Jay Campbell on GLP-1s, Hormones, and Consciousness Transcript

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Podcast Intro and Guest Welcome

80% of people have hormone deficiencies. Of the 80 percent of the people that have a hormone deficiency, at least 75% don't even know it. People are walking around in major cities depressed, fat, and sick.

And that's because their hormones are suboptimal. This is not just men, this is women too. And doc, it goes all the way in the kids in their twenties now.

What's happening in younger people is they're playing video games, they are addicted to porn, not getting sunlight, immersed in a wash and blue light and harmful EMF frequencies.

And so that all that dysregulates, you know, dendritic, synaptic serotonergic pathways in the brain. Welcome to the TBD Fit podcast on Dr. Talks. I'm your host, Daniel Keeley, and I will be guiding you through this wellness journey in terms of optimizing health and longevity, where we unpack the science, the do's, and everything in between.

Come join us. Look forward to seeing you inside. Welcome back to another episode of the TBD Fit podcast where we explore the most effective strategies in functional and regenerative medicine to help you feel better, live longer and elevate your performance today.

I'm excited to welcome a true pioneer in the optimization and longevity space. Jay Campbell, who is a four times international bestselling author, a leader in hormone optimization and one of the most influential voices in peptide therapeutics, regenerative medicine and human consciousness.

His work has helped thousands of people break free from the limitations of conventional sick care. and step into higher health, higher energy and higher self-awareness.

In this episode, we're going to go straight to the truth, no fluff or hype. We're gonna explore how peptides are revolutionizing healing, how hormone optimization affects aging and raising your consciousness is just as important as optimizing your biology.

Jay, thank you for joining us. Super excited to have you. Welcome to show. Dr. Daniel, that was an amazing introduction. Thank you for that. Um, I'm grateful to be here.

Consciousness, Purpose, and Health Optimization

I always am blessed when I get a chance to speak with people like yourself who really are obviously helping, uh, thousands, if not millions of people.

Cause that's what I like to think is like the more that we, you know, cloud source all of this information, more and more people find it. Uh, and I think we both know and your audience knows that This is where it's going, right?

Like health is what I call now quantum healing. Like you either are in the sick care space and you show up to your doctor when you're sick or when your ill or you got something going on and your like, here's my copay.

Or you like us and like man, I'm not doing any of that. I am going to be using peptides and bioregulators and small molecules and hormones and all these other things.

So I don't ever have to go see those people. Right? Like if I have to see those people, it's because I'm gut shot and bleeding out or I've been, you know, in a horrible car crash and I'd been airlifted now to the hospital so somebody can surgically repair me or, whatever they have do.

But, um, I look at it as like, If you're truly conscious and on the quantum healing path, and we can talk about what I mean by that, but you are looking to avoid doctors.

Like you. Looking to like, how do I maximize this earthly vessel so that I can live longest, leanest and strongest that possibly can. And you not again, the again typical, let's just call it baby boomer.

Who's like my doctor said. I got to do this because my doctor told me to, right? Like my dad or, you know, people of that generation, like they think my Dad thinks that I'm insane, Right?

My dad thinks I have a drug deal. Right. And there's massive amounts of people have that. Generation who don't trust themselves. But trust their doctor.

So they've truly outsourced their sovereignty to some sort of lab coat God or external figure. And I don't get me wrong. I love doctors. There's lots of functional medicine doctors and amazing people like you out there that are walking the walk and talking the talk and understand what there is.

But the average doctor that those people are listening to, as you know, are insurance subrogated people and they don' give a rat's ass. about optimizing your health, right?

They're there to treat symptoms, to diagnose disease and to the diagnose illness. And so you can't truthfully and honestly think that those people are safeguarding your help because they're not.

Let's maybe start there with in terms of consciousness, right? How are you defining consciousness? Are you looking kind of at the thalamus and the cortex, or is it kind more attention, awareness, self awareness or self reflection?

how are are looking in term of. Consciousness or maybe the spiritual side of things. Yeah, I think both. I always say this, uh, um, i'll be 55 in February.

When my 56 journey around the sun now. Very truthfully, I was not always as conscious as I am now, and it really, decades of me tinkering with my biology and doing all the things that I've done, you know, as a kind of an OG quote unquote biohacker, learning about hormone opt-in when I was 29, experimenting with therapeutic peptides in the next 10 years during the same time I playing around with hormones.

And really just learning on like what it took physiologically to become a maximized human or an optimized human, which is to me defined as someone who's walking around a single digit body fat year round.

has no inflammation, has maximized energy, um, is not only that representative physically, but is also manifesting and teaching that others. And it wasn't until I really recognized and I met my wife, my, current wife now who I've been with now for 14 years where she met me and she was like, dude, you look amazing, like what do you do for your spirit?

And I looked at her like. Huh? Willis. And from that point forward, she introduced me to a bunch of different books, the David Dida books. I mean, there's so many, but just how to become a conscious man and reading those books and really immersing myself in that, I really became this massively, forcefully interested in spirituality and interested and consciousness, interested learning about the bigger representation of what all of us are, right?

Which is way more than these physical bodies, obviously we're energy. I always like to say we are vibrating atoms and oscillating waves of energy, and you understand the walls of thermodynamics, you know that energy can't be contracted or killed, it's ever expanding, its infinite.

And so it's like, once you understand that you're that, you don't have these finite limitations of I'm going to die and what might happen if I think along those lines.

So to answer your question, it is a combination of understanding that your physical body will die, your vessel will

expire, but your energy, whatever you call your spiritual makeup, there's a lot of names for it, right?

That's infinite, right? So once you got that set up and understanding that, now it's a matter of like, okay, well, what can I do knowing that I'm an infinite being, why I am here?

And to me, you know, consciousness, spirituality is like learning that we're here to serve others, because we are all interconnected, like seriously, at a soul level or energetic level, we all are interconnected.

And everything teaches that from quantum, from particle physics. I mean, even, Adamus theory, I think everybody knows that everything is connected now.

So it is once like you understand that. How can I make an impact? Right? Like what can do to serve other people on a day in day out basis? And for me, it's really just been really mastering or not mastering cause I'm not definitely not a master, but like learning all the little nuance that is involved in health optimization.

And. For me now, like, obviously I've studied a lot of great thought leaders and consciousness, Dr. David Hawkins. Um, you know, there's a hundred other.

Walter Russell, so many people, Okay, man, I'm aware of like that I am an infinite being and now that i'm in infinite beings, what can I do with that knowledge that how I can help people while i am in this physical body in these current time strains.

So I look at it as like first you got to maximize and learn how to physically optimize and then once you can physically be optimized or again physically optimized would be defined as low inflammation.

no suffering, no pain, you know, mental inflammation. Now I can really spend my time like helping other people do the same thing or learn how to do same things.

And I think that consciousness and advanced levels of consciousness, the I am, it really comes to people once you have an understanding of the physical stuff.

it's really just putting it all together. If you go all the way back to the Greeks, the Greek used to talk about sound mind, sound body. Aristotle used talk that, right?

And they really understood that there was no way you could build an awesome physique or have an Awesome body unless you also had your mind together, and so there is the spirit mind body connection.

And that's kind of, I think, what I am forcibly teaching in today's day and age is like, hey, align your physical body, get all that stuff dialed in. And then once that happens, you're going to be much better aligned for the spiritual stuff to come in because I really do feel like you are much more of an aligned antenna when you physically optimized with low inflammation and you can receive much spiritual awareness or more energetic awareness.

You talked about awareness, Awareness is everything, right? Like I always say, knowledge protects ignorance and dangers. And you really have to have an understanding that like, what is going on?

What am I doing here? Before you can actually, I think, make a dent. and obviously all of us are just in a, it's just a nano blip, Right? like this current lifetime that we're all in is just an absolute tiny, tiny tiny measurement in this, in the scale of time.

So like once you recognize that, It's like okay, well I'm not here very long. Let's see what I can do while I am. In terms of health optimization then, right?

And leveraging consciousness, where do you start? I know you mentioned the mind body connection, obviously the spirit. So, and the reduction of inflammation, it almost sounded like you started with the body to then improve the mine to them.

Have this greater sense of awareness. And obviously at the root of that is reducing inflammation. Yeah. I think that's the best way to look at it. It can be the other way around.

A person can being somewhat conscious if they're not in optimal shape, but I feel like they are all interconnected in that if you become really conscious, you're going to recognize that your vessel, your physical avatar is important.

Because it's how you get around in life. And I'll give you a really good analogy. When my dad, when I was younger, And by the way, my dad is a completely asleep person.

He's eight years old, he's multimillionaire, but he is asleep. Yeah. Zero awareness and consciousness. But he told me when I was seven or eight, it was one of those years, you said, son, do you only have two things in this life?

He said you have your health and you'd have. And without one you had neither. Okay, dad, that's cool. As I got older, I'm like, wow, right. Because like anybody who knows about having a horrible situation in their health.

Like let's say it's like you have debilitating back issue, right? And you can't get out of bed in the morning without just debiliating pain that just reeks through your entire body.

And that's all you think about. You're just in pain, nerve inflammation, pain all the time. you would give up anything, especially when it came to material pursuits or wealth or shiny things or anything to not be in.

So it kind of like the same thing, like your spiritual integrity. is so important because, and again, not to everyone, but I think once you get to a certain level, you're like, okay, why am I here?

I'm here to help. I am here serve. And it's like you can't really make an impact if you are physically injured or you have zero integrity. And I, and I know that for a fact that like, cause I have, I've not always been this advanced from a spiritual awareness standpoint, but now that I am like they always take it.

I make it a personal mission on a day in day out basis to help whenever I possibly can. Right. What does, what does that mean? While I'm walking through the streets of Mexico, it means helping people.

You know, there's poverty stricken people all here in Playa del Carmen all over the place. And I don't know there a lot in life. I Don't care. But like if I can help them financially physically, I'll do it too.

If I could help financially, just give them money. Right. Because I know again, in the whole aspect of life, your vibe attracts your tribe. That's a hundred percent correct.

And the more you give, the More you receive. It's just the way the universe works. So it's like, once I figured all of that stuff out, I just became this person that was like.

My heart is open. I'm going to give. without attachment, without expectation. and my expectation is that it doesn't matter what happens, but I'll tell you this right now, Dr.

Daniel, since I started doing that, my life has gone like this. Right. And is that a universal axiom? I think it is. I'd think that you, when you get into a level of gratitude and giving and constantly giving without expectation of receiving, you'd get more.

It's kind of like just the way the world works. Like again, again the vibe attracts your tribe, the whole energetic understanding and alignment of energy.

The more you're in residence, It's just as simple as that, you know? And you have to get to a level of awareness where like, hey man, the more you're doing, more stress can become because you can have the straddle.

Like I told you earlier before the show, getting a thousand emails an hour. Right? Like that's an amazing thing because you have so many people that want to work with you or connect with your speak with.

But at the same time, you can't say yes to everyone. So there is a balance that comes in of like, okay, I'm lined and I have to guard my energy. I has to know who I can work and who can I work.

Because if you say, yes, everyone is the first, that is first step to destruction. You know what I mean? Because you just cannot balance that type of energy.

So I think it's, it, you know, to your original point or question, I really is a unique skill while you're in this third density conscious body to understand who you can work with and who can't work and to not be attached to anything that you do.

And that's been my greatest learning of the last 10 years is like, Hey man, if it happens, and it doesn't, don't have any expectations. When my wife and I worked in real estate, She used to have this awesome statement of like, cause I'm a math guy and I've been doing all these computations and figuring out spreadsheets and stuff like that.

And I, I would always be configuring commissions for listings and she'd be like. Don't ever configure a commission until it's in your bank account. So look at it that way.

The message she was saying is don't be attached to the outcome, you know, do it because it feels good or it is good to do. But don' expect anything in return.

If it comes in, return, it just, its gravy. It's a blessing beyond that, I love that when, when you walk into our practice right away, you see big bold letters on the wall, attitude of gratitude.

And I created this acronym spend your best life. So it stands for the S is the foundation. It's mitigating stress, optimizing sleep, steps, sunlight, stool, sex, balancing hormones, which we're going to segue into here shortly, the topic of today's conversation.

Then the next tier is P for play and purpose. And what I think you've done very well is almost you identified your purpose, your mission. So yes, you're able to give back, but you had to go through probably pain and suffering to a certain degree to be able do that.

Some people think suffering equals existence. Well, I thing pain drives purpose and then we're to reach this higher state of awareness or consciousness.

Then we go into the Next tier, which is E for exercise and for nourish and D is donate. That's what i love what you just said. To me is either you can give with your time or you give your dollars.

