## Introduction and Dr. Parpiau2019s Background

Hi, everyone. Welcome back to the Peptide Summit. I'm your host, Dr. Jen Pfleghaar. Today we have Dr. Nafysa Parpia, and she is a board certified naturopathic doctor and doctor of naturopathy medicine at Gordon Medical.

Throughout her career in holistic medicine, she's focused on treating patients with complex chronic illnesses. She specializes in tick borne illness, Lyme disease, environmentally acquired illness like mold and mold, toxin illness, mycotoxins, illness, autoimmunity, fibromyalgia, a long haul Covid and ME/CFS, which is chronic fatigue syndrome, chooses cutting edge laboratory tests and deep intuition applied to a full range of scientific data to create comprehensive treatment plans that are highly personalized.

Her targeted systems of care includes a synergistic blend of regenerative medicine, oral and intravenous micronutrient therapy, peptide therapies, botanical medicine, pharmaceuticals, injection therapies, and functional nutrition.

Dr, Parpia is also on the ISEAI Board of Directors, which is the International Society of Environmentally Acquired Illnesses and is a scientific and medical advisor for Neuro Hacker Collective.

We have such an expert here today. Welcome to the Summit. Thank you so much for having me. I'm so happy you doing this Summit. It's such an important topic. Yes.

So tell us a little bit about how you became a naturopathic doctor and how you are so passionate about chronic illnesses. Yeah. So I became a naturopathic doctor a long time ago.

I was I'm going to make a short so I can spend more time talking about the peptides, but in general, I was working, I was working in fundraising. It was paying my bills, but I and my heart was.

And I knew there is a healer in me. I knew I wanted to work with people at their very, very depths of of of everything mind, body and spirit. And, and I had to find, find my niece.

And where am I going to meet these people so that I can help them? And how am I going to do that? So through a long exploratory process, I realized that it was naturopathic medicine.

And and then when I was there, you know, we're trained to be, naturopathic general practitioners. And of course, I enjoyed that. And I'm so grateful for my training.

It's excellent. but it didn't train me to deep to treat people with the complexities that I do today. I learned that from many different sources. I spent a year under mentorship at Dr. Dietrich Klinghardt's Clinic, where I learned a lot about Lyme disease and the detoxification therapies.

And then after working with him, Dr. Isaac Eliaz, who a lot of people know here, hired me to, to head up the Lyme and mold and chronic illness division of his clinic there, the patients there.

So I focused on those patients there and learned a lot from Dr. Eliaz on how to treat, how to detox appropriately. So that was maybe ten years ago or something.

And so then I put together what I learned from those two and made it my own. And I've been at Gordon Medical for the past, I think eight years, something like that.

So it's been it's been a long time working with these patients and it's just such a joy. It's such an honor. And privilege to be walking my path. Yeah. That's amazing.

And the chronic illnesses, it's it's very difficult because these are things that have been going on for decades. And you're trying to like, unravel everything.

And this is a delicate process. So can you share why you use specific peptides in a specific order in regards to these complex, chronic illnesses? Yeah.

So I created a methodology by which to use peptide therapies for these patients who have complex chronic illness. And so I got the peptide certification.

## How Peptides Fit Into Complex Chronic Illness Care

And over the past five years I've been doing a really, really deep dive in understanding the peptides and using them on my patients. What's really amazing is patients who it used to take maybe 3 to 5 years to recover from their chronic illness.

It now could take six, 8 or 12 months, typically. So it used to be a really long haul. It's still a long haul, but it's way faster. So this is why I love the peptides for chronic illness because they make everything go quicker.

So patients are still coming to the clinic. They're getting a multitude of therapies. It's not only peptide therapies, but they augment everything else that we do.

So I want to talk about the way that I think about complex chronic illness first, because when I discussed that, that's when I'll be able to weave in why I use the peptides, in what order.

And for what reason. So I tell my patients, there's five reasons that people get sick infections, toxins, diet, lifestyle, structural integrity issues.

