Introduction and Guest Background

This is doctor talks. Real talk from real doctors. Only issues that matter to you most. Hi everyone. Welcome back to the Peptide Summit. Doctor Jen here.

And this story of our next our next next guest is similar to mine. He left conventional medicine and went to really help people. So Doctor Jeffrey Gladden is going to be talking to us about longevity and peptides.

He was a former interventional cardiologist turned longevity medicine doctor. He also has a great story about why he changed and got into longevity. And when he's not at work, he likes to be athletic, artistic, and also he has a spiritual side.

He surfs mountain bikes, hikes, snowboards, plays the guitar, is into spiritual growth and enlightenment, and loved spending time with his loved ones.

So I'm so excited to to talk to you today, Doctor Gladden welcome. Oh thank you Jen. It's great to be here. Thanks. So you have an interesting story. So I don't know, not everyone hangs out with interventional cardiologist or talks to them on a daily basis like I would in the emergency room.

But that's a specialty that takes a lot of work to get into and a lot of time. And you left it. So tell us a little bit about how that what a yeah. So, you know, I, I trained in interventional cardiology and then came I did that in Denver.

I did my internal medicine at Case Western in Ohio. Actually, I think you're in Ohio. And then I went to medical school in temple. But when I finished my cardiology, I came to Texas in 1988.

And, I thought I'd kind of died and gone to heaven because there was a lot of chicken fried, steak eating, tobacco chewing people here.

Leaving Cardiology for Longevity Medicine

And I thought, well, this is a target rich environment for an interventional cardiologist. So, I ended up practicing interventional cardiology for about 25 years.

And I did a lot of things in that space. I ended up founding my own heart group, Advanced Heart Care, and I ended up with ten offices and 12 doctors and, you know, kind of a Texas, approach to medicine.

We flew around in a little plane, a little A36 bonanza, the outlying areas. And so I started outlying, hospitals. I started their cardiac rehab programs or Stemi programs for acute heart attack care.

Their cath labs, interventional angioplasty programs, A-fib program, CHF programs, things like that. And my, my passion was really trying to bring high quality care to communities that couldn't access it readily.

And then I had the opportunity to also co-found, a heart hospital here in Dallas with another cardiology colleague and the people at Baylor, which is turned into a nationally recognized, heart hospital.

That's a wonderful place if you need it. But, I decided that it was better really not to have to ever go there. Right. So, and then I was also involved with medical device companies.

I still sat on the board of, of one. And, so I have lots of things going in that area. But what happened to me is in my 50s, I got sick, I basically was putting on weight.

I was exhausted all the time. And I was developing brain fog. And when I would come under levels, higher levels of stress, I would feel myself go over a cliff of depression.

And so I went in and I got tested and I was basically told, hey, you know, everything checks out for your, quote unquote age. You're just getting older.

Why don't you take an antidepressant? And it was such an existential moment for me that, I'll never forget it. Quote. On sites like, I can't believe that it's all going to be downhill from here.

And so I really refused to accept that. And I think it's a similar story to many people. But I went out and I, you know, threw myself into management medicine and functional medicine, integrative medicine.

And it took me two and a half years to crack the code for myself. But, you know, now we could do it in six weeks. But but it took me two and a half years to figure out even that I had subclinical hypothyroidism, that I was hormonally depleted, that I didn't methyl eight well, that my neurotransmitters were off and that I didn't convert inactive to active thyroid in my brain efficiently.

And so once I got on the right combination of supplements, hormone replacement, thyroid replacement and everything like that, I, I lost 20 pounds of fat, put on 10 pounds of muscle, I could, you know, not worry about keeping up with my kids anymore.

It was like they couldn't keep up with me again. And I thought, wow, this is this is medicine, this is medicine, this is health care. And so I decided to leave sick care.

And so it was a little bit like base jumping, right? Because I knew how to make a living as a interventional cardiologist. And so you kind of base jump into something, but I just couldn't do it anymore.

I couldn't I couldn't, you know, have those conversations with people realizing that there was so much more out there to help people. And so I made the leap in 2012 and, never looked back. So I love that story.

And it kind of makes sense from a cardiology standpoint. I mean, yeah, you're sitting there knowing that there's a better way because you mentioned thyroid and hormones being suboptimal, and those aren't optimal.

The heart is not going to be optimal. And it's not just how you feel. And I think that's the most frustrating thing is people are out there and they feel like garbage.