Certainly you could give both. But the importance of giving back. I think we have robbed our communities of this connection. We live in silos, we build bigger houses and bigger walls and yet we are less connected.

And so when you said, you know, in this poverty stricken world, whether it's domestic or abroad, We part with Children International to be able to do that, to build health and community centers for these children.

So the, I think that the prudence falls upon us to be able to constantly serve in some capacity or to minimum connect. And so while you and I are servants, i think many of us can continue to connect and always lend a helping hand at a minimum smile at stranger, right?

Hugs are free. We've become so much more disconnected. But in terms of health optimization, obviously, so that's kind of one of the models that we built.

So I understand kind your model of help optimization. How does that look like in term of hormones and Yeah, that's a giant open end question. I've been using therapeutic testosterone since I was one month from turning 30. So it'll be 25 years, actually, this year.

It's crazy. I didn't even thought about that, but this is the beginning of the 25th year, so by December, it will be

twenty five years on therapeutic.

Testosterone, I have used all the different delivery systems, worked with many different doctors, written three books on it. Two of them are the number one selling books still of all time on Therapeutic testosterone.

In fact, the majority of doctors in the world that are knowledgeable about hormones learned from my books, right? So it's like this incredible honor. Um, and by the way, I just want to mention this right now to you.

So we get, if you want ask me about it, but I'm my newest book is coming February 15th to 18th is the target date and it called metabolic awakening with GLP one peptides.

And I swear to God doc is. I mean, it blows everything that I've done out of the water. It has over 1300 scientific citations, uh, 712 pages. it's sad because I don't even know if anyone will read it in this day and age, right?

Because very few people can read.

Hormone Decline and the Need for Early Optimization

They don' have the attention span, but it really is a profound work that will teach people how to use these tools for, for strength, longevity, everything.

Like how to, I think the best part about it is it teaches people how. The pitfalls, which is what 95% of people experience, right? I mean, everybody hears, hears stories of using GLPs and people's destroyed their health damage or thyroid.

There's all these lawsuits, there's always negativity. And it's just because, you know, um, miss guidance. Doctors prescribing super high doses because pharmaceutical manufacturers want that.

And so all of that is covered. Then as we go through the book, it's exhausting. We get into how to do it right. So I'm really, really blessed to have written that book.

I literally just got off the phone with my publisher and we didn't use any AI. There's zero AI, so it was literally hand-researched, no AI summaries, nothing.

It was me and my copywriter. Took us eight months to write the And that's no small task because I've written eight books and some of them are scientifically, you know, very deeply researched.

But to back to what your point about hormones, we are in an environment right now in the first world where 80% of people have hormone deficiencies. Of the 80% of people that have hormone deficiencies, at least 75% percent of them don't even know it.

So people are walking around in major cities depressed, fat, and sick. And that's because their hormones are suboptimal. This is not just men, this is women too.

Doc, it goes all the way in the kids in their 20s now. And what's happening in younger people is they're playing video games, they are addicted to porn, not getting sunlight, immersed in a wash and blue light and harmful EMF frequencies.

And so all of that dysregulates dendritic, synaptic and serotonergic pathways in the brain. And so all of these people are literally showing up with low levels of circulating free testosterone, super high or super low level of sex hormone binding goblins, which as you know, is like making their free testosterone inaccessible.

And, so you just got this giant morass of degraded humans. Who have nowhere to go because the average doc is not listening to me and you Kaiser or whatever their PPO is and they are getting prescriptions for, you know, PD five inhibitor drugs or SSR eyes.

And so it's just, the whole thing is a nightmare right now. It really takes an individual, both male and female to really step outside of allopathic medicine to seek.

know, corrective procedural stuff. And I don't think that everyone needs therapeutic testosterone. I will always say that, you know it is the biggest tool in the tool belt for when it's needed and there is a clinical need.

But for most people, their lifestyle is so dysregulated from all of these harmful, call it modernization technologies and things that are happening. As I always said too, the air, food, water, everything is contaminated.

So you have to be so super aggressive and progressive and just, I would say, anal retentive and proactive to avoid all of these toxins and carcinogens and endocrine-destructive chemicals and all the things that are making this system or societal-wide problem.

And most people don't. And, and as you know, too, the average person is in survival program, right? They don' they're not driving, they don''t have the income.

They're on the disposable time or the discretionary income or any of that stuff to like really look at to this stuff. So for the people that do, again, it's a small subset.

A lot of them end up finding their way towards me or towards my private membership group or my books or even my website and social media. And so that's a blessing.

But at the same time, there's not enough people that understand this. I will always say this, if you can correct a person's hormonal imbalances early enough, when I say early, it's sad that I have to say now 25 to 30, but it really is somewhere between 25 and 40. You can save them from a life of disease.

And it's, again, not enough people understand that. If you could correct their hormonal imbalances or their hormone deficiencies at a relatively young enough age, and then they can understand what they need to do from that point forward, you will dramatically, dramatically impact their lifespan, their health span.

I mean, there's just so many things that come about this. And then obviously, from once you have your hormones optimized, your balance, then you can start looking at therapeutic peptides.

You can start looking at the therapeutic things that my company at BioLongevity Lab sells and things I'm talking about on a day-to-day basis. But that's really tip of the spear and top 1% of humanity.

To truly move the needle on the large swath of mainstream consciousness normies out there, we just have to teach them about hormones. They just have to learn about how important it is to have a hormonal balance or hormonally rhythms and how that can help them avoid obesity, type 2 diabetes, Type 3 diabetes.

Again, all the things that come from aging diseases and age-related diseases. And I just think that so many people are so clueless. As you know now, we haven't mentioned this, but the signal to noise ratio now on the internet is so insanely high.

It's almost all noise. You know, I think Daniel back to the early 2000s when I first started taking therapeutic hormones and the internet was pure signal.

If you were on the Internet, you are talking about people like you and me. You're talking to researchers, your conscious smart people who are all like pulling their knowledge and going on to these anonymous message boards.

You know, everybody had handles and everybody was sharing information and it was all like, wow, this is real. And nowadays people go on Reddit and they get 16 different mistaken BS, you know answers for a question.

and puts it together. And so now people ask AI and they get a hallucinated false inversion, inversion of the truth. So

it's really, really hard, I think, for the average person today to really understand where they're getting information.

I. Think the word is discernment. A lot of people cannot discern what is true, you know, and if you haven't walked the walk, it. Really, Really hard when you go on Instagram or Tiktok or X and you've got 10 different influencers or subject matter experts or doctors literally saying 10, different things.

You know what I mean? So it's a really, really weird world, but to summarize that long-rendered rant, if you can optimize your hormones in your twenties and thirties, you will absolutely be on a path that very few people want.

Yeah, peptides to me pale in comparison with the potency of these signaling molecules. And often enough, the foundation is overlooked. So, case in point, when we do a lot of sports performance, we see a young athletes, stress fractures, connective tissue issues heavily dramatically on the rise in terms of this specific subset of the population where there are young athlete, particularly a boy with my pedigree in professional sports and soccer.

What I'm seeing is their testosterone effectively is half of what it was when I was their age. So what does that correlated with? Injury risk profile, right?

So you're absolutely right. It's declining even to push back. Like I know you said, you know, in your twenties, this is happening in their teens and they've been noticing this.

Right. Osteopenia in there teens. Yeah. How remarkable. And so when we look at someone in terms of optimization for hormones, to me, that's layer five.

What we're going to do the first is ensure oxygenation, make sure that oxygen is appropriate in the body to feed mitochondria and ATP. Second is fuel delivery.

So understanding the importance of healthy fuel, delivery and how glucose is impacting that scenario. Third and fourth are gut and immune. And when we fix layers one through four, we begin to optimize hormones without ever touching hormones.

So we have so many patients that are referred to us that have grossly mismanaged hormones, and yet no one has balanced layers 1 through 4, you go straight to hormones often enough.

They have been mistreated in that regard. And so they're not, they are not understanding that signal to noise ratio as you elegantly suggested. In another case in point, as I really, I had a, think it was a 26 year old male who was just referred to me, came in with symptoms of ED and he had bought a deer antler product that someone sold him.

Again, and I call it elegant marketing, $500 for one bottle. Unbelievable dude. But that's the noise. See, so this is the problem. So I couldn't agree more.

People don't know where to turn. And now, especially with social media, right? You have these, and some influencers I think are doing great. They're really trying to cite research and they're being mindful and everything is, you know, science-backed, evidence-based approach to medicine.

But needless to say, often enough, it's just someone taking something and then extrapolating that as information what others should follow suit. What you have done is over the course of your decades of work effectively is you're citing the research.

You're looking at the science and then you are making suggestions based upon specific context. And so that's the epitome of practicing personalized medicine.

I think what I love to do then is plug your new book. Let's start with GLPs, if not one of the hottest topics, right? Vitamin G if you will, which almost one in five people are taking at this point.

It's, it's remarkable how ubiquitous it has been. it doesn't come without consequence, but there, I use it as a

metabolic crutch. So how should someone look at GLP's?

Where has the science evolved in terms of GLPS? What's the benefit? what's. Where do you start? All great questions. I mean, why don't really go back to what you were saying to unpack.

I don't get a chance to talk to people like you who really understand this. If you can correct a person's nutrition, and because the standard American diet is just absolute crap, seed oils, high fructose corn syrups, processed GMO crap.

I mean, if you could just correct them and get people to actually eat correctly, like you said, the microbiome, mitochondrial deficiencies, all the things that, again, phase one through four, as you classified it, you're going to clear up so much.

And I really like to say that a lot of people think because I've written the books on testosterone that I always say go right to testosterone. In fact, I'm always been very, very clear that it's the last thing to use.

But as you know, people want the easy, but you. And so that segues us perfect to GLPs. We are in a society today again, because of the signal to noise ratio, cause of instant gratification.

You know you think of all these kids today who don't even have a single perishable food in their house, right? Everything is door dash, Instacart. My daughter, by the way, my 16 year old daughter taught me about InstaCart the other day.

I was like, I didn't know about this. So I mean, like we're literally living in this world where everyone wants everything on demand. Right. And no one wants to do anything.

So it's like, unfortunately for medicine, GLPs, I love that vitamin G have given this horrific bastardization and most people, and you probably know this, this kind of blew me away, but like a lot of the people that I work with in very high influential level circles, When I told them that I was writing this book about seven or eight months ago, we're like, Oh, I'll never touch that stuff.

I'm not going to get thyroid cancer or I I mean, these are incredibly sophisticated, affluent, you know, respected people in the world who say that to me.

And so like I realized that the average person, again, very affluence, sophisticated and intelligent. has no understanding of GLPs because their GLP understanding has come from, like you said, influencers on social media, idiots that they've heard, you know, online, just so much misinformation.

Let me be very clear and set the record straight. The first 350 pages, 325 pages of the book is going through the mistakes. It's going through the misdiagnosis.

It going though the miss dosaging parameters. Its going thru the side effect profiles. its going to everything that people have experienced so that I can actually say okay all this is true.

But let's really clarify and look between the lines and see the forest through the trees here or what's happening. And then the second half is, you know, how to use these things therapeutically, to cure alcoholism, and how do you use things to pretty much cure everything.

That's what is so insane. is when you look at the clinical pipeline of what's coming, I mean, the current products are, like I said, this book will probably be meaningless in three years because of, what is coming.

We aren't in this biomedical revolution right now. I call it a real golden age for biochemistry or molecular biology, but the average person doesn't know how to use them.

And again, they get their information from either the internet, TikTok. The television, the mainstream news, and as

you know, everything is, if it bleeds, it leads.

It's always negative. And so it's like, If we can determine through that, then we could learn about these amazing products because they really are amazing.

I mean, I have a chapter in the book that's called the transformations. And it's 16 people. It might be 17. I have one person that's a woman, she's on the fence.

She's going to tell me tomorrow if she wants to come out. Uh, but it just shows them where they went from their before and after, and then in their own words, how the GLP transformed their life.

And I think it'll be one of those chapters in the book, cause the books is so dense and says so much science. That's gonna really be that chapter where people get that aha moment and they're like, Holy shit.

Like that person lost 180 pounds. Or that person lost 130 pounds or that personal lost 80 pounds, or 60 pounds of whatever. And they can so put themselves in this position.

But I honestly can tell you that, and I always knew this because personally, I've been using them myself and. I'm using that with clients. My wife has been.

Using them. Put my 16 year old daughter on them, she's now 18 completely transformed her physique. She, you know, was a competitive cheerleader. Uh, she has a 1480 on her SAT.

I mean, this girl was like the achiever of all achievers and she just did not have the best genetics. She got my mom's side of the family's genetics, which are all fat, you know, and, they just have slow metabolism.

