Introduction and Phil Micansu2019 Background

Hi, everyone. It's Dr. Jen. Welcome back to the Peptide Summit. Today we are speaking with Phil Micans. He has qualifications from the UK and the USA in Food and Vitamin Technology, Pharmacy and Biochemistry..

He's been actively involved in preventative and regenerative medicine since the late 1980s and has contributed numerous books, magazines, radio and TV shows on the subjects connected to healthy aging.

Currently, he's the Editor-in-Chief of the Aging Matters magazine, the assistant editor to the Lifespan Medicine Journal, and advisers to the British Longevity Society.

The Stromboli Conference on Cancer and Aging, and the London Antiageing Conference. He's also the moderator of Profound Health Summit that will be in May. In 1991, he co-founded the IAS Group, an organization dedicated to the dissemination of preventative and regenerative medicine information and the supply of hard to attain health products, and has created the profound Group, which formulates and produces innovative nutritional products.

And I was joking with Phil saying that he is the OG of bio regulators and peptides, so I'm very honored to have him here today. Welcome. Thank you Jen, it's absolute pleasure to be on your channel and with all the good folks who are watching at home or in the office, maybe some people who work.

Yes, absolutely. Well, how did you even get into anti-aging and peptides and bio regulators? Okay. Well, that's kind of two slightly different questions.

the first one, how did I get into anti-aging was twofold, and I think one of which is quite often said by people, the first one was, as I was a teenager, I always thought that I was aging faster than my friends.

for various reasons. And it kind of was a little seed in my brain, I suppose, about what is aging and why do some of us age differently from others, even if we seem to have the same habits?

You know, the same exercise, food or whatever? Why? What is the difference? So that was a kind of intriguing thing. And the other one was having to, one day or a few days, having to go and see my uncle, in the hospital, who'd, taken a fall and hurt himself.

And he was, I think, at that time, late 70s or maybe just touching 80. And it was a real eye opener because, of course, because of his age, they put him in the geriatric ward.

And I'm sure most of the guys out there know that that word only means one thing. Actually, I know the public have a different perception of it, but of course, being geriatric means being 65 or older.

But of course, the public think of anybody being geriatric as being somehow incapacitated in some way. So it was a bit of an eye opener to me to be sitting next to his bed and, you know, having playing cards or chess or chatting or whatever it was we were doing and looking at many of the other people that were in this ward who were, you know, enjoying a second childhood.

And, and of course, you've come out of those places thinking, oh my God, I, I don't want that in my future. And, and so, and I have a little proposal to make to anybody that can do it is before kids leave school, send them to two places, one to a jail to see what life in a jail is like.

So maybe they'll come home and saying, oh, I don't want to go to jail and might change the course of their lives. And the other one is let them go and visit a geriatric ward, because they might turn out to be the next brilliant anti-aging doctors of the future.

You know, fighting this, this thing that we're all trying to avoid. So those were the two things. Now fast forward and then after I got into nutrition, and that was a family reason because my eldest brother, was very interested in cutting edge nutrition.

and he in the 80s, early 80s, in fact, was going to America and meeting people like that. Pierce and Sandy Shaw and, so Ken and Bill home from life extension and he, he got very interested in the whole longevity side of it.

And so a little bit later on, they said, well, you should learn more about drugs because there was a demand then it is for certain types of medicines in the field.

How Phil Entered Anti-Aging and Peptides

And finally, because I found myself reading a lot and listening a lot and traveling to different places, it was about 2009 when I went to a conference in Istanbul, and I heard Professor Vladimir Khavinson and for the first time talk about peptide bio regulators.

And as we'll discover, you know, this came out of Soviet research in the 1980s and 90s. And it was a light bulb moment, you know, an epiphany where after he'd finished his lecture, I was riveted to my seat.

I remember there being a coffee break after his lecture, and I didn't leave the whole I was kind of glued to my seat. And honestly, I'll tell you honestly, at the time I thought, well, either that's one of the most brilliant things I've ever heard you know, because we don't always accept things the first time we hear them, of course.

And it was about a year later, and of course, I went back and I started reading more and finding out more. And about a year later, I had the privilege to meet him again, this time in Brussels, where I managed to have a one.

Yeah, take our time with him. And then it sort of started to sink in. So I must admit, it was over the course of about two years that I really got it sunk in.

And then I had the honor afterwards of going to Saint Petersburg in Russia and meeting the people at the institute, and I started becoming involved in getting this information into English.

Now I don't speak Russian, so I point that out straight away. But, you know, with translators, I was able to get the gist of this, and that's why. And so that's where and it just exploded from there.

