank you. That's a great question.

So the short answer is, and as much as I never, ever, say never and I will not say, never even now, I haven't seen a whole lot of issues here. Like I just haven' t.

The worst thing I've seen is it doesn't work. Right? So people will come back and say well, it didn't What else are you doing? Are you just using this as the one thing that you're hoping is going to move the needle for you?

And look, I get it. There are a lot of people out there who are desperate for answers and for solutions, and they're working really hard. And we want to grab onto something like this and say, this is gonna be the thing, that's gonna fix me.

So understand that this is still, although it's very powerful, it is a powerful piece of the puzzle. It has a relatively really good safety profile simply because of that, what we talked about before, about it really working towards bringing you back into balance.

What I have seen on occasion is sometimes it can be too much for someone, so they have to start at a lower dose. Or for Someone with a lot of autoimmune issues, sometimes, and I know that in Russia, you know, I learned this from people who worked with Russians, And that is that they will sometimes start with the synthetic bioregulator instead of the biologic, simply because it's simpler.

you just have the amino acids, you don't have any of those cofactors, You don' have anything else kind of getting into play. And so maybe for someone who has a very sensitive system, it's also easier to titrate, right?

It's easier do even less. But by and large, they play really well with medications. The only thing is, as Dr. Jen will tell you, if you're, let's say, working with the thyroid bioregulator, and a couple of others, and you're on thyroid medication, have an eye on your numbers in case you are starting to see that maybe sometimes the thyroid will kick back in.

And this depends on a million things. It depends how much damage has been done to the thyroids. You know, it depends a thousand things, but it is not unheard of that people might see some a little new life breathed into the thyroid gland and sometimes they're able to reduce their levels of thyroid medication.

But this is the kind of thing you want to be doing with your physician and keeping an eye on labs and things like that. Yeah, and that goes the same for blood pressure medications, all the things.

You just, you have to know that you're going to have keep up with the labs, up your readings, because if your body does start to go back in homeostasis, then you can pull off those medications.

Those conventional medications but I agree with what you said earlier in the podcast is that don't just go on a bioregulator and then throw all your medication away.

It's a gradual process. gradual thing, like most healing. I mean, you see it probably someone is sick, it takes them 10 years to get sick and then they expect to be better within two months.

And it's like, that's just not how our body works. Give yourself time, give yourself grace and time all the things. Yeah. And it's usually going to be a process, right?

It's trying different things, adding different to each other and really feeling your way. You're on this healing journey for whatever reason, and hopefully you find the doctor, like Dr.

Jen or a practitioner who can walk with you and kind of support you, help you bring you insights and help to shine the light on what you're discovering in yourself.

Your greatest healer is you. ultimately. But we need help and we needs support and someone to bounce ideas off of and to bring another body of knowledge into play that you may or may not have yourself.

So I think in a perfect case, you've got a really great person by your side and And it's encouraging, right? I think it is hopefully the way that medicine will be practiced.

I thing right now what's really difficult is our medical providers are under massive stress. They're overworked, they don't have time in many cases to be able to sit with people and really lean in.

Like all of our systems, Canada is a hot mess, I don' think the US is that much better.

Safety, Side Effects, and Closing Thoughts

you've got HMOs kind of breathing down people's necks and you got six minutes with this person and they're out the door. You're not getting paid for a second more.

And so this is where we really as individuals have to step up, grab the reins, find that person who's going to walk with you and then go forth and be the best version of yourself that you can be.

Absolutely, that's such a great way to finish. So beautiful, so much fun talking with you. I could talk all day with, you have so many knowledge. Where can everyone find your health groups?

We talked about your podcast, which is great, Biohacking Superhuman Performance Podcast. How else can anyone reach you? Thank you so, much Jen. So the, on Instagram it's at Natalie Nidam, just my name, and I've got a private membership community on a platform called Mighty Networks.

The community is called the BSP community because I couldn't bring myself to use biohacking superhuman performance again. Like, you know, my best attempt to us all the letters of the alphabet is the title.

So, the best way to find out about all these things is to go to natnidam.com. That's my website, and you'll find information there about the BSP community.

There's the podcast. All the things that I'm doing. I've got a new project in the works that can't really talk about yet. And then Dr. Jen and I will be meeting up at Hack Your Health at the end of May.

you know, just lots of different ways. So I hope to see you guys somewhere, somehow. Yes, absolutely. Thank you so much. Thank you for tuning in to Doctor Talks.

We hope today's episode has enlightened and inspired you on your path to optimal health. Each day is a new opportunity to make choices that empower your well-being.

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