And they go to their doctor and they're told to take an antidepressant. They're basically told it's all in their head. Well, that's not it. And, you know, to be fair, I mean, there is stress.

You know, stress is definitely a big problem with longevity. You know what it shortens are our telomeres. It ages us. So, you know, at least everyone should be walking away from their doctor, not with a script for an hour at a present, but with a script for an adaptogen or you know, just do mindfulness and stuff.

And oh, it's very frustrating. So when I still work in the E. R., I mean, I go through those things with patients, you know, if they're willing to hear it.

But it's such a broken it's such a broken system. And, you know, it's a bummer that happened to you. But but what a gift. How amazing that. Yeah, it's a gift.

It is a gift. Yeah, it is a gift. And to your point about thyroid, you know, you know, we saw a lot of people with congestive heart failure and things like that.

It turns out that, being hypothyroid is a bigger risk factor for death and a congestive heart failure patient than their ejection fraction. That's how that's how important it is.

We think about, you know, a weakened heart as being the biggest determinant of survival. But actually you superimpose hypothyroidism on that. It's a much bigger predictor.

Defining Longevity and Aging Exponentially

So it just goes to show you to your point how critical thyroid is and how often it's missed. We're all trained to look at TSH and T4 and whatever, and and it wasn't until I did biometric testing like, you know, we did reflex testing, actually, to show that I had, slowed reflexes.

And now we do resting metabolic rates on everyone so we can actually see what's happening at a cellular level. So it's I kind of took the idea of all the precision that I loved in interventional cardiology, and apply it to the longevity space.

You know, how precise, how deep can the understanding go? Yeah, yeah. That's amazing. Now, how do you find with your longevity treatments that you do?

How young are people coming to you now? I mean, they're probably getting younger and younger. Yeah. It runs a it runs a spectrum. Right. So we have people in their 30s, through their 80s actually that work with us.

And then we have, we see some people in their 20s who are the children of some of the clients that want to get them tested and do some things like that.

So but typically it happens for people when they start to what I call feel their own mortality. Right? They may not look like they want to can't do what they want to or feel like they would like to.

And in most cases, they've kind of leveraged their health for the sake of building their business, building their family, you know, engaging with their community or whatever.

And then they get to a point where they don't have they don't have anything less to leverage. Right? There's nothing left in the bank to pull from to do those things.

And so then they come in, but I think longevity is becoming so common and so popular that many people in their 20s now are like, oh, okay, I don't want to go down that path, right?

Like, I don't want to go down the same path of aging. I saw my parents, grandparents go down, etc. now people are like, I don't want to end up like my dad who's in his 50s or 60.

I don't want to end up with that. So they're starting sooner and sooner, and I think I think that's fantastic, quite honestly. So yeah, I do too. Now, how would you define longevity?

That's a great question for you. So, you know, it's I think longevity and to some extent is kind of an abstract term. I mean, what does it actually mean for an individual?

Does it mean you're going to live a long time and then what does that look like? Right. And so for me, it's a question of understanding, well what's the target.

So when I think about longevity in the way I define it, is that when I'm 100 years old, I want to have a 30 year old body, and I want to have a 300 year old mind.

And that's my concept of longevity, because I think if you're going to be healthy for a long time, the idea is to expand in into into the full expression of yourself, bring all of your gifts forward, right?

Become unencumbered by all the traumas and psychological traumas and things that have held us back and all the stresses, and really expand into like the best life that you can possibly imagine, and probably even better than that, and still have the usefulness of your physique and your biochemistry to support that.

And to me, that's great longevity, because now you keep expanding into the future, not sort of hanging on to play a little more golf and go fishing while you, you know, plan where you're going to go to your retirement home and then your nursing home. Right?

That's I mean, it's not longevity. So that's kind of how I think about it. Yeah, I love that. And that's it's hard to explain that to people sometimes you're like, oh it's it's going to give sometimes, you know, they're the young kids.

It's really hard to give them a grasp on this aging because they think they're invincible. That's right. Yeah. Especially, you know, with this trend with all these sugary coffee drinks and, and everything.

Yeah, it's funny, my daughter actually came to me and she, she wanted to wear a continuous glucose monitor, right. Yeah. I because I was explaining to her about blood sugar and fertility and, lot of her friends are having problems, you know, with stuff.

So if we think about all of these problems, they're they're all causing inflammation. And, you know, inflammation is is a good way to age yourself. That's anti longevity.