And now I know you're so aware of this. And I just want to explain a little bit more to our audience about what these what these are a little more specifically.

So infections. My patients have a multitude of infections and in different states of their body. So if we're talking about Lyme disease and co-infections, those infections love the connective tissue and the nerves.

So we can have infections in those sites. in the microbiome, in the sinuses, dental. So tick borne diseases, bacteria, parasites, funguses high viral loads.

Our patients have a slew of all of these infections chronically toxins I'm talking about metals particularly mercury lead arsenic aluminum cadmium things like glyphosate, microplastics, structural integrity issues a lot of patients have tissues that are too tight.

They're not getting enough circulation or, if the tissues are too loose, then that laxity becomes even worse. By then, elementary chemicals that these patients are creating in their body and then lifestyle it includes it includes stress.

It includes trauma. It includes sleep. So these are the root causes that make somebody sick. And the interesting thing is functional medicine talks a lot about root causes.

Right. We're going to remove the root cause. Then you're going to get better. Now for these patients removing the root cause first typically doesn't work.

So they've got this these five root causes and many more spokes on the wheel. Right. That create inflammation that is nonstop. That inflammation then creates secondary issues.

These downstream effects, particularly. And an immune system that's confused immune system dysregulation. They've got a hyperactive immune system and a weak immune system at the same time hyperactive meaning they've got autoimmune conditions.

They've got mast cell activation syndrome weak, meaning they can't mount the appropriate immune response to kill those infections. Those multitudes of infections that they have.

That's the confused immune system I'm talking about. And then we get those other diagnoses chronic fatigue syndrome, fibromyalgia, long Covid. Right. So it's about inflammation means the genes.

But when I'm using peptides I'm typically coming in to work on that. That immune system, the confused immune system first. When I can get that in order quickly, then it becomes much easier to detox and treat the infections.

So starting with that immune system, then I'll come in and I'll start to detox the patient if it's if it's warranted. And however that patient needs it done and then treating infections often comes in as well.

So I can use peptides to treat most of these root causes. But I'm also using them typically first for the downstream effects. Yeah, I love that explanation because it it's so complex and you have to do things in the right order.

You have to do things correctly or you might not see the results. And I think that happens to a lot of people say for, for Lyme, you know, they might go to someone and they're like, we're going to put you on all these antibiotics, but they haven't worked on the those other things first, like their sleep, like their gut microbiome.

And then they could actually do a little bit more harm. So what peptides do, could you give an example. Maybe if someone came in with a specific chronic illness, what peptides you would kind of use in a specific order.

Yeah, absolutely. So most of my patients come in. A lot of them have a diagnosis of chronic Lyme already, or they have no diagnosis, but they've got mystery symptoms.

They've got wandering pain throughout their body, in the joints, in the muscles. They have brain fog. They have GI issues, they have muscle fatigue and they have chronic fatigue as well.

So then some of these people do have a diagnosis, long haul chronic fatigue syndrome, fibromyalgia in some way that doesn't even matter because I need to understand what's going on with them biochemically, what's going on with their genes, and make the other diagnoses that are contributing to the way that they're presenting.

So I'll give you, I'll give you an example of a specific patient. There's I mean, all these stories are very, very similar, but something about one, one woman in particular, she has my patients who are listening.

You probably are saying that's me because you're all so similar. Right? So she has, LAX ligaments. Highly, highly lax ligaments. Okay. So, double jointed joints will pop out easily.

cranial cervical instability.

## Case Example: Mast Cell Support and Connective Tissue Repair

Not so severe that she needs surgery for it, but enough that there's laxity in the ligament here that, that, that that holds up the brainstem. And we see that on the, on the MRI. And so.

When, when we get ligament when we get laxity in the ligaments here, then and there's muscle activation syndrome, those mast cells that chemicals from the mast cells will tenderize the ligaments and make that ligament drop and create more pressure in the brainstem.