So I put her on a microdose of Ritutide in 2016 and it's completely revolutionized her physique. And obviously I would not've given it to her if she wasn't a very studious, very regimented person.

But that's the thing is like these. poem adjuvants can do so many things for so people. I mean, you know, I have a lot of stuff in the book about curing alcoholism, again, rewiring the vein, the brain to eliminate food noise, to do all of these beneficial things.

But I can definitely tell you, Doc, that The pharmacological starting dosages of all the products are the problem. And they're giving them again to comorbid obese type two diabetic usually who are again, just classified on flaming dumpster fires and insulin resistance and high visceral body tech.

So these are people that are one foot in the grave, one-foot metabolic emergencies, as some of my physician friends call them. And so they're just bad case studies to give these dosages or these drugs, too.

Then when you give them these ridiculous starting dosage and then escalate them every week after, you blow out the receptors. You create all these problems, all of these downstream effects, thyroid damage, hair loss.

with Gobi, but all these different symptoms and symptomologies that come from the side effects of them are all real. They're all understood. There are broken down in the book and they're are easily explained away by changing dosing parameters and lifestyle.

And that's the other thing that we have to say about this is that the average person who's used to GLP and failed did not change your lifestyle and. Literally told by their physician that like, Hey man, all you have do is inject this once a week.

And then the dose will probably have to go up, but you know, it works because you stop eating. You stop eating. I mean, you can't circumvent the laws of thermodynamics.

And so many of these people attempted to do that, right? Not enough protein. No one's exercising. They're not

doing resistance training. So again, all of this is covered in the book, but I can honestly tell you after exhaustively going through all the major research studies, and there are thousands that when these are done within the context of therapeutic micro dosing strategies, lifestyle change.

And again, a lifestyle changes, you know, eating at least one to 0.75 to 1.25 grams of protein per pound of goal body weight, distance training, cardiovascular training living insulin control, doing all the other things.

If you want to throw in there of like hormone optimization and peptide usage, every person to a man or woman without fail gets profound results. Profile there's no in-between like everyone gets this again.

Those are small groups of people though, because the majority of humans are lazy They want the easy button. They don't want to do all the things and so like I write about this But I'm telling you if this book is able to garner any kind of called global or mainstream acceptance I and I I'll tell you this I every chapter because there are some dense chapters every Chapter has key findings And so a lot of people won't even read the book.

They're just going to read The Key Findings, right? It's like the global summary of every chapter. If they just read that and then they take those learnings to their physician, you know, to the families, whoever that is responsible for doing this, they will dramatically see improvement from using GLPs.

And I know this book is going, like somebody called Metabolic Awakening, it's going awaken a who are utterly misled and confused about the actual advantages of using these products, they're definitely not crutches.

They're not, you know, Holy grails are not the fountain of youth. But when they are used in the context of living longer, stronger and doing all the things, which again, and I know they were dramatic and there's never been a bigger needle move.

You know there has never ever been anything that could eliminate the food noise. of people that are addicted to the hyper addictions that were created by all the horrible fast food and all of the GMO food, nothing has ever calmed that noise like GLPs do.

And so if you can teach people how to use those things, again, in that clinically precise, call it microdose fashion over time, you could 100% cure them of those addiction.

Yeah. It's interesting. So the connection, right? We understand now the gut brain access. GLPs obviously is a gut hormone that controls blood sugar and appetite and insulin release.

And it's heavily produced by the L cells in the intestine, which specific parts of the colon. We obviously produce this naturally and it then while it secreted quickly, it also eliminated quickly.

Obviously some of these synthetic versions sticks around for much longer.

GLP-1s, Microdosing, and Metabolic Transformation

But can have very, very real positive metabolic effects. And so we use it historically as a metabolic crutch and the two non-negotiables that would have is resistance training and preservation of lean muscle.

So those were two things we addressed critically specific. probiotic strains. So looking at the microbiome and its impact and how some of these bugs through sacroiliac fermentation upregulate then butyrate production to impact this scenario.

It all goes hand in hand. I love that you, and I'm eager to get a copy when it is released. And I am curious in terms of your daughter, so just as an N of one, I understand this is completely contextual, but when you mentioned microdosing, what dose or what were you doing specifically with your Yeah.

So red of shrewtide, which obviously is not approved yet, right? But it's been sold as a research chemical for three

years. And by the way, just so you know, this, I did not know this.

I just found this out at longevity best dude, there are hundreds of compound pharmacies manufacturing it, Which is by way of absolute felony and so many levels.

But they're doing it right. Like all you have to do is ask the right person and you can get it. Right? Because again, they all know and Lily knows too, by the way, and again Eli Lilly is obviously owns the patent to it, Wednesday approve it.

The expectation is supposed to be approved in third or fourth quarter. I mean, I know this for a fact. It is without a doubt the greatest drug in the history of pharmaceutical interventions.

And that will be proven by evidence over the next couple of years. But all you have to do is look at the, you know, the stage three trial studies. I mean, that one that they released, what was it three weeks ago that went global?

They gave obese diabetic patients. It was only 650 people or 680 people, I think, in this cohort. We talk about it in the book, but they gave them six milligrams up to 12 milligrams for 68 weeks straight.

And by the way, every one of these people did not exercise. They did not live insulin control. They do not change their lifestyle or their diet in any way.

And they lost a mean of 72 pounds. So think about how insane this drug is that it can do that to people who literally are human dumpster fires, right?

And by the way, six to 12 milligrams a week for seven or 68 weeks, I think it was. It was more than a year. I talk about in the book that You know, we get into receptor attenuation and what happens and stuff like that when you continually escalate dosing.

runitrutide has this crazy ability to stay effective and not cause receptor desensitization or attenuation and blow people's receptors out, like not like trisapatite and semaglutide do, because they do.

I mean, you see that in all the studies. So it's truly amazing and a profound drug. And so to answer the question about my daughter, dude, I gave her 0.1 milligrams twice a week.

And she did that for, I want to say four months, and she lost seven to nine pounds of just pure fat in her hamstring tie-ins, which is, again, her disposition genetics is to have that dimple cottage cheese fat that she gets from my mom's side of the family, because all the women in the And so since she did that for four weeks, she lost it all.

I mean, it was really actually pretty profound. And I remember my wife and I were like, after about six weeks of like looking at her, we could just sense that in that area, She was getting slimmer.

She did everything herself, you know, inject herself twice a week with an insulin syringe. You know we showed her what to do and how to it. At the end she even knew how reconstituted.

So there's plenty of young adolescents that are out there that're using these now. But I took her off and, and again, dude, that's the magic of this is it hasn't come back.

Now, granted, she still lives a very disciplined lifestyle as a competitive cheerleader. She's a senior in high school now, but it never came back so.

And again we talk about this in the book. A lot of people who see therapeutic benefit from these in micro dosage fashion don't have to go back on them.

It changes the behavior or it changes, the metabolic signaling, as you know, it's improving nutrient partitioning, its improving metabolic rate. It's doing so many different things.

And that's another thing is like in the bonus chapter at the end of the book, we talk about everything in a pipeline. By the way, that chapter, I had to put it at end in book because it was so exhaustive.

There's so much coming. But like we talked about some of things that are being seen because you kind of mentioned it about resistance training and making sure that you don't lose mass.

I mean, that's obviously where most of the scientists are focused on. BioRongevity Labs, we just created a product that does that. You know, our FLGR242, which is a recombinant tholestatin, a very powerful myostatin inhibitor.

So we have thousands of people that have been using this product now for about four weeks because that is when they got it. You know, we started selling it at black Friday and it was a little bit delayed getting it out to the people that bought it, but now they've been all been on for four weeks and doc, you can't even believe it.

I mean, I wake up every single morning with text messages, with comms and my social media channels of before and afters of people from one month of taking it and.

Incredible. They're gaining five, six, seven pounds of lean tissue. There are also losing fat. So again, that product is a revolution, but that's where other companies and pharmaceutical companies are in the pipeline of building products that will avoid catabolism and avoid muscle tissue loss as you use GLPs.

In fact, you know, I talk about our upcoming product. That'll be kind of a component of FLGR. We call it slim assist. and it's going to be one milligram of FLGR 242 designed for women to take while they're using GLPs.

And it will, without question, prevent catabolism, again, assuming that they are doing everything else right and they eat, right? Because I think we should say this, you can't take any GLP drug and not eat and think that you're not going lose muscle, because the drugs are that powerful.

that obviously if you stop eating, you're going to lose muscle. So you do have to do everything right. And that's why I love microdosing because the micro dosing never slows down the appetite.

It doesn't dysregulate people where they feel nauseous or they don't want to eat or skip meals or miss meals because they forgot to because I weren't thinking about it.

That's another advantage of using a micro dose is it never really dys regulates appetite You know what I mean? So like you're never at a point where like, you go more than a couple hours and not think about food.

Whereas like again, where all the people that misuse these and abuse these, that's really what you want to call it. Dude, I'm, there's stories of people using 40 milligrams of trisapatite in a week, right?

It's people. That don't want eat, in their mind, well, if I don' eat for two weeks, then I'll lose 50 pounds, Right? Well, yeah. And you'll destroy your thyroid and damage your metabolism.

And everything else, the negative that comes with those cascades, but, um, it's crazy. If you, if you microdose and again, you do all the things which you mentioned, and I've already mentioned there's very, very low downside risk.

if not any, You know, cause I haven't seen it. I mean, I really have it and like I said, The majority of people that have done this right from the beginning, which is again the minority, they all have been able to withdraw off of them for the most part and keep.

their results, keep their gains, keeps their fat loss. And for the best part, like keep the brain wired in a way that's like, I don't need alcohol anymore.

I've had so many people tell me that they have not drank a drop since microdosing reticulotide for four months. Like they'll never drink again. Their brain says, i don' need to drink alcohol any more.

Like it changed patterning in my brain. It says, I know that this is bad for my body. I won't drink anymore. So to me, that's the big win from these products is again, when they're used conductively in that way, there's all these indirect downstream effects that really help their long-term health aspirations.

And I think that where we're going to end up seeing that a lot of these drugs help people outside of the targeting of obesity and metabolic dysregulation.

I'm curious in terms of myostatin inhibitors, as you just said, how close are we to exercise in a bottle? Look, man, I've been using this, but I am not going to take my shirt off right now.

But I've been using this product since October. So I'm now 14 weeks in ice. And by the way, you should watch the live streams that I'd done with the chemists.

Cause I done two of them. I did one this Sunday night and I didn't want the week or the Sunday before new years. His name is Mike Farber. He's one of the world's top biochemists, molecular formulators.

When he came to me in April of last year and he said, Jay, I have done it. and i'm like, Mike, he done what? And he's like. I've done it." And I'm like, what have you done, Mike?

And he said, I created a true myostatin inhibitor that's going to change the world. And, and I was like sure bro, like I haven't heard that before. Then he also talked to me about Clotho.

He's like and, also I have re-engineered a recombinant form of Clotho, but went the opposite direction of Adil Khan and all the guys that are chasing, you know, Cloto and spending hundreds of millions in research.

The answer to your question and to what he did. So, cause I mean, obviously it's public knowledge now, the CAS numbers are out there. Is he, he created a 19 day albumin binded construct that keeps the half life of both the Clotho endocrine protein and molecule.

And obviously the Follestatin molecule, which again is a recombinant form. It's called FLGR242. so that all of the previous versions had very, very short half-lives and did not support injection or oral injection, or intranasal or anything more than a couple hours.

The half lives would degrade and that's why you could never get anything for any previous version of this. And now A lot of the pharmaceutical companies, which I won't name them, but you can easily research this.

I don't want them coming after me. They're looking at monoclonal antibodies as the format to suppress myostatin, to increase lean tissue accrual or skeletal mass.

Unfortunately, dead end. And again, we know this from the research, from trials, Mike Farber is involved in those from a standpoint of like getting knowledge from some of the people in it.

and there's been people that have died. There's like organ failure. So all that direction that these guys are going at is a dead-end. And Mike's direction is basically he believes three and a half years in front of the rest of.

Because we'll be in an IRB very, very soon. Uh, and he's going to do both products from a right to try from the state of Montana. So you can't really block it.

I mean, it can be sold as a research chemical as it is now anyway. And that's how people are doing it. That's legal and fine. But Mike wants this to go down the actual, you know, approved drug route.

So we're going to be doing IRB and we'll be going it from Montana at some point in 2026. that from my personal self, I put on seven and a half pounds of skeletal muscle at the same time I'd put it on.

Seven and half pound. And again, dude, i've been training for 30 years. I mean, have a great physique, but nothing

like this. and I've used everything in clinically precise dosages for the most part.