Yeah. Absolutely. No it is interesting I think one of the things that I learned as a parent, for kids, is that there's a spell between about age 12 and about age 26 or 7 where they don't listen to anything you have to say.

They know better, their peers know better, somebody else knows. But somebody on the internet knows better. You don't know anything. But at the same time, they are watching everything that you do.

And so parenting at that point is a function of of setting a good example as much as any conversations that you have with them is kind of what I learned.

And they circle back around to that now it's like, oh, dad, what do you think about this? Or is this a good choice? Is that a good choice? You know what I'm saying?

So it's not because I try to beat it into them. It's just because they knew I was living this lifestyle. And then they get to a point where they kind of wake up and it's like, oh, well, I'm not immortal.

And I can see a wrinkle on my cheek and I see that this is for real. Right? So I think that's kind of the way I approach it. I don't try to I don't prefer to coerce anybody into thinking about longevity.

Let them come to it on their own. Yeah, yeah. Let's make it be their idea. You know. That's right. I love that advice though, you know, and I think I try to explain that to my husband.

I'm like, you know, if we keep modeling good eating, eventually he would. But if they see us feeling like crap drinking, you know, that's five things.

Yeah. So that's great advice. I need that because I have four kids and they're going to be going through that phase. Yeah, exactly. And would you be able to define the exponential nature of aging and how that works.

Yeah, I think, you know, when you think about the aging process, I think there are many things that put us at a disadvantage in actually living young for a lifetime.

And that's really part of my definition of of, aging is to or, you know, longevity is to live young for a lifetime. It's not about just living a long time.

So when you think about that, we tend to think of aging as a linear process. You know, every year it's another birthday. I don't feel that much different.

So it's kind of linear. And then the other thing of it is, even though we know that people age a lot more between 70 and 80 or 80 and 90, than they do between 20 and 3030 and 40, 40 and 50, for that matter.

We kind of deny it. It's like we, you know, it's not going to happen to me. I don't feel that. And then if, if I were to ask or if the audience, if the audience was to ask themselves, what what are you going to be like 15 years from now, what are you going to be like 20 years from now?

Just take a second. Think about what are you actually going to be like in 20 years from now? It it's almost impossible to feel like you're going to be any different than you are right now, right?

We have a really hard time imagining that. So we're we're really handicapped in this exponential game that we're playing because aging is an exponential decline.

It's not linear. And yet we feel like it's linear and we can't even anticipate or feel like what it might be like to go on exponential decline. So we kind of live in this, false bubble of, oh, everything's okay.

Right. And that's, that's one of the biggest hurdles to get over is for people to actually realize that they are playing an exponential game.

Hallmarks of Aging and the Four Circles Framework

And so in order to win or that exponential game to actually live young for a lifetime, it takes an exponential strategy. And many of the strategies out there with regards to, quote unquote, living healthy or longevity or whatever else are actually linear strategies.

They're not exponential strategies. So that's that's part of it. Well, I love that. And you're right. You don't. You see yourself in 20 years maybe aging a little bit in the face, but you don't really think your body you don't know.

I'm always going to change. So. Right. Yeah. It's really important to to be proactive. So what are some examples in longevity medicine nowadays that you would say have that more linear approach versus the non.

Well I think I think in the I just recorded a segment for a biohacking film, actually and, and I think biohacking can be a great thing. I love the idea of people taking responsibility and control and stepping into optimizing their health.

But I can tell you that, many of the biohacking approaches combined with, get healthy strategy if I'm going to eat better, sleep better, lower stress, and exercise is still a linear response to an exponential problem.

And the reason for that is that it's not that they're not well-intended, and it's not even that they're not effective to some extent. It's just that they don't go after the actual drivers of aging.

So we're up to about 16 hallmarks of aging now. And those those are both the phenotypic expressions of aging, in other words, the demonstration of the physical manifestation of aging.

But they're also the drivers of aging. And they they kind of accelerate the process. So it's like a tornado speeding up, right? It's it's it starts slow, but then it spins faster and faster.

And that's the aging process. And so being able to go straight at the drivers of aging, rather than just the simple biometrics of sleep and heart rate variability and thyroid and hormones and things like that, that's all critical and important.

I'm not I'm not minimizing that at all. It's just not enough. And so you have to be able to go right at the drivers of aging itself, I think in order to crack the code, you need all of it together.