Sorry, that's a long answer, but that is the answer. It's so fascinating. And I think that's really interesting how you were a child and thought that you were aging faster.

That's very into it. Of and I like your ideas of having your kids go to the jail in the geriatric ward. And I think that's the problem is that these kids like coming out of high school.

They think they're invincible. They're drinking all these energy drinks, and they're like, well, there will be medicine to fix it all. And no, you will be one of those people at the geriatric ward that is not have a quality of life.

And this is what anti-aging and longevity is about. It's about not the quantity. Because we can do that in in America, in the UK. But we're talking about the actual quality.

And that's what I tell my patients. I'm like, I know it's hard wearing a continuous glucose monitor and doing these peptides and doing these protocols, but you want to be playing with your grandchildren and, you know, taking them to the park and, you know, being active.

That's what we're trying to accomplish. So, you know, everyone's got their own goal, their own you know, their own whatever. Personally, I don't see anti-aging as everyone looking like Angelina Jolie or Brad Pitt.

That's not my vision of it. My vision of it. Oh, I wouldn't mind. They said that, but I mean, but but my view of it is we

want to achieve three things fundamentally, to be lucid, to be agile, to be independent.

If we've got those three things, we can lead normal lives, and that's what we want. You know, at the end of the day. so I hope we can I hope we can achieve this.

And one of the problems of course, that we face in society, two, two things, I think one is that allopathic medicine teaches us that one problem, one fix.

And as we all know, most of that is masking the symptoms and not getting to the course as we most of us know. And secondly, when we are young, you know, you've got your whole life ahead of you.

You another month. Yeah. I don't know about you, Jenny, but I think up to about the age of 30, I did think I was immortal. So, you know, I think most of us go with whatever the marker is when you realize it isn't.

But most certainly somebody who's 20 years old is is is not thinking about what's happening next year. Never mind in another decade. Yeah, I agree there.

Thinking about. Yeah the next day and I agree I think if someone has a a diagnosis or symptoms that aren't getting fixed, sometimes they will be more apt to really dig into these kind of things like peptides or if they have a goal or a training goal.

But yeah, the average person is not going to think about that. But that's what I want to change. I want people to start thinking ahead and you mentioned, you know, the celebrities.

That's just Botox and filler. A lot of that and plastic surgery, I, I was joking with my husband, I'm like, yeah, you think those people look good? I'm like, I want to look at their telomere length or very, very good.

That is a brilliant point. You've made that because there have been instances in my career, and also I can talk from the Saint Petersburg Institute where you look at individuals.

Oh my God. I mean, the the big one I can quickly tell you about is in, I can't remember the year who, 210 or the London Olympics anyway. And somebody can look it up. Yeah.

I think it may have been 2012. And the winners of the women's gymnastics were Russia, and they won the gold medals. And these. And there's a great picture of all these young ladies standing there with their coaches.

And in the middle actually is Professor Vladimir Khavinson and they're all wearing their gold medals, etc.. Well, they actually published a report on this because what they showed with those young ladies, I mean, how fit have you got to be to win a gold medal in gymnastics?

I mean, you're in top of the game on it. And of course, you looked at them and you said, My God, that fit. But actually it hides what might be going on inside.

To get back to your point. And these girls, you know, 20, 20 year old girls, they actually had the telomere length. So 40 year olds. And it's a although I'm pleased to say they were corrected and it was partly through these peptide bio regulators.

And they also do the same with their cosmonauts because they come back from long periods in space. And of course, despite them exercising in space now, they still are very weak.

And so they try very hard to get to induce protein synthesis to get them back up to speed, as it were. And so I think we all know that a little stress is good for a whole basis, as it's referred to is good, but excess anything is bad.

you know, I always say that the curve is either a you or it's a you inverted curve, and you always want to be in the middle. You know, if you drink too much water or too little water, what happens.

Right. You always want to be optimal in the middle. And so whether it's cosmonauts or whether it's people doing extensive extreme exercise, you can lead to damage.

And that may not be visible on the outside. And the classic version of that, of course, is anybody who does intensive aerobics, I don't know, like a marathon runner.

As an example. And we've seen this. We used to do arterial stiffness testing and a lot of people. And so we saw it on, you know, long distance runners, particularly guys who were a bit older, you know, in the 30s or 40s or older because they don't.

This is a different story, actually. This this leads me off into the realm of doctor Rich Lipman, who's a pretty radical expert and wrote a fantastic book called stay 40.

If anyone wants to find it on Amazon showing the older people who engage in extensive aerobic exercise are doing themselves no favors and it's also a fact that those kind of athletes don't live as long as the average person in society.