Uh, and nothing has ever done anything like that. But here's the kicker. All my biomarkers improved. So the albumin binding construct does not attach to the heart.

It does now attach the prostate. Does not attached to anything that you would not want to grow other than skeletal muscle. So it just works with angina receptors.

Again, in women who have far less myostatin inhibition like men do, because again, they're just feminine, it's part of the female physique, It works better.

So in the women that are using this product, they're seeing fat loss and their body, their skeletal muscle hardening or becoming firmer. So they are all raving about it.

I honestly think it's going to change the world. There's rumors that people at Lilly are already thinking about making an offer to Mike about taking these products off the market because they were going the other direction.

Lilly has so much money, and they do that all the time. They give people billions of dollars and shut your company down. It will literally just stop your research.

That's it. We don't want this. You know, we can't make money on that path. So who knows what's going to happen, but I can definitely tell you that FLGR 242 is a miracle.

I have 38 before and after photos from people that have sent them to me in the last five days from all over the world, men and women who started their research, you know.

When we first shipped it, which was like the second week of December. And there are four weeks in and they're like, look at this, before and afters of men and women.

I mean, dude, it's insane. Like I've said this to some, you know, very influential people in the last couple of days and are like how do we invest into you?

Like, how, do you invest in biological labs? And I'm like you can't. But I just want to show you what's going on so you can actually use it yourself and then promote it because you really want.

But, I don't really know where it goes. Um, obviously it's so new. The chemist has been using both of the products, both Clotho and Polistat himself for a year.

He's 75. It looks absolutely amazing. His energy is incredible. Travels all around the world. he's actually in the States right now. I'll just give you one other brief preview.

And again, no one knows about this and you're getting an exclusive. So it is a small molecule, so it's not a GLP. It does not compete in the patented pathways of Lilly or Dovo DoorDisc or any of the people that are trying to enforce all the patents now, because pretty soon the GLPs cells are going to go away.

No research chemical company will be able to sell them. We stopped selling them in December. Our attorneys were like, you're done. No more. Lily is going to go after every compounder, every research company, anybody who's selling it is selling without the patent to do so.

And obviously once they approve rather, which is coming soon, that no one will be able to sell it anyway, but they've never really enforced it. They haven't gone after anybody.

Who's telling it, right? Cause as you know, compounders and research companies have been selling trisapatite and semaglutide without a patent for years.

It's by the way, it's completely illegal. Bio Longevity Labs, I've always known this, we never once sold those two products. Not once. Never sold them, did not want to infringe on the patent.

We sold Run of True Tide as GLP-3 because there was no patent, it's not approved yet. It's still considered a research chemical, is perfectly legal. But we're not stupid.

And we know that at some point when Lilly does approve it, they're going to go after everyone who sold it. They're basically going to be like, Hey, so, you know, we were essentially told in November and December of last year, if you really want to make sure that you avoid any of their patent lawyers, stop selling it as of December 31st.

So we did, So you will not see us sell it. But the product that I'm telling you about, which is by the way, going be called Lepto GR is a small molecule and it is similar in its half-life, but in it's efficacy on how run a true tide works.

but it's a small molecule. So again, it does not infringe on the patent. And we already know it somewhere between four and six times more effective than red or true tide.

Why that is, is because it binds 10 to 15 times harder than Red or True Tide does. What does that mean to the average listener of this podcast? It means that you only have to use it once a month and perhaps only once every two months.

And you will get that type of effect that if you know what you get from a red and true tide product, which I think a lot of people do, it'll be that much more pronounced.

So you'll use a lower dose and it will last a longer, right? So way less injections and very, very profound effects. And again, I don't know, cause I haven't used it myself.

I'm expected to have this within the next couple of weeks. But Mike is using it right now and he's like, dude, you can't even believe this. This is better than the other two products.

So we're really excited that those three products, and I'm, again, I'll talk about Clotho FLGR242, the small dose version of that, which will be called Slim Assist, Which is one milligram a week of follistatin.

And then this Leptogr, will again just considered a super retitrutide small molecule. We think that three of those products used together. will dramatically improve biological age, will remove senescent cells, we'll increase skeletal muscle tissue, and then we're obviously dramatically optimized if not improved metabolic rate.

So as we age I think you're hitting, you know, the three big kahunas of aging because obviously I know you are familiar with Clotho. Clotho is profound.

I've been using our form of Cloto since the end of August and a lot of people In my communications and conversation with people that are also using are all reporting incredible effects.

We have a 76 year old woman who took one dose and again, it's 10 micrograms every two weeks, right? Because nine to 13 micro grams is the average amount that an aging male or female over the age of 40 has intracellularly at any point over seven day period.

She started menstruating. after 30 years of never bleeding. So she was in basically a menopause or post-menopaus for probably 20 plus years. And she took one shot of the Clotho and she started spotting, right?

So again, if you understand what Clotho does, again improves, removes senescent cells, clear senestent cells and just makes lower biological age values for everything that does brain, kidney function, vascular function.

It would make sense that that happened. She's now just experiencing all the other effects that Clotho gives you. But like she was like freaked out, you know, her husband sent me an email and he's like, is this normal?

And I'm like well, I mean you guys are N of one, but very truthfully, yeah, that's kind of what Clotho does. So I am really confident that all three of those products are going to dramatically transform, if not alter the health optimization landscape, from a standpoint that for people that are using them, they're going see profound benefits.

Yeah, in terms of clothe, I mean, the reduction in oxidative stress and inflammation, obviously going back is that's the root of balancing hormones. And sometimes with bleeding and stopping, it's a decline, aggressive decline of obviously progesterone.

So when that comes back online, women will definitely see some of that going to, but a true tide, we use your formulation with a very high degree of efficacy.

When you mentioned, you know, its impact in the brain, interestingly, GLP1 receptors are all throughout the, brain and the hypothalamus and brain stem and reward centers in the nucleus Cummins, VTA, hippocampus.

And so that's exactly what it's doing. It's dampening that dopamine-driven reward system. So it is modulating dopamine, which obviously then mitigates the need for this constant cycle of fueling that specific addiction.

Obviously, we recognize the impact of GLP beyond anything that is attributable to weight loss or metabolic profile, while some people are taking it. We're only kind of scratching the surface and I love what you're doing staying on the cutting edge of research.

I was interestingly on that live stream. And so that's why I wanted to ask you about that. My curiosity though remains like when you doing kind these, you know, myostatin inhibitors and you are taking off the governor and now you were able to get these kind subra.

physiological responses in some respects or you know being able to really drive lean muscle growth which again is going to immensely improve metabolic profile light so certain blood markers should be better.

Is there any long-term risk that we know about though any things to be concerned about right when you're saying now this super molecule that you can only you only need to take once a month when things are lasting around in the body for Kind of a heightened extended time.

Are there any concerns? Yeah. I mean, it's a great question. And I, and I would say that the jury's out, right? You know, Mike said on the live stream and he's been very clear on his live streams and also in just my knowing him of him over a year.

and by the way, he has an interesting story. So Mike has been in my audience for six years. No idea who he was, you know? He sent me a message, I want to say in March of last year, And he said, Hey man, I love what you do.

I really align with your message spiritually. He's like, I Really want to work with you. And I was kind of like. You know, it was just a Gmail and there was no signature.

Who was, and I said, Hey man, really appreciate, you know as I do sometimes your. When you say you want work for me, how could you that? It's so the next email it comes and it's his database of patents.

and i'm like I click in and. My God. Like, holy shit. So I sent that to my partners at BLL and I go, guys, we got to do a call with this guy. Because after that, you know, I'd responded another time.

And I was like, Mike, this is amazing. Like holy crap. I didn't know you were. Thank you. Bottle bars. What do you see? Like how would you work with us?

And then that's when he told me. That's why I said the email to them. We need to take this guys seriously. Everything that he has said to us has been 100% accurate.

And he's also been a very big stickler on, I don't do anything unless I know that safety and precautions is the

number one thing. And. He's like, trust me.

I've been in the formulation game for a long time. This is bigger than anything I have ever done. of all these products that I'm giving you guys are so low again, when used in the context of obviously health and longevity that, you know, I put my reputation on it.

So, and again I think it's early, Daniel, is there possibilities of something to go wrong? Of course. I mean, it would be a fool to say that there's always not risk for anything that we do, but In the year that he's been using both Clotho and Polistat, he has only gotten more muscular.

He's only got leaner and more energetic. And he measures everything, you know, every 90 days. Yeah. Has he, has one kidney, as he said, You know he lost one of his kidneys in his teenage years and all of this kidney function is improved.

It doesn't take any of the medications that you took for literally two decades or three decades for his kidney issue. Um, so everything for him is improved to answer about the Lepto GR, you know, the super binding run of true tide.

I don't have enough information on that. In fact, today at five o'clock, he is doing a live, not alive, but an interview, a zoom interview with two of my, with our chief science officer and one of copywriters.

He's kind of like the guy that helped me with the book. So he's extremely knowledgeable in biochem and stuff like that. So they're basically doing an interview to do the sales page, the lander for that product, because we expect to have that for sale by pre-sale by March.

And so there, we want to get all that information and get that in a row. so honestly, just reach out to me. I'd say in the next couple of days, and once I have.

That information written, I'll send it to you, but he is more excited about that products. than he is the other two products. The other thing is, and he mentioned this and I'll just say this, he's also working on a super TD 500. So he thinks that if he can expand, again, using the same album and binder construct, but really expand the half-life of TB-500, that it'll dramatically improve, obviously, the aggregate muscle building from the FLGR-242.

Myostatin Inhibitors, Clotho, and Next-Gen Longevity Tools

So, I mean, he's such a genius. He's building everything in stages. Clotho, every aging man and woman should be on. And then FLGR242, you know, for the muscle building and the anti-catabolic.

And now we're looking at the klepto-GR and then obviously the thymus and beta, the superthymous and data. I mean, all four of those things kind of work synergistically again for an aging person.

He loves to say this, he's like, hey man, I'm 75 years old. Of course I have a vested interest in this personally. Just because I want to live to 150 and be my highest and best capacity that I can be.

And he's like, the, all of these products are kind of like a lock and key into doing that. So I'm really excited. I mean, I, um, hopeful that this keeps going and that we can start to write the right to try in Montana by the summer and then we then, you know, really scale this up and outsource this to anybody who wants to use this.

and I'll just say it anywhere for this podcast, cause I haven't said this anywhere, I mean, dude, we're selling this at prices that are so cheap in comparison to what the market competition is.

I think there are people out there selling Clotho for $2,900 for a month. And our version, if you use a coupon code or get it at a discount, because BLL is always running sales.

We're very aggressive with our marketing. You can buy a monthly supply of Clotho for 370 bucks. Nobody is selling anything like that. If anything, the clinical community is, I Because they're like, you guys are selling this for too

cheap and you're killing our profit margins.

But like hey, man, we're all service to others beings at BLL and we want to get as many people as possible to use this product. And granted, I wish I could sell it for cheaper, but I mean, there's obviously, incredible costs that Mike has to undergo.

We also have to. All these things are recombinant versions of these products, so they have to go under stringent testing and lyophilization and production and all the things that we have.

Do it. It's just not cheap. All of it, you know, and I've been very open about this. This is being done in China and finished in the United States. So all of the API Mike is making in trying.

We couldn't even make it in. The United states right now, it wouldn't be possible. We're hopeful that once we get into Montana through the Right to Try that we will be making everything in the United States and we'll be doing them in a lab in Montana.

But the place that were going to be using is right now being looked at to make sure that it passes everything that needed to pass. That will the eventual hope.

Right now the products are coming from China. They're coming Greenlit, FDA approved, certified, registered facilities. Mike doesn't play any games, right?

Like everything is, you know, above board, chain of patent. We have CAS numbers now on both of these products. There'll be a CAS number on the Super Retta probably by middle of March.

As soon as he has a couple of people, which one of them will be me. Uh, you know, testing it for a couple of months, he'll apply for the CAS number. But like I said, I mean, Mike has such an illustrious pedigree of patents and formulation and all of the great things that he's doing.

I'm very confident that everything he makes is going to continue to be the safest product that'll be in the industry as far as like, the risk to reward side effect profile.

That's something that I wanted to address, which I'm glad you spoke to that. Cause I mean, were you definitely using and integrating some of your products at a very high level?

A lot of what we do is through compounding pharmacies as well. I want to make that distinction, right? The compounded pharmancies versus research peptides and any difference.

So you kind of alluded to anything that anyone needs to know about in terms of potency, efficacy, obviously purity you just spoke. Anything else that needs be addressed in term of making that distinctions.