And then I think you also need to construct an environment around yourself that supports the mission to make it as effortless as possible to drink clean water, breathe clean air, have access to nutrient dense, clean food, things like that.

Right. I think that's critical. And the last piece is that, you know, in the book that I wrote, 100 is the new 30. I talk

about four circles, a life energy circle, a longevity circle, which is the hallmarks, health circle, which is all the organ systems and performance, which is being fast, agile, strong, quick, balanced with great cardiovascular reserve, great cardiovascular endurance, recovery and flexibility.

If you're going to do that right, you need to do that. If you're going to be that 100, you need to do it now. But on top of that is another circle, which is the life energy circle.

And that has to do with, having a growth mindset, taking care of mental health issues, fueling self-love, having great relationships, feeling joy, feeling worthy.

Right. Being wise and then feeling safe. I think most stress comes from not feeling safe ultimately, and then having what I call this energetic resonance with the universe where you have this greater sense of purpose.

And I think when you get that life energy circle dialed in your comments earlier in the podcast about, you know, stress is such a major driver of aging.

And it is, if you solve that circle in a, in a in addition to addressing the drivers of aging, in addition to driving, forward on the health process and then working on your performance to where you can be fast, agile, strong, quick balance, etc., then that starts to be and you have the environment to support it.

That starts to become an exponential response to an exponential problem. Love it, love it. And it is really important, like you said, to feel safe. A lot of patients I see they have that trauma and we're doing all the things that I'm like, look like, I know this is hard, but you have to deal with that part.

That's right. All the parts to get better. And I think that's a really hard that's a hard pill to swallow for, for people. And sometimes they get it. Sometimes.

Sometimes they don't. Well I think yeah I think I think to your point, I think most of us end up living in reaction to old traumas. Right. So I don't know, I've never met anybody that didn't have has not experienced trauma either in childhood, adolescence, whatever it was.

We've all dealt with traumas, and our brains are wired in a way to where we recognize that trauma and then we live in reaction to it, and it puts us on tilt.

Right. And so, it's like, well, I'm afraid of this. I'm not going to do that. I'd never go there again. I wouldn't do this. I wouldn't get in that relationship again and would do this right.

And so you're you're kind of living on tilt, living in reaction to these traumas. And I can see you on the mental health side. It's really important to work with somebody that can help you identify what those are, how they happened, what you experience there, so you understand it.

From there, you can heal it. And then the final step is to actually transcend it to where you actually look at it and become grateful for everything that happens when you get to that point where you actually grateful because everything is enabled you to have this innate wisdom, that you now have this innate sense of purpose that you now have.

You become grateful for all of that. You forgive the people that were involved, and there's just love for for everyone there. Then all of a sudden now your your psyche's at a space where you can actually really optimize health and actually expand into, you know, the true full expression of who you are.

And I think that's that's living right there. Yes I agree, so beautiful. Definitely forgiveness. And and like you said, feeling safe. So many people, you know, especially with the pandemic, it really sent a lot of people back.

So. Yeah, well, they everyone can feel can feel safe again. Yeah. Now, are you using any peptides in your exponential. Yes. Yeah. We've been using peptides for, I don't know, probably eight years or so.

And I did peptide training with, doctor seeds years ago. Initially I think I was the first class to go through a forum on the peptide, training modules that they had.

And, you know, I immediately became enamored with them because, unlike pharma, where you're basically putting a drug in the interrupted biochemical pathway, which then, you know, may decrease the pain or may decrease the inflammation, but it's it's actually causing side effects elsewhere.

Peptides actually work by setting off a cascade of healing activities. Right. And so we became very enamored with that. So, you know, using we use them on a, on a daily basis.

Right?

Trauma, Safety, and the Mind-Body Connection

BPC 157 CJC with it, but more often for growth hormone release BPC with CP bv for the orally BPC subcutaneously with GHQ for wound healing and you know, helping out with knees and things like that, and then doing things for the brain with Cmax C like that.

Increase brain derived neurotrophic factor can calm the brain down, particularly with C lag. Things like that. So we use we use peptides on a regular basis.

Now the FDA is making it tougher and tougher actually to get peptides. So we've actually, have a, a, a study, a peptide safety study that was being submitted to the IRB here in the next week so that we can actually study the peptides and their safety because if you read the FDA papers on this, they they're criticizing peptides for safety concerns.