So, you know, and so we've got to think about that and either change one's habits or give yourself the protection, in this case would be free radical scavengers, of course.

in order to continue doing it. So, you know, we do change as we age and we need to be aware of that, of course, and adjust our lifestyles to suit. Yeah, those are great points that I in sitting here thinking back, I'm like, yeah, you know, in my 20s, when I was in medical school, I went through the craze of running half marathons and I'm like, wow.

So I was under extreme stress from medical school, and I was doing this training that that was smart.

Quality of Life, Health Pyramid, and Aging Goals

But and that was in medical school. But no one's going to tell me that stuff. And that's why we have to kind of leap outside of conventional medicine, you know, sick care to to really just keep our we have to advocate for ourselves and that's, that's why.

We I've been up to more health as a pyramid. So if we think of a pyramid, the base of the pyramid is the stuff you have to do a lot of on regular, you could call it the common sense.

You know that you eat right, you exercise, you de-stress. You know, all the all those good things that we we all need to do on a very regular basis. But as you go up the pyramid for optimal health, you may want to do other things.

And I think the next obvious layer, which I would call the additional layer would be detox, you know, do you go and take sauna? Do you, you know, maybe there are certain supplements or foods that you'd want to eat in order to achieve certain goals?

and of course, avoiding certain things as well. And then further up the list, you might start saying, well, I'll, you know, I'll start taking some minerals and vitamins and, and as we get up the bit that we're, we're probably most interested in, where you perhaps need to be working with a health professional, you might start looking now at hormones or peptides or stem cells or whatever other emerging technologies are going to come up.

So there's lots of things will fit into those categories. But I maintain that if you're doing something from every layer, you probably have the best chance of having an optimal health spend.

Yes, and that's exciting because it's easy things that we can do and learning is part of that. So what exactly are peptide bio regulators? Okay. Sure. Absolutely.

You're absolutely right about learning. It's it's a life is a never ending learning experience. And if I ever meet anybody that tells me they already know everything, the first thing I'll do is leave the room because, you know, it's a stupid statement to make, obviously.

but okay, pet, sorry. Back to your question. So peptide buyer regulators are by definition short chains of amino acids. So, principally Soviet and Russian research.

When I say Russian, this is Russian speaking countries. So this includes places like Kazakhstan and the Ukraine. So I'm not going to go into the politics obviously.

But that's a fact. That was under the Soviet regime. All those countries were kind of merged that and short chains of amino acids. Two, three, four now, interestingly, it was the very famous Ivan, Pavlova who everybody knows was made the dog salivate when he rang the bells.

Okay. Well, he was the actual man who originally discovered short chains, amino acids. Right. And he was in then in I'm talking 20s and 30s now. He was in the Saint Petersburg Institute for Bio Gerontology, which is where all this other research has come from.

So that's no accident, I think. But if you fast forward to the 80s, I'm sorry, I'm jumping slightly ahead here. But when Vladimir, Kevin's son, got a call one day from the Kremlin and they said, listen, there are some nasty battlefield weapons, like a laser that would make anyone seeing it go blind.

And also we have submariners and we have people sitting in nuclear silos who were literally aging fast. Now, that may not be it too difficult to work out if you're in a Russian submarine sitting on the floor bed for six months, not too far from a nuclear reactor, you probably wouldn't be too chuffed about that.

So they asked. But they actually said, find something that will help these guys that that was the impetus. Okay? And I think it wasn't an accident that when they looked back and they said, well, Pavlov looked into the short chain, peptides, what can we know more about them?

And I think that was the impetus to do it. So that's standing on the shoulders of giants, right? That's how we progressed. And so they're short changed two, three, four amino acids.

And what makes that interesting is they they're nano in size and they survive stomach degradation. So the interesting thing about these peptides and and we remember one thing they're found in different foods.

Right. They are part of the epigenetic in my view part of the epigenetic messages from food to our genes. And that of course, is what the institute has uncovered, is that these specific short chain peptides in there are 21 that have been identified so far, at least commercially.

Anyway. and they gene switches, so individualized gene switches and of course they were different peptides. If you look at meat for example, some of these peptides are in the different glands.

So you can get a liver peptide or a kidney peptide or a thyroid peptide and so on and so forth. And some people have suggested that since our societies have become so fussy about what we eat, you know, we won't have to go back that far.

Maybe a hundred years, maybe less, where none of the animal would be wasted, would it? I mean, you know, in my country, in England, the Edwardian had recipes for cooking testicles or, you know, all offal and all sorts of things that today we wouldn't entertain or even simplistically, oh, I wouldn't eat the black meat of chicken.