No, I think that's a great question. I'm glad you're asking it because I really do want to set the record straight. So I was on a panel at the, of all places, the Mr.

Olympia, but they've got, you know, a big science symposium stuff that they do now at The Bodybuilding Show. That's in Vegas. It's actually the day before the mr.

Olimpia and it's attended by so many clinicians, famous subject matter expert scientists. And I actually chaired the panel this year in October. They had like Dr.

Elizabeth Yers, Dr George Touliatis. four of the best researchers in the world. I mean, it was incredibly esteemed people that were there on this panel.

And there was also Trevor Krueger, who is the founder and owner of Alpha Bio Med Labs, Of the peptides in the marketplace to compounders. He has a research company too, called Paramount.

Trevor's a very good friend of mine. We're in a documentary together. That's going to be coming out this year. It's called peptide society. it's really going be amazing because it really talks about the origin of the Peptide industry and how it got to where it is from where, when it came.

But shout out to Trevor, but anyway, he was on the panel and that question was asked by the audience or, you know, a couple hundred people in the, and the and it was, can you please explain the difference in manufacturing in sterility process and control, uh, research peptides versus compounded peptide.

And he like, look, I want to tell you guys all this because there's so much misinformation in. Um, Where I manufacture my peptides, you know, and, in the facilities that I manufactured my pesticides, they're absolutely no different than the same peptide that's I manufacturer for the 150, 503 A's that own.

Right. So he's like, he was making it very, very clear. that the best research chemical companies have the same stringent quality control, GMP compliance, sterility processing control and obviously FDA certification, FDA not approval, but certification registration, etc.

And so there's really no difference. Now, if you buy your peptides from, you know, Lone Star peptide down the street from you, wherever you live in America or Canada, the risk that you're not getting a high quality product that would be as good as a pharmaceutical lead, compounded pharmacy manufactured product is very high.

So it's like kind of buyer beware, make sure that where you are getting your peptides from, whether it is a compounder, obviously through a physician, a functional health doctor, or from a research company direct that they have certificates of authenticity.

They have lot numbers, they had a chain of command. and a chain of custody that you can absolutely prove that the product has been vetted and has the third party tested.

It is coming from a, again, approved facility with GMP policies and compliance, and that, you just are getting that type of product. And again if you're doing that and you are, getting from, either a compounder or a company like a bio-longevity labs, like peptide sciences, or like the core peptides who are all the same, a paramount peptides, then the risk is almost zero.

Um, because all of those companies are putting out Daniel 99.5 to 99 9% efficacy products. In fact, if we get a product that comes in, it's 98.8, we throw it away.

It's gone. There are tons of people, and I want to be very clear about this. There were tons people in the United States right now and Canada and probably the EU.

They're selling research grade peptides that are not safe. And when I mean safe, I means they are loaded with endotoxins. They are loaded with LPA, which is lipopolysaccharides.

They're loaded, with all sorts of things that you do not want to be injecting into your body. So when you're out there as the end user, the consumer, or the patient, you better make sure that your getting them from a company or a compound pharmacy.

Same thing. that has all these vettings in place, that have all this third-party testing that is, you know, again, being looked at by companies that are grading them out and obviously, doing audits of their labs, auditing their equipment, and doing audit of the products because there's a lot of risks nowadays.

And the price differentiation that you see in the marketplace, if you get a bottle, a 10-milligram bottle run a few times for $50 or $60, Uh, you're probably getting big bucks.

Like that's what I tell people all the time. They get mad. And they're like, Oh, are you guys charged too much for your products? I'm like no, we don't like we're constantly doing discounts and we'll constantly offering incentives, affiliate codes, et cetera.

Because we're attempting to be as hyper competitive as we can, but at the same time, we are not giving away our products that don't have a margin of at least two and a half to three X.

You can't run a business, right? But a lot of these people are selling these really cheap products because, Daniel, they're not real. And that's what I tell people all the time.

I'm like, look, we got to be very honest and compare apples to oranges here. You cannot compare a 10 milligram bottle of red and true tide that you bought for 55 bucks to bio longevity labs, GLP three, which by the way, were not selling anymore.

But in December that, you paid $149 because I am telling you that product is fake. I just know this. I know what the margins are. And I'm not saying that all of our competitors are selling bunk or fake products, but I am saying if they're selling a product that seems too good to be true from a price standpoint, it's because it is.

And this is also why a lot of people on social media will say, oh, I stopped using peptides. They don't work. It doesn't. How many times have you heard people say oh I'd use that and it didn't Well, yeah, because you were injecting saline solution or worse or mannitol.

You weren't injectting an actual real active ingredient of the peptide that you purchase. So again, I think in a long-winded way, buyer beware is the way to go.

Make sure that your purchasing from a reputable research company or you're getting them from me physician who is using a repeatable compound pharmacy because look, not all compound pharmacies are legit either.

There's a lot of compound pharmacies out there that are not selling legit products that aren't being tested. They're not being third party certificates of authenticity.

And they're using their 503B or 50 3C status to say, oh, it's coming from a compound pharmacy. We're great. And that was one of the things that Trevor talked about on that same panel.

And he's like, look, man, I'm going to tell you guys, like I test everybody and I see a lot of compound products that are garbage. Not even nearly as good as what we're seeing at the high level of 503 As and the, and a high-level research company.

So again, make sure that where you're buying your products from. That they're not priced too cheap because that means they are fake automatically and that they all are having certificates of authenticity.

Certificates of Authenticity that have third party accredited testing and have lot numbers and batch numbers that you can absolutely verify online because every company does that.

All you have to do is ask for that verification and they'll give it to you. Yeah, we would have patients come all the time and asking, you know, what, is it trivial to the expense of this?

And when they would find things online and present the price and I go, listen, that's just like you said, yeah, I said I know how, how much this should cost.

I understand at the minimum level. Right. This is impossible. You're getting baking soda or worse yet, you know, as you're giving something else that's harming you.

So I certainly couldn't agree any more than you just said. It is buyer beware out there. There's a lot of elegant marketing. Unfortunately, it's really the wild wild west.

And so I do look forward to more regulation in some respect, which I think everyone, yeah, everyone should benefit from that. I mean, not all compounding pharmacies are equal.

We went through, filtered through several. to what I land to be best in class. And our testimonials speak volumes. So when you mentioned TB 500, I'm eager to try your formula, because we have patients, so I use that in my recovery stack, or when someone comes in with the stress fractures, the tissue damage, we'll do BPC and TB500.

We have people walking in on crutches, two days later walking off cruches. People that are in debilitating chronic pain, that the pain becomes almost mute within a week or two.

I mean, it is remarkable how you can improve someone's quality of life very quickly. But what I want to address something because you have some formulations and Trevor is very outspoken about this.

I too am as well looking at obviously things have to be acetylated, aminated with blends and in reference to blends. I'm not necessarily a proponent of blends, yet you have many blends on your formulary.

What is the reason of that? What happens when you do blend some of these? I presume you're doing it in a way to preserve that because some things have to be very pH balanced.

So how are you kind of addressing some these formulas that have blends that become kind this mismatch of peptides? Yeah, so it's a good question. So there's lot of misinformation out there right now.

Like a lot people are saying that like clow and glow that the GHKCU erodes or destabilizes the efficacy of those other products. And it is not true. All of our blends are tested.

for efficacy and for stabilization before lyophilization, before we do any of them. So like one of the blends that I have right now that, I think is my favorite blend that a very few people even know about is BPC TD 500, which is the typical Wolverine blend, And cartilax is the Russian bioregulator injectable bi-regulator that is, you know, call it magical properties for helping with cartilage restoration or nerve fiber bundling is strengthening nerve, fiber, bundly when it's injected.

And honestly, dude, that. That is a magic blend. I do not know a single person who doesn't have low back. you know, introvertible disc pressure or pain who has not injected that product locally and dramatically, dramatically reduced their pain.

Now, again, I'm not saying it's magic. If you're bone on bone and you have no synovial fluid, obviously you are limited, but at least in those people, they say that their compressions pain has, has gone away but dramatically reduce.

But from a healing standpoint, like you were saying, if you tear an elbow or an elbows ligament or shoulder ligaments, sprain an ankle, brain and knee, and you use that product injected two or three times a day, like 500 micrograms, into the point of origin.

Dude, it's insane how fast healing is. That's a number one blend in the world. But back to your original question. Our chief science officer just did a huge thread on Instagram and then they deleted his account today.

I woke up this morning and he's like, They took me down. But he just did a huge thread multi on the glow and the clove blends and why GHK, why all the misinformation about how these are destabilizing your blends of making bunk peptides is all untrue.

So what I'll do is hopefully I can get that from him because hopefully he saved that as an actual document on his thing. I will send it to you because they just deleted his account today.

Otherwise, I would send you a link to it. He explains the science. A lot better than I can, but GHK, you know, in those formulations is not eroding the efficacy or underlying the FC.

It doesn't do what Dr. Trevor Bachmeyer saying. There's a bunch of other people out there that are saying this. Is it possible that GH KCU can do some things to degrade the pH level of.

Other peptides, absolutely a hundred percent, But it won't. Do that with the products that were in the glow or clove land, which again is BPC, TB 500 and KPB.

Now, one other thing I can tell you is that when I owned my company before BioLongevity Labs, which was called Asir Custom. So we were the first company, that company was created in 2018, sold in 2022. But we are the 1st company to have a patent on a peptide based hair and peptides based facial rejuvenation product.

And of course it was GHKCU, And a bunch of other things. And as, as it evolved, it became, there was a version two and aversion three, and we added some more, uh, AK peptide, peptides by regulators and to strengthen the products.

But I was involved in the testing of that and our chemist shout out to Nick Andrews, one of the world's top GHK guys. Uh, you know, he understood like what GH K degrades and what it doesn't degrade and all of this stuff that Bachmeier saying is complete and total bullshit.

And I will take Nick, who's one of the world's leading GHK experts over, you know, his information, which again, I was involved in this company. I as an owner, him and I were the owners of a company in 2019, 2020 and 21. And so I know what GH KCU will do at a very high potency, Which is again 3%. If you use a six to seven to 10% grade of GH on the skin, it'll burn.

And that's in a transdermal solution. So if you're injecting GHKCU and you also have these other competitive peptides that are in those vials, we know the micron size of them formatting as molecules injectable and either competing or you can call it deaminating the effectiveness of the other ones.

None of those peptides in those blends will do that. So anybody, and then I would also just say to you, anybody who uses those blend gets a result from them.

But what Bachmeier was saying that they're, you know, making them inert, because that's what he says, it's complete hogwash because people would not be getting results from those products.

And again, I know people that have been using clow and glow for years. My wife has been injecting GHKCU into her face since 2021. with, you know, a medical grade pen and she's been using KPV.

She's using now the newest, obviously blends of the clone blow. I mean, clow and glow and has no issues and gets, improved skin quality and stuff. And I don't use anything on my face, not even the stuff that I use to sell.

and I surely don' inject anything into my base and granted that people are saying to me, Oh yeah, Jay Campbell is a peptide expert, but he looks like he's 80 years old.

You know what? Great. I hope I look 90 to people watching this on the camera because I don't look like that with my shirt off standing in public, but I won't put anything on my face.

I'm Robert Redford, right? I want to age and let show my base shows weathered and wisdom and whatever. Maybe I could, and it would help me. I don't care.

It's just one of the things I won't do. But all that stuff about the degradation of GHKCU and KPV and BPC and TB-5R, it's not true. Again, if you want to do the Pepsi challenge, buy them from BioLongevity, by them, from a compound pharmacy, buying from anywhere and use them yourself.

And you will see that you get results from it. You will not have a lack of efficacy from people saying that they destabilize. And by the way, I spend at least now an hour a day having those things quarantined to people who answer my emails because they say, oh, i saw that this grades and it doesn't work.

And what do you say about that? You know, and I'm like, Oh Jesus. But I honestly, was sending them to Brian's thing. Cause he just did it like a week ago and was profound.

I mean, he went through all the science and stuff and they literally deleted his Instagram account this morning. So I don't have that anymore. But we will do it.

We'll actually do an article on that because we just have so many people messaging and I'm so tired of Bachmeier's bullshit. So we'll write an Article about that and it'll be absolutely the state in the science, tip of the spear on why people don't have to worry about.

That we dig that up in terms of. Burn when you inject copper or TV 500, what does that attribute to? So that's actually a great question. I know the answer to that.

It's basically some people, depending on the level of melanin in your skin, darker complexed people notice it more than lighter complex people. And Nick Andrews, again, the GHK expert, my old business partner.

Shout out to Nick. He always used to talk about this because he's red hair or he has got very strawberry blonde hair and he is a complete, what is he called, ginger.