So it's like, okay, well let's do a safety study. So now we'll have all the peptides, and we'll put them in the safety trial. So we'll be able to have access to them and people can get access to them.

And then they'll be part of the research trial. So yeah that's exciting. You're submitting that soon. Yeah. Yeah. Next week it's the it's already been built out.

We're just about ready to submit it. Great. That's really exciting. Yeah. Because a lot of those peptides can really be game changers when it comes to longevity.

And you know especially like like you you mentioned BPC 157 having you know, if you were hard on your body when when your body was younger can help repair that. Oh yeah, for sure.

It's great for recovery. Like if I'm going to go snowboarding or something and you know, you have a hard day of of snowboarding or whatever you're doing, you know, you come back, you inject BPC 157, maybe some GCC, see you with it.

And then you do some CJC with Upper Moreland to release growth them when you wake up the next morning, it's like you didn't even go snowboarding yesterday.

You just feel like perfect again. It's like it's magic. It's really it's incredible how powerful they are and how how cool they are to use. Yeah. So those are those are your favorite for longevity.

And do you, do you recommend though that that people should include peptides in their longevity quest? I think I think you really should include peptides.

I'll tell you another angle on it. And that is that we screen everybody that we see for, circulating tumor cells, for cancer. Because if you're going to do hormone replacement, you really want to know if somebody has any circulating tumor cells.

And so we're working with a company, neo seven. And we were doing this for quite a few people that we've discovered had cancer that either they didn't know had cancer or people come to us with cancer.

And so there's there's a way to use peptides there where we actually do, metabolomic and RNA analysis, DNA analysis on the tumor and then develop peptides that go in and actually modulate genetic expression of the cancer to shut down its ability to divide and do things like that.

So peptides, just so the audience understands they can be used to actually accelerate health, or they can be used to actually decrease disease as well.

Like cancer. So they really run a full gamut of of activities. Well that's awesome. So you're using you of that specific testing site because I've heard of like the gallery test.

Is this something different. Yes. Very different. We're not we're not quite honestly huge fans of Gallery. We think their sensitivity and specificity isn't where it needs to be.

You know, if a test is, let's say it's 85% sensitive and 85% specific and it comes back positive, right? Well, where are you? Right? Or if it comes back negative, well, where are you? Right.

You really don't know for sure. So what we like to do is actually look for circulating tumor cells. Because if you find them and you can still have malignancy in your body and not have circulating tumor cells, so it's not 100% sensitive.

But if it comes back with cells, you know, you have malignant cells. And the DNA of those cells can actually be basically, sequenced. And you can actually see what, what's going on with these tumor cells.

And that enables you to develop an exponential strategy and how you're going to deal with it. And so we're big fans of that approach. We do other kinds of screening, you know, people talk about doing MRI scans to screen for cancer. And, oh, it came back clear.

So you're you're clear. Well, that that couldn't be further from the truth, because you and I both know that's a resolution on an MRI scan is about two millimeters.

And you can have a whole bunch of cancer cells inside of one millimeter. Right. So, really important, I think that people understand that cancer screening needs to be done meticulously, particularly if you're going to use hormone replacement or other things.

So, yeah. Yeah, absolutely. That's a great point because you want to make sure you don't have any tumor cells, especially if you are doing something like VPC 137 growth hormone or specific hormones if they're hormone related cancers.

So that's right point. Yeah. That's right. So you you wrote a book you mentioned on how to feel 30 at age 100. Yeah. And and people are doing this. They feel that good.

Yes. Well I wake up 27 every day. Right. And so one of the key ways to go about this is to have the mindset of being 27. And I talk about how people can can hear what we're talking about here and they can say, well, that's not really possible.

I think that's just a bunch of hooey or I it's going to take time and attention, and it's going to take resources. I'm going to have to change the way I do things.

These are all excuses for not sort of engaging with the process. Right. But I think I think the most and some level subtle, but the most, tragic one is when people say, yeah, but I'm okay.

I'm okay for my age. I'm better than most people my age, right?

Peptides, Testing, and Cancer Screening

And yet, if you take that idea, it's important to understand that because it's an exponential process. You're in the Niagara River headed for the falls.

And so you may feel fine today, but you're still in that river headed for the falls. So if you don't have a strategy about how you're going to build a boat with a motor to go back upstream, you're going to go over the falls.

So in order to do that, I think a piece of it is is claiming a younger age, like I'm 27, I just I've completed 70 laps around the sun as of, this past February.