Ooh, do do do I bones. Who stewing bones for soup no longer do. But actually I think we've missed out. and what we can say now is we're not getting those peptides from those food groups that are instructing our bodies, our genes, in order to do whatever the tissue Auckland it's involved with.

So it's something really fundamental. And if I may just mention, the Russian studies, of course, have been in animals as well as humans. Some of the largest studies you will ever hear of in humans.

So we're happy to talk about that. And quite recently from the University of Tel Aviv. And not that not a few months old, they've been using it in plants, specifically strawberries.

What Peptide Bioregulators Are

And they're finding that the strawberries are given certain peptides, produce something about 30% more fruit than those that that and that number 30. And a Kevin said used to refer to it as a biological reserve.

He said every cell has around 30% reserve. He also used to equate maximum lifespan of 120 with the average of, say, 80, as also not activating this reserve.

That was one of his theories. so what we can say about these peptides by regular is they're fundamental. They use by plants, they use by animals, they use by humans.

That's awesome. And I was chuckling when you were talking about how we don't like to to eat the whole animal anymore. And I actually I'm going to try to make my own cat food out of the chicken back, like I was going back and forth with our farmer.

And I'm like, what could I freeze dry for? Because I got a freeze dryer and I'm like, what can I do for the cats? But you don't see all these animals walking around with autoimmune disease, right?

Like these big lions and tigers. Well, and then they start getting sick if they're in the zoos and they're like doing all sorts of stuff to them. But, I mean, you're you don't.

Want them to eat the wrong kind of food. Dogs don't. You know, before we came on the scene, were wolves hunting around for canned dog food? No, I don't think so.

I've got to tell you one quick story. I hope you don't mind. I did one. Of your. Until. I hope everyone will bear with me. If not, then go and get yourself a cup of coffee for a minute. but, a friend of mine some years ago now, he breeds poodles right at a very high level.

I mean, he's had his poodles in Crufts, you know, a big dog show in London. And, you know, he can charge, like 20,000 pounds for a dog that's like $25,000.

you know, he gets a lot of money. And so that's his bit him and his wife. That's what they do. So one day he phoned me up kind of out of the blue. And his name is Michael.

And he said, Phil, I'm a bit desperate. I said, what's up? He said, we've got two poodles that have come out of a litter from two prize winning, you know, dogs and the dog and bitch.

And they're not doing well. In fact, it's turned out that they've got, gout. It's too much uric acid in them. So he said, and we've been to the top vet in the country, which is in Cambridge in England, and they've said, listen, these dogs need dialysis or they need, you know, a kidney transplant.

And we don't do that in the UK, apparently. So they were saying the only option you've got is to take them to America. Well, it's not going to happen is it's just not going to happen.

So he said to me, what can we do? And I said, well, listen, I said, I have got I really I love dogs, but I've really got no idea about their biochemistry.

But if you were a human being and you said, listen, is there any simple thing I can do to lower my uric acid level? I don't want to take a drug, right?

I would say eat cranberries and or dark cherries because there's a specific acid in there which I've forgotten the name of this moment in time, which, as you may know, helps to excrete the uric acid through feces.

So anyway, long story short, they went out and they bought they bought big bags of dried cranberries and they went into their kennels. I don't know. They've got probably two dozen dogs or something.

And they came in with a regular chow and they came in with the cranberries, and they put them down on the ground. And he said it was amazing. He said, every dog, of course, had a look at the new food that came up.

What's this, you know, and had a good old sniff. None of them touched it except for the two dogs that had the problem, and they devoured them. All right.

That's so. Cool. And I'm very pleased to say that those of went on to lead a normal life. So much so that when they sent a video of their dogs to, to the vets, they didn't believe them and they had to actually bring them in to have their tags scanned.

They didn't believe these dogs could be leading, that they should be dead. And Michael said, the only strange thing about the dogs was their poo was black.

But I said that that must be a sign of the uric acid that's coming out. That's all I can imagine. But the point I really wanted to make in that rather lengthy story, I'm sorry, is that I think we have that ability that animals can sense what's good for them and what's maybe not good for them.

I think we have it too. But for various reasons, we've lost most of that. I agree with that. And we shouldn't always blame ourselves. I mean, we're up against like in America, you know, all of these big food companies that are putting all these addictive chemicals.

So you think that you're craving something, but you need to check that craving. And, you know, is this true? And I, I love this, I'll go on a little tangent.