And he would never ever notice injecting GHKC. You would inject it into his hair to regrow his. Uh, and I remember Chris Gathin, one of our, um, good friends.

At the time he was an influencer for our company. he Would inject into a scalpel and be like, mate, this is killing me. I think I'm going to die. And my wife, a year later, when she had her breast augmentation or redone or whatever, she was injecting a formulation that he gave her, which was custom to speed the rate of healing.

And she told me, and she has insane pain tolerance. I remember her telling me she's like. I can't do another fucking injection. My skin is on fire. Right?

So like some people have that. It just, it irritates the nerve endings in the skin, in epidermis, and it just causes that like mild cellular information, but it really, really does burn.

So the solution is to obviously. put more bacteriostatic water in it or add another peptide. And again, my wife adds BPC and cartilax or she'll add GP, what is it?

KPV and TB 500 to it. abrasive or less burning. I do have a document that someone in my private membership group just created the other day that really explains the irritation, why some people have it.

It has nothing to do with melanin, but that was just always my theory because the whiter you are and the more blonde hair you have, the less you feel the burning and darker complexed you, are the border.

You notice the burn. So I, I had my fit. My theory is opinion is it has something to with Melanin cortoid receptor complexes in your skin. Okay. In terms of oral versus injectable, are there certain ones that injectible reign supreme versus oral?

Are they working differently? Where do you provide suggestions in terms, of purchasing oral vs injectble supplements or peptides? So yeah, so it's a great question.

So earlier in the year in, the middle of the Europe, you probably remember we were actually selling a buccal strip or a Buco. It was a square. And we called those peptide bio strips.

We got a trademark injunction filed against us in September from some idiot that had like a vitamin strip. And when we searched the patent database in April, of course, the US patent out of base had not updated it.

And he was granted his patent in December. So we were able to get out. But we had to take them off off the market completely because of that. The way they worked is they would hit the tongue, they go up to the roof of the mouth, and then they absorb through the oral mucosa.

So you completely avoid the digestive tract altogether. To answer your question, the majority of peptides that are oral that use the Digestive Tract, this actually even goes through to newer ones, which are liposomal, are really worthless unless you're targeting the actual microbiome.

Right. So like, you know, we have bio restore and we also have biogut pro, which we talked about earlier. Those products are great because they're literally just targeting the microbiome.

And so where they are going, through first pass digestion, small intestine, large intestine getting into the actual stomach itself, they will hit the areas as far as the absorption or the efficacy.

I think you're probably looking at somewhere between 30 and 40%. versus comparatively to actually an injection of all those same peptides.

Peptide Quality, Compounding, and Product Safety

But again, as you know, Kyle at Level Up has developed a product before we did. It's a great product. I still think it's an awesome product, and then we developed BioGut Pro to kind of mimic that, but we added PEA We added sodium bicarbonate and we added something else that they don't have in theirs.

And we had some issues with the formulation of it in November because we were finding out the sodium bar carbonate was exploding and freezing temperatures and causing some of the capsules to burst.

So people were getting their bottles and freaking out because there would be like four or five or six capsuls that had burst and it covered the whole thing and raw powder of all the different ingredients and constituents.

So we fixed that, we solved that. And actually this week, the new version of that is coming out and don't ask me how we fix it. I just know that our chemists fixed it, but to answer your question, I used to think that nothing oral worked unless you were targeting the microbiome.

But I now know. The product that we have, which by the way, actually have it right here. Biorestore. Now, you know why I'm not bullshitting because I use this.

What I was using this, which by the way, is BPC. Let me just read everything that's in it. It's Bpc, Hyaluronic Acid, Zaha, also Sodium Bicarbonate, and then it's got PEA, Which is Pethyl Ammonide Tide, And then a very high dose of Bbc 137, 1000 milligrams per cat.

I had a horrible, horrible case of tennis elbow most of the summer last year. And I was injecting the cartilax TB, BBC. I always inject in KPV. Not GHKCU because I refused because it burns me like crazy too.

Uh, I would just doing everything I could do and I. Could not get rid of it. It was just nerve impingement from overuse, repetitive, you know, training, et cetera.

I started taking this three capsules in the morning, three capules at night, just to see, for 16 years, to what had happened. I swore to God, Daniel, in two weeks, it was gone.

The pain was gone. So I changed my opinion of there is some systemic benefit from some of these really powerful BPC oral formulations. Now again, it has to be arginine salt based, which obviously this is so is obviously Kyle's.

There are other formats, limitless cells one too. But if you take this in combination with the injectable stuff, I think you're going to see much better effect than just taking one or one of the other in isolation.

Because like I said, I was injecting right here. I pinching the skin, inject here, and inject there. And I could not get the pain and the nerve inflammation to go away.

So I started taking six of these a day. Three in the morning, three at night. By the second week at the end, it was

gone. And I had it for four months and I could not get rid of it.

And i did a lot of therapy. You know, I see a, we have a guy who comes to us once a week and does PMF on us and, you know does a of active release technique stuff and you massage and deep tissue and he couldn't get it to fix either.

Two weeks of this and i went away. So Like I said, I used to say, anything. I don't think any oral peptide products do anything outside of the microbiome, but I now know that BPC systemically works somewhat.

But I think it's probably best as long as you're also combined with injectable, you know, at the site while you are taking this. And again, not, just trying to sell my product.

There's other Arginine salt based ones. Again, the Argenine Salt just enhances absorption. You just get a better, more stable molecule of BPC going through the digestive tract than you do if it's not arginine salt.

So ShredX, it's an amazing product. I'm not using it anymore because we have another product called Shread Max, which is a high dose version of SLUPP-332, Which I personally think is the greatest oral supplement ever.

And what I mean by that is that its effect is similar to 25 milligrams of Anabar or 25 mg of Primobol and acetate tablets. because it just has a profound effect of improving mitochondrial density, mitochondria optimization.

You get enhanced energy, you get enhance fat burning, You definitely get more torque, more firepower when you're lifting. We've gotten to the point where we recommend people take it 30 days on 30, days off.

Cause it's really, really strong. Like it not causing any damage to your mitochondrion, but it really revving your Mitochondria. It's a hundred milligrams per capsule.

I don't go anywhere without it. Uh, Previously, we were selling ShredX and we we're selling shred, which was a micro dose of SLU, right? It was like 100. We sold 100 and 250 and 500 micrograms per capsule.

But once we re and this is our chief science officer, once reinterpreted the research, Which was in July, August of last year, We realized that all the studies and slew were done in rats and 50 milligrams per kilo.

So we're like, well, why the hell are we selling this microdose? And it was again, the typical supplement industry. The first company that sold slew at a micro dose was a modern, not a moderate amino amino asylum, which is now Soma chems.

And they were selling in a hundred micrograms and people were getting results, including myself. I was using their product and I. Getting results. But once Brian Moscow, The Gorilla Chemist, re-examined the research, he was like guys, I'm going to do an experiment.

of high dose sloop at 400 milligrams a day from the next four to six weeks. And I bet you it's going to be more profound than anything that we're using.

We're like, okay, bro, we'll let us know, you know? Cause this product works. Now we were selling another product called Metashred, which was bam 15 in that.

Again, very low dose comparatively. Brian came back to us and he was like I lost 10 pounds of body fat. I did no cardio. Um, stronger and more muscular and leaner and morvascularly dense than I was before.

He's like we didn't start selling this. So before we started selling it, he gave me his, you know, homemade capsules of 400 milligrams. Actually there were 200 milligrams per cap.

And he's like, look, dude, just do 400 million grams of this for 30 days and tell me it's not unbelievable. So I listened to him and I did. I was like.

Oh my God. Like we have to start selling this. I mean, it was, It was profound. Like the one thing you notice is that you have more energy, like you. More reps.

You're stronger. Or you can keep going. If you're doing 12 reps of a specific weight, you cannot do 15 to 20 reps over the weight. And then over time you just become leaner, denser and more vascular.

It's crazy, dude. Isn't it? It said absolutely insane product. But like I said, I think it's the greatest over-the-counter product ever. The other thing is about is when you get your biomarkers measured, improve your bio markers.

So it also improves kidney function, improves vascular function lowers inflammatory markers. It's just insane. I mean, I haven't seen a single person yet who's been using a high dose of that come back with any kind of like issues anywhere.

Again, all biomarkers are improved in everyone. So again, it's very new. You know, we don't have a lot of people. with more than like three or four months use, but I have hundreds of images of people who used it for a month.

And they said, this is what I look like. I've never ever been able to take a supplement and look. So that's like probably the fame, my favorite oral product that we sell.

And that saying a lot, cause we have a really amazing oral products. Uh, but shred X is a good product. Still, you would take that before you did cardio in the morning.

You know, it's got Carterine. It's. What is the peptide that that in there? I can't think of the pep tide right now. Then obviously it also got, um, a low dose of SLU.

But it is still a great product, we still have even better ones now because we also have OS01. which is ATX 318, which was also a super power mitochondrial optimizer.

We sell that product as bioamp and bio amp max. And those are really awesome products too. I always carry bio-amp max along with shred max with me because you can just take it before you do cardio or take any for your exercise and get excess energy, more sweating, but amazing product.

It's actually been diminutized because ShredMax is so good. We launched that product about a month or a one and a half before we launched ShreadMax, and now ShrendMax just so powerful and people get results from it so fast that we haven't promoted the other products as well as we should, but it's still a great product.

When do some of these become compounded at all? Like Sloop or OS01 as an example, obviously that you have in your formulations here. Do these ever become pounded in pharmacy grade?

That's a good question. I mean, they could be. The problem with both of the products is they have patents. I don't know the answer to that question. I mean, the patent on sloop is from 2014. It's a lot of different people.

And they were like, I forget what it was actually patented for. But I think it. For some sort of cleaning stuff or something, what they pattened for, it wasn't completely different direction of like what its actually used for so I really know on that.

Um, and then on OSL one. It's too new. I mean, obviously there's a lot of research now at the University of Florida on that product. So I don't really know the answer to that.

Obviously if they ever are FDA approved, become FDA-approved drugs, which I think they've abandoned them. The owners of the patents have abandoned him for those reasons.

They'll always just be research chemicals. But I, I that if you really wanted to go down that pathway as the owners, of those companies, from a patent standpoint, you could, but I as you know, it just takes forever to get FDA approval.

You know, it takes 10 to 15 years and literally built usually close to billion dollars, you know to get FDA approval for a medication like that or a drug like.

And I think a lot of these people, when they're first looking at these, or looking these molecules, they are looking for specific use case. If it doesn't meet that use-case, then they just abandon them.

So a of the times when their found is orphaned pharmaceuticals or orphan molecules. You know, the other use case, which is obviously the research chemical community picks him up and uses them.

You there's a lot of drugs like that, like tussle fancy, right? Like that was an abandoned drug that originally being looked at as like an SSRI replacement.

And I forget the reason they abandoned it. But now, I mean, people use it all over the world for energy, for focus, or enhancing BDNF and it's profound product.

It's technically an FDA approved drug or it wasn't FDA-approved drug, but it was orphaned. And so, you know, nobody is really using it anymore. Now you have all these research companies, including us, we sell it.

We don't sell in isolation anymore, We sell them in a mixture product called bio flow, which also has magnesium three and eight and some taurine in it, Uh, because I think some people blow out their taurine receptors when they're using, uh, test of benzene in isolation, but that new product that we made, which came out, I want to say in July, a lot of people rave about that product because again, if you've ever used test offense, and it really gives you focus, you know, it's really, really good focusing agent.

And then over time it does have a thermogenic effect too. So it doesn't stimulate metabolic rate. It's very slight. And smaller people, I think they notice it more.

Some people say it has appetite suppression. I never noticed appetite depression with testopensene, but over time it does improve metabolic rate. Yeah.

It works directly in the brain and it's more stimulant. Like in terms of, you know, the OISO-1 or SLUPE, AOD, obviously then you have the whole plethora of growth hormones, secretagogues, GLPs.

Where does someone start? How do you navigate? Because obviously you had several products on the market. Obviously you understand maybe regarding the context, but let's say the lay person comes to the site.

They're new to world of peptides. Obviously they're looking to enhance their metabolic profile. You mentioned mitochondrial peptide, you know, ones that rub up the engine.

What if your engine is broken, right? Come back to foundation. I was assuming that they now understand the importance of foundational lifestyle medicine.

Where do they start enhancing their meta bar profile? What do you, what do use kind of suggest or how do navigate someone looking It's a great question and it's perfectly timed because at Dave Asprey's conference in May, him and I are going to do a fireside chat on that exact question.