But I'm 27, and if I wake up and I don't feel 27 for some reason, it's like, well, what do I need to do to get back to 27? And sure enough, I get back to 27.

And so, you know, I can do anything I want. I ran four miles this morning. I mountain bike this weekend. I can literally do anything I want. And that's how I want to live young for a lifetime.

But if you if you wake up and you say, and I would encourage the audience, pick an age where you're at your physical peak, pick that age right and live that for the rest of your life and actually go beyond that.

And then add to it all the things we talked about in terms of the 300 year old mind, right, solving the whole life energy circle, then. Now that's a future.

That's a future to be excited about. As I see it. Yeah, you're right. It's really discouraging. I spoke today to, you know, an audience of of workers.

I was there for like a lunch and learn and I could tell, you know, people didn't feel good. They looked tired and that they didn't have energy. And I was trying to, you know, I was talking about managing blood glucose.

And, you know, I told them, you know, it's a mindset. And you, you have to have this mindset that you can feel better. I think in America, I feel like people are just so far gone from feeling good that they just like, give up or they keep drinking their monster energy drinks.

It's them. And I bet you that monster drinks are not on your longevity plan. No, no, it's not on my plan anyway. Right. And it's but it's it's astonishing, you know, it's it's very disappointing.

So I think you're right that the problem I wonder, though, do you ever have people that they're like, I never felt good because I think more and more even like these 16 year olds, you know, they're they're drinking monster drinks.

They're eating. I mean, now they're all their hormone surges and them just being young, I mean, young mitochondria. I can help a little bit. But what do you do for those people that they're like, you know, I've never really felt good.

Well, it's it's the same thing that we would do for somebody that felt good and now doesn't feel good. And that's really kind of what I call unraveling the knot.

And I think in order to win at this exponential game that we're all in, whether we believe we're in it or not, we're in it. I think it's really important to understand the cards that you're holding and then where you are in the game.

So we're big fans of doing, experience of genetic testing so that people understand where they are genetically. Right. What cards are you holding? What what are you predisposed to?

And maybe your low energy is related to the fact that, you know, you're not converting thyroid efficiently, or you're, you know, you have something else going on with your mitochondria that, you know, decreases your energy production, or you've got other things going on and that can be sorted out through a combination of understanding

of genetics and then doing testing to sort of see where you are.

How are your mitochondria working? What is your VO2 max, what's your cardiovascular system? What's your thyroid? Do you have subclinical hyperthyroidism?

What are your hormone levels and things like that. And if you put all those pieces together, all of a sudden, many times it becomes clear, oh, here's the path forward.

Right. And so we have many people that come to us that are feeling fatigued and tired and exhausted all the time. And three months later they're feeling great, like, oh my gosh, I didn't know I could feel this good again, right?

Or I didn't know I could feel this good. And so it's really it's about taking this comprehensive perspective of wanting to deeply understand it, individual before we prescribe many practices.

It's like they've got a thing. You come to us, oh, we'll do this for you. We'll do that for you. Well, that may be that may work, but it may not. So our approach is let's understand you deeply and then give you what you need.

That's the approach we take I love that. So how do people get involved in longevity and what would be next steps if someone's like, okay, I want I want to live longer, I would I would grab a copy of the book.

It's on Amazon. It's also on audible. The Kindle version is down right now. They're working with some of the diagrams and it as I understand it. But if you like audible, it's it's there.

And it's such a great introduction to the whole topic how to think about it. I go through all the different hallmarks of aging I go through. It's about 450 pages, actually.

So it's it's really people tell me it's really well-written. It's very understandable. You make the complex simple and it it really gives you a great framework to work from in terms of thinking about your own longevity.

So I would I would probably start there. We also have a podcast. The Glad and Longevity Podcast was probably about 230 or 40 episodes at this point in time.

So there's a lot of great information there. And then if somebody really wants to work with us, they can always reach out to the website. Blood and longevity.com, and we'll be happy to chat with you.

So those would be the ways. Yeah. No that's amazing. So what can be done for a small investment that someone could do now. And they'll get that large investment later on.

Yeah I mean I think the first thing, that somebody can do is in this, the cheapest thing to do is to take a look at your life and what are the things that are poisoning you, right?

Is it too much smoke, too much tobacco, too much alcohol, too much sugar, too much whatever. And start there. People want to know what should I add in?