Okay. So we have a lot of patients who have this issue. The lax ligaments, the tick borne illnesses. She also had high mercury just in the blood from eating too much fish, and other environmental toxins.

So the first thing I did was give peptides that help modulate mast cells. So KP V and Alexa Knox I love those remodeling mast cells. They helped, most other patients, if they don't have the laxity, the ligaments starting with those helps a lot with the mast cells with calming down that hyperactive immune system.

But when I gave her GHQ, which is a peptide that helps with, with connective tissue, with stabilizing connective tissue, that's when things started to drastically change.

So prior to giving her to giving her any peptides, actually, you know, I saw there is there was there was some tick borne disease. And sure, I wanted to treat it, but just with my newt amounts of antibiotics because she can't handle absolutely can't handle regular dosages, it'll put her in bed and debilitate her.

So microdose is really of deoxy cyclin and GHQ peptides and a lot or a lot of other treatments for detoxification therapies. And she went from pretty much, having to be in bed all day to be able to function, to be able to work, to be able to have her life back.

Now, had I not had GHQ to give her to help with the connective tissue issue, it this would have taken so much longer. So it's really about using the right peptide for the right person at the right time.

That was such a great example and probably super helpful for those learning and listening at the summit. Now, can I ask you what form of KVP you gave?

if it was oral or maybe a spray? And then for the copper, what what form did you give for. Yeah. So kp v I, I gave it as a spray okay. So an oral spray.

I haven't been able to, to get a hold of the injectable for a little while, so. But the spray works really, really well. The spray from integrative peptides.

Now I want to give a little warning out there to some people okay. Because to people because there are some people who when they take KP v they don't do so well, they need other peptides prior to taking the KP v to be ready for that kp v, because the CP of has antimicrobial action against Staphylococcus and against Candida.

So I've had some patients who they take the KP v and they feel horrible. And I think that's because it started that antimicrobial action against those infections, which they have.

And they weren't ready to treat infections because whenever we treat infections we get a flare of of inflammatory cytokines. The patient needs to be ready to handle that flare. So, you know, before I give KP VMs often giving TB for frag to calm the immune system first, then will we, then KP v and then I might give him a 57 or the GHQ that was injectable form.

Nice nice. And for those listening also I, I love this talk so far because it's it's not just like oh that peptide looks like it fits with my symptoms.

I mean the take it. It's really good to have a guide to guide you through using these. And that kind of brings us to, I guess, another great question for you.

What are the pitfalls of peptides? That's such a great question. And I think there are there are quite a few actually. just like any medication, any supplement that we can take the right one at the wrong time.

So timing is critical. dosage is important. So there's standard dosages when we see this all over the internet. Right. So we see stacks recommended by people who are not doctors all over the internet.

And for people who are sick. Yeah, exactly. For people who are sick, it just I've seen that backfire all too often. So I people need to be working with somebody who's trained, who's experienced, who knows their peptides and who knows how to work with patients who have, well, in my case, complex chronic illness.

Right. Knowing how to weave the peptides in and out, how to make it specific for each patient. So the other pitfall is peptides, which we can just get from the internet.

We don't know where they're produced. We don't know if they're produced in the pharmacy. So at the pharmacy

they have been processed and cleansed in a very, very particular way.

And, and repeatedly in order to make the peptides bioavailable. So when they're from the internet, a lot of the times that process isn't as thorough. So the peptides aren't as potent as well.

There have been instances where mercury has been found in peptides that have been purchased from, from just over the internet. So sourcing is really important.

I'd say those are the major pitfalls. Oh, and using it the wrong time. I've had patients who've come to me and they said, well, I started with Thymus and Alpha one and well, the patient I say that just thanked me and made me feel horrible or I did well on it for a month or two months and then it made me feel horrible.

Well, this peptide is one that starts a kick up the immune response. Now, if somebody has an autoimmune condition, I'm not rushing to use that one first.