Where, you know, what is the J Campbell recommended stack for a beginner? What is J. Campbell recommend stack? For the ultra elite. So I'm actually writing that and putting that together now.

And obviously it works. It's so fluid and so dynamic. You know? I gotta make sure that like then is, is is. Is the same as now, but I think the answer Daniel is first we got to start with the beginning with.

The foundation and the foundation is hormones. from whatever you're exposed to, to exercising, lowering body fat, et cetera, I think those things are the first thing.

Because I always say this to people, if you start using all the products in bio-longevity lab cells, and you are a metabolic hormonal mess, you aren't going to get jack shit.

Nothing is going happen. So again, those four levels of looking at what is causing your dysregulation, cleaning all those things up. And then if that happens and you're able to optimize your hormones naturally by doing that, then you can probably start doing it.

But for most people, I think it's getting hormonally optimized first. Then from there, it is assessing what is your biggest needle mover, right? For most, people it was metabolic health, they're fat, have too much inflammation, and they are sick.

Realistically. And again, we don't sell this anymore. Obviously we will have super red true tide or call it lepto GR soon. I think a micro dose of a, again GLP product or a GLB like small molecule didn't talk about, um, or for Gleitron, which is biozapetite on our website, Lily's not yet approved oral small-molecule, you know, GL P like product.

That's a game changer. Like that product is better than true zapetide. It's an oral capsule and you can take it two or three times a day, depending on how much appetite suppression you want.

As I say, it's appetite, suppression on command. There's no nausea. No, you know, dysregulated bowels or anything like that. That there's none of the things that people experience on shares, appetite.

And it just amazing. Cause like I said, if you wanna go a whole day and not eat, take three capsules in the morning and even think about food and he won't feel sick.

You won't feel metabolically or appetite dysregulated. You just feel good. And I think that, you know, Lilly just got delayed on that. That was this week.

So who knows? They got like two of the biggest drugs in the history of world, probably in The Pipeline. I mean, they're already a trillion dollar company and they got those two coming.

So I imagine they'll never run out of money. But back to your question, if the hormones are optimized and balanced, I think we're now looking at a microdose of a super, you know, call it a super GLP-like agonist, a triple receptor aganist.

So you're looking at GLp3 at minimum, superretta. A lot of people now are using a GL p3 and combined with terzapatite, I mean, biozapotite slash Orphoraglifron or terzaapatide.

And that's again for the appetite suppression. In a perfect world, You're using two capsules of Orphoraglibron in the morning. And you're taking a micro dose of GLP-3 until the other stuff comes, which is like twice a week.

And I think the dose for a woman is, like I said, 0.1 to 0.15. For a man, it's like 0,25 to.5, depending on how metabolically dysregulated overweight or obese the person is.

and then you are looking at mitochondrial optimizing peptides. You know, I'm not mentioning right now, fall of statin and cloto. Um, I think you would probably want to use a micro dose of follow statin.

Obviously if you're on a GOP, which obviously I do recommend, um, the dosages is again, anywhere from like one to 2.5 milligrams a week, uh, for a man or a woman.

And that can obviously also be injected once every two weeks, cause that's how we sell it now. Um, if you're super, um, you know, anal rotative, inject half the vial, on Saturday and the following other half of the bottle on the Saturday.

So again, your essentially, instead of injecting once every two weeks, or inject twice, uh, every 2 weeks. Which

theoretically will increase or improve the plasma concentration just slightly.

See, it may see a little bit better effect, but again because the day, the 19 day half-life, It doesn't matter that much. I mean, to the average person using it, that's not going to matter.

to a performance enhanced athlete or a bodybuilder or fitness competitor, or somebody who's a super level biohacker, you might notice a little bit better workouts.

If you do two shots a week, two shot one week and two-shots versus one, but again, it's very minimal. Uh, and then I would say again mitochondrial peptides, right?

What, what are you using? You know, are using a five amino injectable or using Amatsi injectible? Uh, you know we have a blend of five, amino, MOTC and NAD plus, which is amazing.

We call it a metabol metabolic. Um, or you can also go down the slew pathway, right? you could use SLU, shred max and take a high dose of SS 31, two or three days a week.

So I think it's, hormones optimized. Uh, I didn't mention a growth hormone, agonist peptide for fat loss, vitality, well-being. That would be a Tessa, a CJC.

Uh personally, don't do that. I use growth hormones myself. Um, genotropin. One I used one to one and a half. Sometimes I'd use two I-U's in the morning when I wake up.

And then you're again, looking at perhaps folistatin to prevent catabolism with your GOP use. We didn' t mention Clotho, but I think if you re 40 or older, And you can afford clothes though.

And obviously it's very affordable for us. You should stay on that all the time because it just going to make you biologically younger, biological age, younger again, remove senescent cells, improve endothelial tissue sensitivity, improved sex, sexual function.

So again, it's just such a powerful anti-aging molecule. And then if you really want to get exotic, you can obviously look at using like epithelon, and you could use thymolin, products like that, intermittently throughout the year to improve thynus function, to improved telomerase production and expression.

So all those things kind of come in, but that's the way I would look it. It's $1,000 to $1500 a month of a stack. um, you know, that you're using to really, um.

Live longer, live leaner, lives stronger. That's kind of the way I look at it, but you don't have to do all those things, We're cycling, well, epithelon, avocado, apitalon or thymulin with all our patients at some point where anyone that we're playing the playground of, of peptides, which will share our peptide playbook in the show notes.

I would presume you probably have something similar readily available for, to guide, uh, your whole population. Yeah, we do. So we have a bunch of things.

We have the peptide cheat sheet, a bioregulator stacking guide, and the small molecule stacking guides. All of those PDFs, which are multi-paged, go through how do I use the bio-longevity products at the same time synergistically.

Do I take them on an empty stomach? Do i take it fed? At what point in the day? How can I cycle on and off? What can i combine with this when I'm cycling this one?

There's lots of information in there. I think people get lost in the weeds. The best way to summarize is like, what is the biggest bleeding neck syndrome that you have?

And again, for most people, it's fat. They're metabolically dysregulated. And they have too much inflammation. So

get our hormones optimized, get a hormones balanced, have enough energy now to start exercising, doing resistance training and cardiovascular training.

Then we can throw all those other things in. Like I said, I designed this with Dave because I got to get this in by February 6th now. putting pressure on me.

it's gonna be the super red and true time. It's going to be a ball of statin. And it is going be to close though.

Bioregulators, Oral Peptides, and Recovery Stacks

Its gonna to therapeutic hormones. Uh, its gonna a growth hormone agonist. For me its growth hormones, but a lot of people, you know, they like pep. They like, um, Tessa, IPA, CJC.

Just there's one thing that, that I don't, I dont say this a while. I've said this on certain podcasts. There are a of aging people who are older, who really peptides don' help as much, right?

Because if you don''t have any IGF-1 production, You know, and peptides are just naturally boosting that. You're not going to get the same effect as you will from using actual growth hormone.

So again, it just depends on, obviously, if a person can afford it. The good news on growth hormones now is since COVID, there's so many offshore pharmacies that sell it and it's not illegal to import it into the United States.

And obviously as, you know you can also go to Mexico and you buy like a year supply and bring it back with you. It's like, we won't do that, but it it actually more expensive to do than to go offshore.

But that's why I always tell people is like if you're 65, Is Tesla going to be more effective than growth hormone? Probably not. Experiment with it and see.

In my experience and working with a lot of older, very sophisticated people, they all tell me, oh no, I got to have my one IU or one and a half IUs of growth hormones in the morning.

A lot of people take growth hormone at night. We didn't talk about this. I don't like that because I feel that that disrupts the circadian rhythm a lot more.

And it makes people kind of like have to think about taking a nap, you know, in the early to mid afternoons, an IGF-1 stimulator at right before bed. It might help with sleep, but it's also going to like kind to push you to a level where like you're thinking about, taking an app and I hate that, obviously to be ultra-productive.

You really don' want to have take a naps in middle of the day. I think that's kind of the way I look at it. I don't think I've missed anything. And I mean, I love the pitch a lot and I loved finally, and think everyone over the age of 50, 45 to 50 should be taking it out once or twice a year.

You know, there's a lotta stuff I didn't talk about, that is probably coming, but I those are your biggest needle movers. In addition to taking like hyperbaric oxygen, like my wife and have a Bimini in our house now, right?

So that the tub and it's the oxygen Ozone that's, you know, perfusion through the water. I mean, dude, I sit in that when I'm at home, which isn't often, unfortunately these days, but I sat in there for 45 minutes a day.

And that is absolutely a game changer. Right now, obviously you can use chambers. You can do all those things and they're all awesome. But like, I haven't met anything or found anything that's as simple as having a tub in your master or on your deck.

That's full of oxygenated and, you know, ozone, ozonated water that you could just sit in and bade, for 20 to 30 minutes and. The cool thing about that company is that they also make it freezing.

So if you want to do a cold plunge with that, you can. I mean, I don't ever do that. Um, um, a hot water guy, but you have the ability with. Oh, like, uh, outside of those biohacks, or I think red light, really high level medical grade redlight is good too.

Uh, do you, have one of these in my house? I haven't had time recently to even use it because I'm always using the BV instead. But I think of all those other advents that I talked about, I'd think that's kind of going to be your best bet.

We didn't talk about meditation, you know, inner work, introspection, sun gazing. I mean, those are all absolutely crucial. You know? I don't, don' live my life without doing that in the morning.

you I have a gratitude journal. My wife has a Gratitude Journal. The innerwork is essential. You cannot balance and do all these other things if you're not also keeping yourself stable, especially when you are productive and very active like people like we are, right?

Like you'll go nuts. You know, you have a thousand people messaging you an hour, but meaning all you got to look into that, man, I'll give you my cell phone number and you can text me and I will connect you with the owners.

We're actually buying that company. That's how amazing their technology is. I mean, it's insane. It's called Bimini hydrotherapy.com and they have portable one that's like 7,500 and can put that in any tub.

But I just, my wife and I remodeled our master at the beginning of last year. We were the first people in Florida to get it. And that's did my life. I live for that.

Like, I'm not joking. When I get home on Saturday from this being in Mexico for 14 days, 13 days. That'll be the 1st thing we'll fight over getting in that bed.

No, that's, it's so profound. People don't understand it. We just did a episode with the cocoon wellness spot in Vegas. I flew out there and we did the whole day kind of showcasing what they're doing, the hyper oxygenation in terms of the water.

And so that is critical. Now, if you're at layering ozone, even better still, obviously, as you said, perfusing through the skin, going back to HGH. So you are doing one IU daily.

So I, since I started taking polystatin, because I want to see how much muscle I can gain. I've gone up to two and there's actually been some days depending on my travel and what I felt like where I did three, but I always take it in the morning because i've learned over the years that when I take growth hormone at night, it does help my sleep, and it makes me want And I just think that it's changing circadian rhythm.

It's affecting circidian rhythm in a specific way. Whereas if you take it first thing in the morning on an empty stomach, inject it right around your navel, it just doesn't affect you that much.

And, you know, I'm very familiar with the research on growth hormone. I always say to people, like, all you have to do is look at all the which obviously are young children who do, they're taking 20 to 30, I use of growth hormone a day.

And do you know how many of those kids have ever had one statistical incidence of cancer? Zero. So all the bullshit about, Oh, it may enhance the rate of metastatic metestatic tumor or latent tumors.

It's all BS. It's the same thing about BPC and TD-500 also stimulating cancer. I had one of the world's leading oncological biochemists. There's just such a thing.

Send me an email and it's a woman. And she's been using BBC and TV 502 and she says, don't listen to any of these people. They're all fools. She was, there's one person I, I won't say, but I think, you know, who I'm talking about, it was talking.

It might have a very, very large following. He was like, trust me, he has no idea what he's talking to about. But like it's interesting because I save her little messages she sent me on a telegram about like the risk of, cancer, even people that have latent cancers or Survived chemotherapy and are in progression, you know, remission.

She's like BPC and TB 500 at normal dosages that obviously we're all recommending. The risk is zero. It's so nominal. Like somebody would have to mega dose and overdose and do it for a year straight to see any kind of risk of like, energizing a latent tumor.

So that was cool when I heard that because I've always kind thought about that as like well, there's always risk. Right. But like, she's like trust me, this is what I do for a living.

I study this stuff. So that was kind of cool that she said that. Yeah, to me, the five hallmark signs of cancer, it's low oxygen, high chronic immune suppression, hi inflammation, Hi acid, low micronutrients.

And when all things hold true, this is when cancer prevails. Interestingly, that actually mitigates that. Couple of last questions, because I know we're approaching time here.

This has been absolutely profound. You keep mentioning, you know, small molecules. Obviously we have peptides and then we peptide bioregulators. How do we distinguish each of those?