The story. So after I had my my son Emery, I was just craving broccoli. I because I feel like with his pregnancy I was really in tune with nutrition and I ate excellent.

He was a big baby to lose 10 pounds ten ounces. Which is funny because I was far for I wasn't diabetic. I was actually eating amazing. That reduced my carbs a couple of weeks before I had him.

I was craving all this broccoli and green juice. what is broccoli do? It helps detoxify those toxic estrogens. And you know, I was like, that's so cool.

Like, I would literally feel like cook an entire serve like a family serving sizes of broccoli and just eat it with butter, grass fed butter and salt that interesting.

Yeah. Yeah. And I was like, this is so cool. My body just knows what. So yeah yeah, yeah. And you probably because you were pregnant. Probably an extra special reason.

You know, we've got we've got somebody else to help here too, you know sort of thing. So no, I think we know for example I'm sorry I'm getting we're getting off peptides.

Okay. But there's been studies where electrodes are being put on the back of the brain. This set the so-called horse brain back here. And they people have been put in the rooms and read a book or whatever.

And there's a one way mirror and they just monitor, and the electrical activity goes up when people are looking at them. But you don't know if anyone's looking at you because you can't see anything.

So we have it how our forebears are walking through the jungle with a no saber tooth tiger looking at them. They

started running before they saw it because they got the signal.

So I think those those things are that. But but we've lost them. But to come back to peptides, you know, is something fundamental in food. In fact we helped to write this book here, excuse me and reach over, which we, we called peptides in the epigenetic control of aging.

And that's our science book on the background to all of this, how they work, why they work out. Because they the amazing thing about this is that these peptides are going directly to DNA.

They're not going to receptors, they're going directly to DNA. And the Russians have some of the most incredible slides you'll ever see. You have to put 3D glasses on to see them.

And then you see the DNA and then you see these. They're like keys really. They just come in and they interlock. And then they either activates or silences the gene.

And that actually is the most unbelievable part of peptide. By that I just I just mentioned, we also wrote this public book called the Peptide Bio Regulator Revolution, that one which people seem to enjoy because it's a quick read.

but the because by regulator. What why did the name by regulator come up? Well, I don't even think it's being quantified yet, but I always give thyroid as an example because it's a nice, easy one.

As you know, many people now are hypothyroid. it's quite well known. A few people, of course, are high per thyroid.

Food, Animal Health, and Bio-Regulator Examples

if you were to take the thyroid bio regulator peptide, mostly if you were hypothyroid, it will activate the genes and you will start to produce more thyroid hormones.

Okay. But the crazy thing about this is because you say, well, it's okay, I can take T3, T4, maybe I even take desiccated, you know, glandular porcine extract, which of course is quite popular now as well.

And you say, yeah, of course you can. But the thing about putting a hormone in you every day is you must monitor yourself, right? Because you're throwing a hormone in and you must.

I'm not saying you shouldn't do it with a peptide either, but the fact is it puts you. It's like an adaptogen. That's a way I like to say it puts you within a certain band.

In fact. Question of the day. Do plant adaptogens work because they've got short chain peptides in them? Could be I don't know, I've not heard it, but I just put it out there for you if that piques anyone's interest.

But it's a bio regulator because if you're too low in thyroid, it will activate the genes. But if you're hypothyroid, it silences a it brings you down into a banding.

What else does that? I mean, that's too weird to how I want to get our heads around, but they are the fact from the studies, right? I just had to explain that to a patient that I'm helping with graves disease, and she is on a bio regular protocol for that.

And also other peptides to rebalance her, teach one and teach two immune system. Now of course we could add a being a being a recovering pharmacist. I probably should add that, of course, if anyone's on, any other medications, they should monitor even more closely because in such cases, there will almost certainly be a need to reduce the dosage of the drug.

maybe depends on the circumstances and blah blah blah. Come off it all together. Thankfully with thyroid, I like the thyroid one because it's nicely. There's a very easy way to do it and that is of course take your morning

temperature when you get out of bed, see what you got, and then you can see the increments point by point, one degree Celsius, up or down, and you can titrate your dosages according.

That's the old fashioned way of doing it. Before there were, before the blood test, of course, but everyone can do that. Yes. And and that's a great point you brought up about the desiccated thyroid is.

Yes. That it it's it's pig thyroid. Right. It's porcine. And you do get a little bit of bio regulator activity in there because but. Yeah you. Can't give it to graves but you can't give it to graves patients because you're actually having that T4 in T3. Because I was telling her about, you know, she was asking.

She's like, well, I'm having hypo symptoms and I'm like, you have at your labs, you're hyper and you still have graves going on. And she asks, she's like, well, why can't I just take the desiccated?