Right? I'm going to introduce the peptides to calm down the immune system first, because before I'm going to start giving some thymus and alpha one slowly by missing alpha one.

## Pitfalls of Peptide Use and Immune Modulation

It also has big anti-microbial effects on a multitude of different types of infections. So it might cause, a person to start to deal with their long term chronic infections.

And they weren't ready for that. And so this makes me think about another thing. So I had a patient say, I want to treat my infections right now. Right. The thing is that's that's in the acute model of care.

If someone's got an acute infection, you know, I want to treat that infection right here, right now. Right. If it's chronic and we apply the acute model of care under chronic illness, that doesn't work.

And so that's another instance of people using to one because they've got this chronic infection. And the doctor giving it to them or the person themselves.

Like I've got an infection that I treat it like it's acute. No, we don't want to like treat it like it's acute. For the reasons that I discussed earlier about the root causes, creating the inflammation, creating those compensations, the secondary effects that we want to treat first.

Yeah, that's such a great point. I love you're talking about a lot of the nuances which are so important with peptides. What are your favorite peptides for immune modulation.

And and can you explain to the listeners what exactly that term means? Yeah, I, I, I have a way that I like to describe to my patients about, about the way their immune system misbehaving. So now earlier I talked about the immune system being confused.

It's hyperactive on one hand. So I'm talking to patients who have autoimmune conditions. That's a hyperactive immune system. Talking about mass activation syndrome.

Are you having someone talk about Marcel on the summit? not specifically, no. So I'm glad that we're going to be getting into that a little bit. Okay. So I'll explain it a little bit to our patients.

So our mast cells are a type of a an immune cell which are responsible for for creating inflammation appropriately. When we have an allergic response or a sensitivity to something, it could be, I tell my patients, imagine you're allergic to to grass.

You go outside and somebody is mowing the lawn, and then you have, itchy eyes and a runny nose and hives. That's your mast cells acting to create inflammation.

We want that inflammation to be temporary. And it's happening to to help you, deal with the insult. Then you go away. You leave, the grass and everything resolves.

Well, with our patients who have mast cell activation syndrome, the mast cells are releasing histamine and a repertoire of over a thousand other chemicals nonstop.

So their muscles aren't a hair trigger. It's not just, oh, I'm allergic to something. Oh, I'm sensitive to something. It's that they're sensitive to almost everything.

Things that things that maybe they shouldn't be sensitive to. Different. Different, smells, different foods. For instance, even broccoli. Right? Or even blueberries. We.

Those aren't common allergens, but these patients are allergic to everything under the sun. Mast cells exist everywhere. Not just in the skin, not just in the eyes, in the nose, but that they line our nerves.

They're in the brain. They're in our bones. So our patients will feel symptoms everywhere. And it's not just skin deep, doesn't feel like an allergic reaction anymore necessarily.

So that is an example of a confused immune system. If the mast cells are thinking everything is danger and then behaving as though they're they're in danger constantly, the immune system is doing that.

That's the hyperactivity of the immune system and the weak immune system. So there's danger. The immune system is trying to fight, fight, fight, fight.

It can't do it right. Yet there's there's so many chronic infections and it count. It can't melt the mount the immune response to kill those infections.

How can that be? That's that's a dysregulated immune system. I tell my patients it's like having an untrained fighter and trained boxer in the ring. He's throwing the kicks, throwing the punches, but in the wrong direction, in the wrong sequence and at the wrong person.

With autoimmunity, it's being thrown at yourself. That's a dysregulated immune system. So when you ask when you ask about modulating the immune system, I want to bring the immune system back online.

I want to regulate it so that the hyper activity is calmed. I'm starting with that first with certain peptides, and then when the time is right, I'm bringing in other peptides to then then strengthen the the part of the immune system that we need to be strong enough to kill the infection.

So it's making that that boxer in the ring know how to fight, if that makes sense. Yeah. That's such a great explanation. And this is more common than you think.