And then when is the right time for administration for what? Obviously breaking through kind of now the confusion of, of these three lanes. Yeah. So, so let's just talk about bioregulars.

And by the way, dude, thank you for interviewing me. I don't get smart people like you ask me questions like this. Like I always say, the smarter the person asking me the better the answers that I'll give.

Cause my brain, my it doesn't work in ways where like people ask like, Hey man, like give me to top five questions, right? Like, I just know the answer because of all the work I've done, but I'm really grateful that you're asking these questions.

This is amazing. You're right. Can't wait for this to come out. regulators are interesting because I've only used about 35 probably somewhere between 35 and 40 percent of them and My wife has used a lot more than I have and I would just say again.

These are mostly oral capsules I'm not talking about the injectable by regulators which are as profound if not more profound than peptides and we have them all right like we sell cardiogen I mean there are so many Daniel that are incredible like for people that have stents and you know vascular damage and You know, they've had an aortic valve replacements.

I mean, there, you know. Cardiogen is like this profound injectable Russian bioregulator that I've heard these stories from people with vascular illness and vacular disease and all these different things who have come to me and said, dude, I started taking this and I'm off my medications.

Like my statins are gone. So like, we're not even talking about that. We're talking. About like the oral capsules, like these blister packs. which I still have because we are the biggest seller and distributor of these now in the world.

And you probably know we stopped selling these because now we're making them ourselves in bottles. These all come from Russia, these are all Cavinsons bioregulators.

We stopped these in September because, now, we make them in United States and put them into bottles and, again, just so people know, For me, I take four of these at a time instead of two because our capsules are double the dose.

So we have double-the-net ingredient in our actual oral capsule. What does that actually mean? The answer is these products are maintenance products. And what I mean by that is their tissue specific and they work on either

the organ or the biological system they're designed to work for.

So they had all these different Russian names, like this one was endolutin, right? This is like the testes one. And nobody could ever understand them.

You know, obviously those are English translations of what the Russian word was or vernacular. and so we're like, you know what? this is insane. We're going to call them bio and then the Oregon or bio in the system.

Like we have bio brain, we a bio endocrine, and we are bio cartilage, bio pancreas, biopinion, pineal gland. So all these things now are simple. so it's like, if you understand that and you buy these and want to like optimize Azure aging, you know, those various biological organ systems, You will take these for a month at a time.

Right. You'll take for as long as the bottle will last. And obviously we have instructions now on the bottles that says, you know, take two of these twice a day or take four of this or whatever.

But, um, I don't think people will notice bioregulators like they notice peptides. But what I do know is, is that everyone that takes these and is really truly targeting a system, for example, the bio eye, which was the retinal bioregulator, dude, I started taking that and I literally corrected my farsightedness in one month of thousands of people who said that they started it and their floaters went away in under a month.

And now their floaters are gone. So again, I want to say the Russians are not stupid. Cavinson was a genius. You know, they were using these things for 60 years.

They have lots of published research. He could go to Russia and buy these over the counter. And, you know now obviously because of that they're sold as supplements in the United States.

So there's no risk, the FDA doesn't care. they don't see any potential risk in these. But I just don' think that when people use these they should expect like profound needle movement or notice noticing like they do with peptides, right?

Like a lot of people will inject PPC and TB 500, as you know, and two days later are not living like pain is gone. But with these, it's more consistency over time, but they definitely make an effect like, dude, for this, you this is the endocrine one.

This is for the male testes, bro. When I use this. My ejaculation is way more. Like I have way more noticeable ejaculation, right? And it's like, well, why, you know, somebody might say, dude, like why does that matter?

I'm like bro, Like you don't want to have a big cum load when you come and like noticeably ejackulate. Like there's more powerful in my orgasm when I've on this too.

So I don' hate this all the time, but. But when I do, it's like two to four weeks and I notice what I get from it. So I just feel like all of the oral bioregulators, they function on optimizing, you know, let's just call it an already balanced and maintained biological system.

I don't think you're going to see dramatic, like I said, needle movement like when you do with injectable peptides, but you should definitely use the ones, the oil ones for the kidney.

You should use their oral ones. For the liver, because they're all just improving. internal organ function, which as you know, we're living in such contaminated worlds and environments.

I just think that people have to get used to not noticing anything major right away. If that makes sense. Yes, it's more kind of this long, consistent support of the organ.

And I will piggyback on, on what you suggested because foremost, the eyes are interesting. We're treating a lot more of an aging population, a of kind this degradation in Well, obviously there's macular degeneration, but just

vision problems.

We did an iPodcast, which I'll link in the show notes. But when you're talking about floaters, that to me, equates to liver congestion, toxic burden, high in oxidative burden which is being highly, highly susceptible.

And obviously made it very mitochondria rich. So what you're doing is they're providing a precursor for healthy organ function, which that has to be consistently repleted long-term, but obviously internal factors and external factors are driving that dysfunction.

And even one step further, it's interesting when you mentioned the injectables, I was just recently invited to present it at one of the universities in Chicago and it was on long COVID.

and offline when someone had stood up and asked me a question. And that's what I was suggesting is one of your products because of the vascular damage.

So we were using the injectable form of these bioregulars to make a profound difference in enhanced vascularity and recovery from such severe damage- Which product was it?

The one that you had explicitly- That's hilarious, dude. That awesome that, you know that because so few doctors know how amazing that product is. Well, I have a lot of colleagues who are MDs and DOs, and I ask them about the use of this, especially in those case scenarios.

And 99% are ignorant. That's the reality. It's not for lack of brilliance. These people are intellectually gifted.

Closing Thoughts, Resources, and Final Q&A

We're caught up in our own population, treating our patients. Obviously, we have our clinical biases. Needless to say it's difficult to stay current. And that's where, I mean, it was awesome seeing you at AFRM and the goal is to continue to stick current, which is what I see that you are at the bleeding edge of, of science and where things are going and obviously practicing what you preach, right?

That to me is speaks, speaks volumes as well. Let me tell you something about this. Cause nobody else knows about. This too. It obviously you earn the right to know this So I filmed, well, this is an interesting story.

I'll try to summarize it. So there's two people in my community who've been in community for four years and they went to both of my seminars. They didn't have one this year because there was just so much going on with BLL scaling.

These folks, they came to me early in last year and said, look, you don't know us other than that you've met me a couple of times, but we want to build a system.

a certification program teaching what you teach. And I'm like, you know, I've heard people say stuff to me all the time, like that's cool. You know? And they're like no, i don't think you understand.

Like this is going to be the most thorough thing ever. and we're and i'm Like, okay, sure. Right. So they were like do you give us permission to build this?

and I was like yeah, You have my permission. so they came back to Me in August, Like six months later and dude, they built the Most mind blowing all encompassing Obviously they used AI to scrape everything I've ever said, done, put out courses and they just created this giant modules, modulated system.

And they were like, okay, so you read it. My wife and I were blown away and we're like but now you have to actually come somewhere and film all this. Like we have get this on film.

So I went on December 28th to Las Vegas I was there until January 13th, 12th or 13 and almost died filming

because it was eight or nine hours a day. I mean, bro, my brain was melted.

had to come to Mexico after that just to decompress. But I want to say in probably middle of March and they're calling it the mind body optimization specialist.

So it's literally designed for clinicians, functional health, doctors, trainers, life coaches. I mean, anyone who wants to learn, like you said, bleeding edge science on peptides, bioregulators, small molecules, hormones, and then combine spirituality and consciousness.

You know, in some way that they were able to interweave, which I don't know how they did it. It was incredible. I mean, both of these people are super accomplished.

They're like in their mid sixties and they, they sell courses for yogis for literally people in like the yoga world. And they're, I mean, did they own like 40 Gold's gyms and they sold them all.

And these are like amazing. They have a software engineer that wrote everything. So anyway, this is all coming. I honestly think that it's going to be a game changer for the clinical world, because like you said, all of the doctors are geniuses.

Like you say, they are silos. And they don't really understand any of this because there hasn't been anything. Yeah. There's seeds, you know, there's Melissa Peterson.

I love her at the peptide university. And there are some other things out there that are really small in scale, but dude, this is like all encompassing.

Like someone like you dude will literally have to take six weeks to finish this. That's how much information is there. My head almost blew up. doing at all, there's so much content, it was overwhelming.

It's still exhausted to me. Like I'm like, cause I've now just starting to see what they built, but we cover everything. Every single product, every single drug.

I mean, It just, that's mind blowing. And like I I really excited to get it out there. You know, now they're like all the way, we're going to have to do an advanced tier because there was going be some clinicians that want to go deeper down the rabbit hole.

How can you go more advanced than what we just did? You know, but like they're, they'll be there, But that's coming. So that, that will probably be in mid March to late March where it will be available.

But like, you know this is the stuff like that for all your colleagues that they don't have any information. We, we made it so that you can't cheat the system, right?

Like every layer is tests. And if you fail you got to start over. You know what I mean? So it's like, it is not one of those things where you can just hack it and get your certificate at the end.

You got to actually learn it. So, It's pretty epic stuff. I'm really, really excited to get that out there. And I honestly didn't think I was going to be able to do it either.

When I got there, I said, how am I going? It is already dead. Bio Longevity Labs did an insane December. It was like how I am going do this? But we filmed it, and now I here in Mexico recovering.

perfect that you and I hooked up here today and we got a chance to talk about that because I think that's going to be massive. I really do. I'm super excited to get involved with that.

And if there's ever any assistance, if I could provide you, your team, or your staff or any sort of events, I am glad to participate in any way that I can.

Like I said, is I practice what I preach as well. I always look to you kind of as one of the most noteworthy resources. You mentioned Dr. Seeds, we participate within the organization as.

And so peptides to me is changing modern medicine and it's moving very quickly. And I appreciate and applaud everything that you've done, even how you described that whole six week program by keeping everyone honest and accountable with doing testing to ensure that that, you're actually grasping the knowledge retaining and then able to impart actionable change on patient outcomes.

But even N1 for ourselves, that's what it starts with. So definitely eager to continue this conversation offline. I know we've approached kind of close to the end of time here.

Where can people find you, tune in, obviously your company, but learn more. Yeah. So first off, thank you so much for asking all these amazing questions, Daniel.

I feel like you're a brother of mine. We've probably experienced many past lives together helping people. jcambell.com is my primary website. free PDF copy of every book I've ever written.

The newest one will probably be there by end of March, because I don't even have the PDF myself yet. It's just a Google document. But obviously that's called Metabolic Awakening.

So I definitely want people to be exposed to that, cause I know that that is going to change the world. And it's really going help a lot of people. They can find me on social media when I'm not deleted or shadow man.

Which is J Campbell three, three three. My Instagram will be gone at any moment. We already paid to have a get back and it's going to be done again. You can't talk about peptides.

They do not want you to talk. And then well, where you can really find me. I'm so far not deleted. So that's the two places. But again, it just J. Campbell and then the number three 33. That's my handle.

This has been awesome. We'll definitely have to include also the cheat sheet on all things peptides. Will include obviously all peptide playbook. Definitely encourage you guys to check out Jay's book.

When it does come out, I will definitely be grabbing a copy as well. I look forward to connecting here in the flesh, hopefully soon enough. In the interim, we'll, definitely keep in touch.

The last question I end up every episode with is if you could have one superpower, what would it be? I already have a superpower. I'm Jay Campbell. That's like the superpower in and of itself.

My superpower would be to be invisible so that I could basically cloak myself whenever necessary so I can separate my energy from people that didn't deserve it.

You know what you did intentionally and maybe inadvertently, but definitely intentionally. And then you went on to the second answer is in all my episodes, not one individual has ever said being myself.

That's awesome. Yeah. I mean, cause honestly, man, I've done so much work on myself and loving and trusting myself. And learning to do that, that I really feel that that is a superpower to love and trust yourself is the superpower.

Right. That was absolutely beautiful. Again, I thank you so much for your time today. I appreciate that we were the first ones to bring you back online.

So welcome back, glad that you're back with us. And for everyone watching, listening, please like, review, subscribe, share this with someone who wants to play in the playground of peptides.

This was a mini masterclass. We will likely be doing a 2.0 in a new year here, as things are evolving very quickly

and Jay is Definitely on the front lines of research and moving quickly with his company and doing a lot of great work, things that we trust and use as well.

So thank you again, Jay, for everyone else tuning in. Please stay healthy, stay wealthy, my friends. Thank you for tuning in to the TBD Fit Podcast on Dr.

Talks, where we unpack all things health and longevity. If you enjoy the show, like, review, and subscribe. This allows us to have a greater reach and help others on their health, wellness journey.