What should I do? Well, the first thing you really know dress is what should you take out, right? What are the things that are actually sabotaging your health?

And that's that's the cheapest place to start, quite honestly. And it can pay in and of itself, can pay big dividends. As you know, people can feel a whole lot better when they clean up their diet and things like that.

The other thing is, you know, manage your sleep better, go to bed earlier. Going to bed an hour earlier is worth two hours of later sleep. So going about an hour earlier trumps sleeping two hours more.

In the morning. So, you know, sleeping in a dark room in a cool place, you know, lights out, not looking at screens ahead of time. So if you just if you just orchestrate some of these things, you can actually start on this pathway

without spending a nickel, quite honestly.

Just organizing that and then claiming your age, you know, I think all progress is basically made by the questions that we're asking. So the problem with most doctors is we get trained in a particular way, we have a set of answers, and now we want to apply those answers to people when they show up and we stop asking the questions.

What saved me was when I started asking different questions, right? And so once I felt great again, I started to ask, well, geez, I wonder how good I can be, right?

And so that's one of the questions that motivates us here. How good can we be? And then how do we make 130? How do we live well beyond 120? And how do we live young for a lifetime? Those are the four questions.

So if you're listening to this claim in age, go back and claim that age and then think about the questions that you're asking. Like if you were to apply that to yourself, how good can I be?

What does that actually mean to me? Start writing that down. What would that look like? How good can I be? What do I want to do there? And then start working into that, answering those questions and realizing that if you find an answer, it may work for this next decade, but you're going to need a different answer in the next decade.

You have to be willing to adapt. Never get married to your answers. Only be married to your questions. And that's also free. And that will also help carry you forward.

So really key stuff. I love that because a lot of people, they just think everything's expensive. You know, peptides, supplements, all the testing. But like you said, there's so many things that are free or can take little effort, like the sleeping.

That's what I need to do. I was just telling my husband that I'm like, I need to go to bed earlier. I need to not care about the PowerPoint deadline I have.

Do I just need to do that? That's great. Now, why did you specifically pick 27?

Living Young for a Lifetime

You said, yeah, that's a that's a good question. Well, being 100 is a new 30. When I thought about it initially, I picked like 33 or 34. Then I thought, you know, I was in medical school at 27.

And I feel about like I did it when I was 27. I'm so excited to learn things every day. I'm reading like a maniac. I'm absorbing new information. I'm creating new programs, research projects, etc.

I feel like I'm 27, so it's like, no, I think I'll claim 27. And then there's a there's kind of a funny reason, which is that I'll be 27 for the next decade, and then when I'm have gone 80 times around, the sun will be 28, at 90, I'll be 29, and then at 100 I'll be a 30.

So it's it gives me a chance to have a little headroom to grow into being 30. So I love it. That's a good idea. I'm trying to think now which age I should claim.

I don't know, maybe I'll start younger, but. But when I was younger, I had my autoimmune stuff going on, so I don't even know if I felt that amazing. So also think about the thing about that.

Maybe just start with what did you actually feel your best? I feel like now I do okay, I don't agree. You know, I, I don't know, it's hard because I think for me it's stress.

Like, I know my biggest thing is stress and sleep and and that's the thing we're always kind of working on it. But the past year I've really worked on feeling safe and, you know, prayer and I, I feel so good about that.

You know, I don't get as rattled. I had someone tell me, I can't believe all of these things happened to you in one day, like with my business and with my kids and my other kid.

And I'm like, it's all going to work out. It's just it's supposed to be. So that's helpful. But I still stress is still there. And unfortunately that's such that's really going to ramp up the aging process.

So maybe I'll think back. Maybe my age will be when I had no cares in the world. Really. Pick that age. Pick that age. What age is that? 12 I know, probably high school, right?

I mean, like you were talking about in high school, that's when we all think that we are invincible. I mean, now that I ate bad or anything, but, you know, you're just so carefree.

So actually. Yes. Thinking back, this is funny that we were talking about this maybe before all my thyroid stuff happened. Okay. Yeah. So maybe age like 15, 14, 15.

Yeah, yeah. Because that's when my autoimmune disease, tipped off. And looking back, it was probably excess antibiotics a little bit. And some are, that but but yeah, I mean, I do agree with you that every phase in our life, though, is for a reason.

And I'm grateful for for all of that and all that. Yeah, I would, same as you. I would not have gone into integrative medicine except my health stuff.