I'm like, you know, I had to teach her because the bio regulators like you said, they're they're adapting. You know, they're turning on those genes to heal the thyroid, not just to to mask it, not just to push it to do more.

But that's right. I of course, we should point out at this stage that in order for any effect to occur, you must have that gland or tissue, right? So if somebody has had a thyroidectomy, the peptide is not for them.

Then you kind to have to go down the medicine route, right? Because that's just the way there are three peptides. I'll just mention guess what the testes peptide in the prostate peptide.

Guess what. Don't work in women right. And the ovary peptide doesn't work in men. Big shock right. But just but they're the only three right. And what you could do is you could if if someone doesn't have a thyroid gland because it had to get removed because conventional medicine failed them or because of cancer or something like that, well, you can look at the, you know, pituitary bio regulator or the adrenal.

So you can look at you can make something around it. Supporting supports it. That's very true. That's very true. Some of the most popular by regulators.

yeah. Thyroid is popular. the adrenal is very popular that that's pretty some of them, of course, in some respects work, if that's the right expression, faster than others in terms of having an effect.

So adrenal, thyroid, pancreas, they're very good. the most fascinating blood vessel, by the way, is synergistic with all of them. I, I interviewed Kevin said a few years ago and I, we talked about about 20 different problem states.

And he said he recommended three peptides for each one, every single, you know, to get an A synergy effect, every single one, a blood vessel. But it's not really a big surprise, is it?

Because if you're improving blood flow and delivering nutrition and removing more toxins, it's pretty much going to help. Everything is so. So that was that one.

But the other, the other one there. And in my book, the most fascinating one is the pineal peptide. because of course the pineal is this kind of, dare I say, mysterious gland at the center of the brain.

Anyway, that could be doing all sorts of interesting things. But as we as the Great Wall to poorly. doctor Watervliet. Paulie from Italy, who was a melatonin is a melatonin expert.

It's still going, and, he, he once said to me, and I've always remembered I've loved this quote. He once said to me, Phil, you know, think of the pineal gland as the conductor of the endocrine orchestra.

He said that what happens if you have an orchestra and you have no conductor? Should you make noise? But when you have a conductor, you make music. So we all know about the release of melatonin in circadian rhythms, what have you.

But I would go further. And this is backed up by the work of doctor Bill Lawrence in America, which we can get into, of course. and I'm sure one day, if you haven't already, he'll interview him.

but I think it is the pineal peptide that is principally responsible for extending telomeres. And certainly Bill's 150 patients. He's shown that that they all and and also, improving DNA methylation although other peptides may be involved in that.

I'm not saying but I think if you ask me is there a standout peptide. I would have to say it's the pineal. Yes, I love that. Now, can you talk a little bit more about the 30% reserve?

Because I think that is is such a cool point that these bio regulators. So they're going in there, they're actually affecting the DNA. They're going right in there and doing that.

And they're tapping into that potential basically. And that is what is helping with the, the telomeres. And like the organ regeneration you hear sometimes with biotech later use.

there is something obviously occurs in aging where mechanisms at or the methylation or whatever you want to look at becomes sluggish. That's, that's let's call it that.

and there are new and there's another side story here, which is a is a mind blower, but is not directly related to peptides, but heat shock proteins. I suppose I should tell it really, shouldn't I?

I don't want to leave people in the lurch. So there's an Italian surgeon. His name is Valero. The cola, and he's published on this, you know, and then this is University of Rome.

DNA Signaling, Thyroid, and Organ-Specific Peptides

And some years ago they came together and they said one of the problems with joint and hip replacements, some very elderly and some very frail people are not allowed them because the operations are too dangerous for them.

So they said, what? How can we help these people that that was the raison d'etre. And over the course of five years, they discovered a way. They extracted, ten milliliters of blood from the patient, very small amount.

And overnight. And this is where all the work went. And they heat and cool this blood. They torture the blood, if you will, and it releases its heat shock proteins.

Now, I've seen the end result with this. And it looks like a bit of red trigger, you know, what they then do, let's say it's a knee. The surgeon makes small and I'm talking three millimeters.

Very small cuts. And he's cutting. He or she is cutting where the myosin Como stem cells reside. So that's a knowledge that you need to have. They don't pierce the capsule.

They then into this top. You know I mean I always say to people you have worse cuts if you fell off your bicycle. Right. That tiny arm, they really three mil.

They then put back in your heat your concentrated heat shock proteins. Right. And then they one, two stitches. Job done. So you come in in the morning and you're off for lunch somewhere nice.