And people just don't know that they have this problem. It's it's very frustrating for patients that have this. And it takes a lot to come these things down.

And a lot of the times people with mast cell illness, you have to calm down everything. The inflammation, the immune system before you even unpack. What is the trigger for their mast cell to begin with.

So what peptides would you use for immune modulation? Okay. So it's very often that I'm beginning with t before. So t before is wonderful for calming down the immune system.

It it really is. And most patients don't have an adverse reaction to this one. It stimulates the production of our T cells. So we get improved immunity.

And it's really it has a lot of anti-inflammatory effects. And it works to calm down the the the hyperactivity in the immune system. It also helps with neurological recovery in the central nervous system and the peripheral nervous

system.

And that's amazing. Now that's been shown in studies of rats not yet in humans, but I have seen T before Frank help humans with with the nervous system when given in conjunction with other things.

The next one I love also is KP v. We talked a little bit about it before, but it has huge anti-inflammatory effects and it's it helps, calm the mast cells.

And like I said, it's got anti candida and anti staph aureus effects as well. And then there's Lex and Alex I'm Lex Knox I have to get from the compounding pharmacy.

It inhibits the release of histamines and leukotrienes from mast cells base of fills and neutrophils. And it's used clinically in Japan for the treatment of people with bronchial asthma and rhinitis and conjunctivitis.

Those are amazing.

## Mast Cell Support, Gut Health, and Infection Treatment

And so some you could maybe get without a prescription and then some. You said you had to go to the compounding pharmacy so that that would be something that you'd want to work with your doctor with.

Now for immune modulating immune modulation. And then mast cells, they're pretty similar. Which peptides you're using for both. Do you have any other favorites for for mast cell.

You know those are my favorite too. The Cfpb and the like snacks are my are my two favorites for mast cell. But I'm also combining it with mast cell medications.

Could be Cromwell and for the person could be for the right person Ken Todd often could be hydrazine. Could be Cipro hep to Dean if they got issues in the gut.

So it depends on the patient and it depends on, well, the dosages depend on the patient as well. And the combinations depend on the patient. I can't I can't not talk about BPC 157 and La Raza tied actually for the gut because no BP 157 is 57 is peptides.

Golden child. I know that everybody on the summit is going to be talking about BPC 157 now, when I first started to use the peptides, I wanted to give everybody this one first. A lot of people loved it.

And then there were some people who said, that just wired me. It didn't allow me to sleep or they had an adverse reaction. It it caused too much tingling.

I don't know why. Actually it causes it might cause tingling in certain people. I've got to think more about that and talk to talk to some, some people who make peptides to find out what they think.

But yeah. I wasn't let anyone have that. I guess when you talk about it, could you talk about the forms that they were getting the tingling because I've used, you know, the injectable BPC 157 more for tendons, ligaments, that kind of thing.

And then the oral is more for the gut health. also like BP C 157 eyedrops for dry eye. I mean, so many amazing ways. So I guess yeah, I'm really curious what so what were people getting the tingling.

So that was just with the oral capsules. And it's not everybody. I won't be clear on that. I'd say it's like 5% of my patient population. I think they can't handle that.

Those those who can't handle the oral and the oral is very specific for the gut. The spray is is the oral spray is more for systemically. And yes, it helps so much for pain when it's injected locally.

especially in, in the, in the, in just just subcutaneously, just underneath the skin or trigger points, in the muscles of the neck for people who have cranial cervical instability, by the way, GHQ injected subcutaneously over ligaments, not not into the ligaments, just over can can really, really help the connective tissue a lot.

So yeah, it was back to the BBC. It was just the oral BPC that in a few people it was too much. So now, you know it has something to do with their gut. Why?

I don't know that that's what I'm going to be on a hunt to figure out. but but BPC is it's amazing when given in, in, in, in injection form, just subcutaneously in the abdomen.