But my health stuff happened earlier, so, Yeah. No, it's it's a it's a great story. You know, when it comes to stress, I will just add this and that is that one of the insights that I've had is that there's nothing external to us that can ever make us feel safe.

So there's no there's no amount of job, there's no about, you know, the right relationship, your kids doing well. All that stuff ultimately can never make you feel safe.

So then you realize that, you know, loving ourselves unconditionally is kind of an inside job, and then us feeling safe is also an inside job. And so then you ask the question because it's all about the questions, you know, how is it that I feel safe, right?

Regardless if everything were taken away, how would I still feel safe? And that becomes really kind of a spiritual question to your point. And so then there's a question of, okay, I'm going to feel safe and I'm going to give myself safety.

I'm going to scoop up my little three year old self and give them safety. But I'm also I'm also going to connect spiritually and feel the safety that comes from that alignment.

And when you have that as your base and you're not dependent on things going right, or things going this way or going that way in order to feel safe, all of a sudden now you have a real base to come from, and now things are just representing opportunities, right?

There's nothing bad out there. There's just opportunities. Something changes, something happens, whatever. It's a new opportunity. And so when you start to see everything is an opportunity and not a problem, that really lowers stress because and now you're safe because internally you've already got this solid core.

Right. So that's kind of how I think about it. Yes I love that. And that's beautiful because you know it's all about mindset. And you know, I do recommend people do a gratitude journal.

Right. And like it's going to change how you think about things. Like you're grateful for everything you have. So when something bad happens or you know, you can't compare your life to other people and you're just going to feel like bask in that gratitude and that will lower your stress and kind of make you feel safe in a way, too, I guess.

But, you know, I, I would like to ask you what you think about, you know, technology with longevity because some of the technology is good, but some of it, like people being on their phones and having notifications all the time, some of that is terrible.

Yeah. No, I think, it's interesting. Right? We're coming into the age of AI and we're we're leveraging AI heavily here in our practice. We've been working with AI for about five years now, and we have some really cool things that we've developed that are coming, coming forward.

But there's so much there's so much pollution right between the phones and computers, the screen times and all this sort of thing. That I think it does have an impact on us.

Getting Started and Working with Gladden Longevity

And I think, quite honestly, I think there may be people in the future that say, you know, enough is enough. I just want to go live on a farm someplace and, you know, have my garden and and have my clean water and, you know, live, live that way.

For the rest of us, I think it's going to be, you know, about modulating the time that we spend with these devices and then having things that protect us from the EMF and, you know, altering the screen and wearing the glasses to protect our eyes and things like that, you know, trying to mitigate it.

Really. Unfortunately, we live in a toxic world, and we can't we can't get away from that. So understanding your genetics of how you detox and what you're susceptible to, and then how to optimize your detox system becomes really massively important also to deal with it. So yeah.

So that's a great point. I mean I, I do wear an aura ring and a little bit of EMF but lots of data. So when I do take breaks from it. But yeah, so awesome.

It's just been so great learning about longevity with you and your expertise. And you know, I'm excited to see, you know, like you said, you're just aging one year at a time now for the next few decades.

So that's exciting. That's right. Yeah. One year, a decade. So that's that's the idea. Yeah, exactly. It's super fun. Yes, I love it. Now, how can people work with you and do you have any events coming up?

Well, we, if people want to work with us as a client, they can go to gladdenlongevity.com and reach out to us. That way, we'll we'll reach back out to them.

We also have a supplement shop, the Gladden like longevity supplement shop. If people are looking for certain supplements that we would have found to be particularly helpful.

And I'm also getting ready to launch a Glide Longevity longevity certification course where we'll be teaching, practitioners. Basically how we go about things, what our methodologies are, etc.

we've got some very sophisticated approaches to playing this symphony of longevity, and we found that putting certain things together and in the right sequence can make a massive difference.

It's not just about stem cells. It's really about how you clean up the system and prime the system before you put the stem cells in and how you support them after they go in and things like this.

So we're able to do remarkable things with brain health, gut health, heart health, lung health, long haul Covid hormone replaced. And, you know, most of the things that people deal with.

And then we're also going right after these drivers of aging. So it becomes super, super interesting. So people want to work with us. Those would be the ways. Yeah.

Awesome. That sounds great. Well, thank you so much for for being here today. I love talking to you. Oh, great. I really appreciate the opportunity. Generous. Great talking with you too.

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