You know, it's not a big thing. Now some of his patients come back a second time. A few of them come back a third time. Right. But here's the amazing thing they followed up on in the published clinical trial, which you can find at PubMed.

There are 400 patients in that trial right. But he's done a total of 2000 last time I spoke to in 2000. And this is people aged. But this isn't all young people.

This is people aged between say 40 and 80. Right? Every single one of them negated the need for a knee or hip replacement. Wow. That's amazing that cartilage regrowth.

And you say, oh, how did that happen? Well, these heat shock proteins sent the messages to the mice and Como stem cells to say, hey, wake up, get on with the job.

What the hell are you doing? And I think in a similar way, I'm sorry I'm being so base, but, in a similar way, the peptides do the same job. It's simply a wake up call to go and get.

And it's marvelous because what we're talking about here is truly regenerative medicine. We're just giving the impetus to the body to go and do what it used to do very well.

20 years ago. Right. So I think that's fascinating. So we can't do that. Yeah. And drugs can't do that. And there is a cartilage. There is a regulator. Yeah.

And there is actually a cream version of it as well which most people don't know, which we call joint pro. But that's a topical obviously. So that's and there's also now another area that people are getting very excited about, although we're not quite there yet is dental products.

I mean, there is already a mouthwash, which is very interesting. And of course out of Japan and also Taiwan, we're beginning to see actual teeth regrowth. Oh, wow, that's a game changer, isn't it?

Because I've always maintained, why shouldn't we get a third set of teeth when we hit 40? Oh, something, you know. But the fact is, it looks possible.

It seems to be possible. So, who knows where this is going to take us? Who knows? Is there anything we can stimulate? Can we regrow our hair? Can we get our eyesight back? Can we?

You know, I mean, who knows where these. But peptides right now, I know it's the buzzword right now, but I think they're going to carry us for the next ten, 20 years.

I think we're going to hear more and more and more about this subject. Right. You definitely got to get on the train now because you'll be ahead and you'll be ahead of everyone.

You thought practicing the cutting edge of 21st century medicine really good. Yeah. And and the amazing thing is they're safe. Yes. Are safe. We know. Yes.

Again, it could be because of their bio regular. For example, I give example every now and again I get a bodybuilder contact me and say fail. How do I get my testosterone levels sky high?

So you can't win by regulators? Because I don't know what you're doing, but you're probably already doing some other things right where you're pushing your testosterone.

And as accordingly, the bio regulator is going to say too much testosterone. Yeah. And it could even silence some genes and actually try and bring his natural testosterone production down.

So these are not suitable for people who want to get to some kind of super logical level, but then pretty few and far between, I think. I think most of us would just enjoy having a healthy level, but but I've certainly seen plenty of men who have done before and after, just to get this example, testosterone free testosterone test.

And they all enjoyed improvements. And then people say, well, how long did these improvements take? And I would say it generally takes between 1 and 3 months.

It of course it depends on you, your condition, you know, and of course how much of the dose you take. But the other great news is when you when you're using natural bio regulators and there is a difference between them and

the synthetics.

So I'll be happy to get into that. And the Russians called them cool the natural system Maxis and they call the synthetics site gens. The trouble in this game, of course, it's like learning a foreign language as all these new words.

I mean, that's probably the problem with medicine in general. But anyway, so with that, they have quite long lasting effects, which is why in the majority of cases, the 8020 rule like you take two capsules, naturals, you take two capsules a day for ten days each month, right? And you don't need to repeat it.

So this is not something that you have to do every day, which could be the case if you were taking a hormone, wouldn't it, for say, thyroid, for example?

now sometimes if there is a medical need, the Russians will give the patient two capsules a day for 30 days, and they call that the intensive course. Of course, in the clinics over there they use injections as well.

Okay. But you know, but they send and they always send everybody home with the capsules. I mean, in Professor Svetlana trophy motha, who has an AI clinic in Saint Petersburg which is called the Tree of Life.

Go look it up. It's in English as well. What they do there is more than remarkable. And they treat some eye disorders. I mean, just to give one example, and we did do a book about this which isn't in front of me, but we called it the eyesight side is, again on Amazon that there's different things in that book we talk about different, but there's a chapter on her work in peptides.

And one thing they actually able to reverse that which we and if anyone knows, send me an email or something because we are not aware of any clinic in the world who can do this.

And that's retinitis pigmentosa. And this is a rare, thankfully mainly genetic disease where people go blind. But she has numerous accounts of people.

I mean, I'll just give one example. There was one elderly lady. So you've got this topological computerized image of the eye back of the eye. Black is no vision at all.