It helps incredibly for overall inflammation in the body. So there's so many ways to deliver it. And yes for eyedrops, for dry eyes, for irritated eyes.

after I, after I got the Covid vaccine, I had a vaccine injury in my eye. I, I had an autoimmune condition show up in my eye and BPC 157 really, really helped me heal that autoimmunity in my eye as as well as access on my eye drops.

So there's a lot there's a lot that we can we can do for our patients with regenerative medicine. I mean, really. And then La Raza tied for the gut. I love that that peptide as well for the gut.

That helps with leaky gut very, very specifically. So it helps prevent, the, the tight junctions from, from becoming loose from insults to the gut, right, insults like pesticides from non-organic foods or a lot of antibiotic use or some people, a lot of people gluten.

So the other has that that helps with that. And it also helps with reassembly of of the of the junctions once they become damaged. So that that's an important one.

Yeah. That one is kind of newer. I feel like I just started using that within the last few years. And yeah, your tight junctions are supposed to stay tight.

And because of the toxic soup we live in, all the environmental things, they they become damaged. And that's when you start having those autoimmune like diseases, especially like we were talking earlier.

I'm in the Midwest, so glyphosate is everywhere. It's everywhere. So I have a lot of patients with leaky gut and. Yeah, lorazepam. It's been helpful with, and and don't worry, all these names of peptides and letters and numbers will start rolling off your tongue.

The more you listen to this. it seems like a foreign language at first, but, it does. They've got funny names, right? Yeah, yeah. Well, let's keep going.

Let's talk about infections. What peptides do you like for infections? There was one that I like, but it's really hard to get. you know, I'm sure it's the same on your list.

Which one is that? the the L 37. Okay. It is on my list. And we'll talk later about about. That's on the the other. Yeah. Yeah yeah okay. Now. Yeah. So to one and L 37 those are my two favorites to help with when it's time when it's time to treat the infection.

So so I'm starting off by calming down the immune system first right. With all those that we talked about. And then we come in and introduce to one and then L 37 very very slowly.

And it low low dosages because I want patients to be able to have a sense of how, a sense of what their ideal dosages, because the ideal dosage for these sensitive patients is going to be different for each person.

It's not going to be the standard dosage that you read on the internet. So to one, this directly affects the immune system in order to strengthen it to kill the infections.

So it also has antiviral, antifungal and antibacterial properties. So I love this one. This again this one we don't want to come in. Don't use it too fast because it's going to kick up that that immune response very quickly.

It's going to start working to kill infections very quickly. And we want to make sure that you're ready for that. Before we do that. L 37 I love it because it is cytotoxic to a variety.

So toxic means toxic to the cell of a variety of different bugs. It has broad spectrum effect. It's great for those patients who have tick borne diseases, parasites, funguses, high viral loads. So I had a woman who had aspergillosis in her lungs, and she had it for 20 years, 20 years.

And there'll be times and it was subside and then times of her life where she would just be laid out in bed. And it was awful, just awful. Couldn't breathe. Had to stay indoors.

And, using the peptides helped so, so much the way I've described tailored to her using other things as well to modulate the immune system of their mast cell modulators.

And and then finally, when it was time to use to one an L 37.

## Neuroinflammation, Sleep, Hormones, and Strength

Will it went away. We did it. We did a sputum culture. No more aspergillosis. I mean. There was nothing. She had tried to get rid of this for two decades.

So these peptides are incredible. It surprised me even I, I mean, so pleasantly surprised that the peptides work. Magic really. Is amazing. And her immune system was finally like, oh, hey, yeah, that I do need to get rid of that because it gets so confused.

So yeah, that's amazing. What a great story. Yeah. So those are your favorite for for infections. what about neuroinflammation. Because of a lot of these chronic illnesses you see they have severe neuroinflammation.

And it and it really affects their quality of life. now actually working with the mast cells to begin with early on in treatment helps out a lot because mast cells do line nerves.

And so we find that the treating treating the mast cells often helps with the neuroinflammation. But the neuropeptides that are specifically directly acting on on the nervous system, they don't work early on in patients who have complex chronic illness.

Okay. The thing is, if you need a neuropeptide, chances are you do have complex chronic illness. And we need to investigate why you've got that issue right.

But, my favorites are Sealink C-Max through Burleson by Hexa and, again coming in towards the end. They just don't work sometimes they do. I mean if someone sometimes I have patients as I have I just, I have horrible, horrible brain fog.

Please give me something now. And I tell them, you know what? I do have these neuropeptides and Chester, they're not going to work right now because we haven't treated your infections, we haven't detoxed.

You haven't even modulated your immune system. I've met you for the first time. They're like, please, can I try? Well, you can. Sure. It's not going to do you harm.

Okay. Usually they don't do harm, but they often do nothing early on. Now, some people have tried it early on and they have noticed a difference. So, you know, maybe 25% of patients are.

So when they try tried early on it makes a difference. So sometimes it's worth a try. Yeah that can be difficult because I but with peptides I feel like when they're used correctly they are kind of like a wow thing.

where and there's certain supplements like that too, where you'll be like, oh wow, I really notice a difference. Or if you were really like magnesium or vitamin D3, it's there.

So simple. But if someone's truly deficient, it's a big wow moment. And that's the thing with with peptides. I think the great part of this talk is just talking about they need to be used in the correct manner.

also you need to be optimal elsewhere, you know, have that inflammation down be optimal, make sure you're sleeping well and then they'll work better because they are expensive.

I that would be one of my pitfalls of peptides is that they are there. They can be pricey. So you want them to be doing what they're supposed to be doing to go in as that, you know, chains of amino acids go in and turn on or turn off those switches.

They need to do so that that is something that can be confusing. But that's why there are people out there to to help you figure it out. Right. You mentioned sleep.

Sleep is just so important when our body heals. It's when our body detoxifies naturally, if we're not sleeping where it typically then in sympathetic overdrive.

So I also like to use peptides for sleep. That can help a lot for sleep. So the combination of delta sleep inducing peptide epithelial on and CJC can help a lot for sleep.

Now I also like epithelial to help regulate the the hormonal system because with these patients that are hormonal hormones are way out of whack. Right.

So I'm also, giving them bioidentical hormone therapy if it's needed, testing it on the lab, giving them the appropriate dosage of that. But just a low dose of that, the Fallon can make that can augment, that can make it even more powerful.

You don't want to give too much epithelial on if somebody is on bioidentical hormone therapy. Just a little but it helps. It helps, regulate the hypothalamus in the anterior pituitary and the hypothalamus a semester regulate, regulator center for the hormones. So, those are some other peptides that I love.

Also. Oh. Go ahead. Yeah. You brought a CJC, and I think that's great. I had a great case with this on someone that was, you know, basically disabled after, Covid vaccine injury.

And he was starting to, to walk better and do a little bit better. But he needed his strength back. So he didn't want he he was really he still is resistant to going on testosterone.

But but the CJC it was really great for him because it helped him build up some muscle mass and that gave him strength. And he was able to go back to the activities he needed to do.

So that's where, you know, we have our toolbox of all these things, which is so great. We have actual pharmaceuticals, we have peptides, we have supplements, we have bio regulators.

And for each person, because everyone is different and their circumstances different, even with all these chronic illnesses, you know, one chronic Lyme patient is not the same as another.

So that's why it's so great to be able to, like, pull out special things out of the toolbox and use them at the correct time. Absolutely. And that's what's interesting, right?

Like you bring up a very interesting point. One person's line is not going to be the same as the others. And in in the acute care of, of acute model of care medicine, there's one cause, one diagnosis, one treatment.

And it's the same for each person. And that's the case with, say, broken bones or heart attacks. But it's not that

way with complex chronic illness at this point.

It's your own stick to own. It's your own. And and that's why these patients have their own symptoms. Then we have symptom similarity. But boy, each patient that comes to me shows up in their own specific way.

And that's where we have to untangle everything. And it takes really getting to know each patient, understanding who they are as a human being. And in that, like before, even using the peptides, that's the first thing I want to do.

Who's sitting in front of me? Who are you? How do you want to walk in the world? What do you how do you see? How do you see your life after you heal? What's your vision?

Some people don't even want to know that yet. They're like, I'm not even really think about that because I'm too sick. I'm afraid of what's going to happen when I get better.

So it's just meeting each person where they are. Some people, some people, they want to think about those things. Some people not at all. They're not ready for that. So using the peptides and knowing who the person is, meeting them where they're at, because each person is an individual, is an individual expression of illness, of health and of life.

And that's the honor and beauty of being a doctor, isn't it? Working with these people? Yes, it's it's amazing every day. the the other point to with peptides is you also have to look at the person in front of you because some people will not do injections, even though it's just like a little, little subcutaneous insulin syringe.

So sometimes people will not do that because some of these are dosed, you know, could be dosed a couple times a day even, you know, like moxie and stuff like that.

## Personalized Treatment, Case Study, and Clinic Info

So I think that that's another thing, looking at the person in front of you and you know, what form can they use and would they be happy with? So, I just I have loved our conversation.

Is there any other case studies you would like to share with us? Because I feel like those are the best. I love listening to them. Yeah. let me think of one right now.

So many. I mean, it's amazing how I see the peptides shift people very, very early on. And so I'm able to come in and treat their illness that their root causes early on.

So here's a patient who, who is who's overweight. And it's not because she doesn't eat. Well, not all her diet is pristine, clean, clean, clean. You can't get cleaner than this, okay?

Her diet, organic, whole foods base, nothing in a package. you know what I'm saying? Super clean diet. And it has been this way for years. She's had recurrent C difficile.

She's had, tickborne infections. She has mast cell activation syndrome. And this patient need a combination of many, many different things to work, right.

She's not overweight because of her diet. This is about a highly inflamed system in not adequate drainage. Right. And so it took it took, actually having some, some work within structural integrity first.

So we have an incredible healer and body worker. We have two of them at our clinic. And, and being able to open her pathways, her drainage pathways first, being able to work on her nervous system first as we allowed her to be able to be more responsive to the peptides.

So this is an example of somebody who, no matter what I gave, nothing would work, including peptides. Okay, so then she sees our healers and body workers and now she can handle the peptides.

And I do everything else I need to do to to treat everything else. I need the multiple infections, the mast cell, the, the the the environmental toxins.

And life is a lot better. She hasn't had a C difficile infection in a long time either. So, it really is about when to use the right thing for her. It wasn't that peptides.

where the wrong thing is that they kind of did nothing until I could open up the drainage drainage pathways. Now, peptides to help her lose weight. Peptides.

And she is losing weight. And, she's feeling a lot better. So that's another patient story. And it's about order of treatment, which is different for each patient.

Yes, I love that example. And KDF is difficult to get rid of. So here it is the layers that you were working on that. That's great. Well I have loved everything you've shared today.

I think everyone can take away learning so much about peptides today. how can people find you in your clinic? Where do you like to hang out online on social media?

Could you please share that with us? Yeah. So we're at Gordon Medical. It's gordonmedical.com. People come to us from all over the country all over the world.

They come and spend time at our clinic. They go back and forth. Some people come for longer time. Some people shorter times. We're in the San Francisco Bay area and, we do a lot of online events.

Those are posted on our Facebook page, which you'll find it it's Gordon Medical and we have an Instagram page where, you know what our online presence, with social media isn't that huge, but it's there is there's a it's not a big part.

but you can find us at those places and our website, gordonmedical.com. Awesome, I love it. Thank you so much for joining us today. Thank you so much for having me and for doing this awesome Summit.