Red is bad, yellow is so-so, green is fine. And in one eye this particular lady was 99 0% blind. Okay. And over. They gave a ten days of injections. How did they injector?

Well, they subcutaneously injected into the skin around the eye.

Regeneration, Heat Shock Proteins, and Eye Health

So into the orbit of the eye they just do these little pinprick. So they did that for ten days. And then they sent her home and they said take two capsules every day.

Okay. And I think she came back like a year later because she wasn't living in Saint Petersburg. It's a huge country, Russia. And she came back and the follow up, topological computerized scan, probably a name to it and I don't know it.

she was 30% blind in the eye. Now, that may not sound like a hero situation to some people listening, but to take somebody from Betty basically being almost completely blind to being partially sighted changed her life completely.

She could see the grandkids, she knew where the furniture was in the house, blah, blah, blah, blah, blah. Now, if you catch it earlier, you know, not because that's extreme, but if you catch it earlier, results are much better.

So and that's not the only thing they do. They. Yes, they do. You know, cataracts and yes, they do. macular degeneration etc., etc. but I'm just using that as an example because we don't know of any other place in the world

that could make that kind of going.

No, not at all. And that just shows the incredible healing power of our body with the right tools, with these bio regulators to to tap into that healing.

We say, sorry to interrupt your Jenny. I will say one thing. Okay. What we're talking about here is a hand-in-glove situation. What what on earth am I talking about?

Well, you still need the materials, right? So the genes can give in this. Peptides can give the genes instructions. Those genes are still looking for the materials to go and rebuild protein or whatever the situation is.

So I always liken it to a building site. You know, if the men are there. but the the boss hasn't turned up with the blueprints, but all the, you know, cement and windows and everything else.

He said the job isn't going to get done properly and vice versa. If the boss turns up with the blueprints and the men are there with the materials, not much is going to happen either.

So it's still a case of making sure that the body is getting the right materials, and then you're now getting those gene switch switches and bang! That's when the magic happens.

Yeah. So that makes a lot of sense. And that goes with making sure you're sleeping well, eating well and stress. Like let's just touch on stress for a little bit.

That is something that you know I was talking with Bill Lawrence and he said that, you know, one of his people in these studies, they had a horrible year of stress and their telomeres were lengthening, and then they just stayed the same that big year of stress.

And I was like, that's because, you know, I'm a mother of four. And I feel like I try not to think of things as stress, but stress is big. I it. Is. And a lot of us who I don't, I'm, I'm a country boy at heart.

But those of us who live in the big cities, I think we don't even know that we're under stress. Right? You go out on the streets and you dodge people, and then you head off an air trying to park the car somewhere, and you don't.

And the bad air and all that, and you don't realize you think it's normal, but it's not normal. It's not until you go on holiday and lie on the beach for a week that you realize, oh my God, I really was stressed.

And there's no doubt the number one way to shorten your telomeres is stress exhaustion. Right? But I was wondering, I'm like, well how I bet you with like horrible stressful year.

You know, if you know, people's parents die, you hear of all these things divorce, job changes. I mean, I wonder if those telomeres would have shortened, you know, and they stayed the same with the bio regulator.

Very, very, very interesting. Well, what we can say is that the the girls in the Olympic teams and the cosmonauts in space, that's what happens to them.

And yes, they are improved when they get back much, much faster when they take the peptide bar regulators. And that's why all this remained so military secret for many, many years, because it was a way of making their troops superior, if that's the right word to use.

So and it goes on all the time. I don't think they're the only ones doing this. You know, in my career, if ever I've heard the words, this was a so-and-so military secret, I've always gone, tell me more.

I mean, to give you one example of that, the drug modafinil or modafinil, if you prefer to say it like that, which has revolutionized the treatment of narcolepsy and cataplexy, was a French military secret.

Right. So all and the American government and British government, and I'm sure many other governments are all doing the same. So but of course, they're always ahead of the curve, right?

There would be doing stuff now that we don't know about, but who knows, it might leak five years from now, whatever. It might leak out as as George Bush once said, trickle down economics.

Well, maybe we've got trickle down medicine as well. All right. Well, like you said, they're at the cutting edge because they they really need to protect the health and and optimize everything.

So definitely agree that that's. Tell you a story that was told to me at the a forum. I met with a For an American Cut event, which was held in Vegas in December.

I was over there. I met two American docs, who are dealing with the US military, and they told me that this is not, unique to the US military. I think it's happening pretty much across the board.

And they said they have a big problem. And I said, what's problem? He said the youngsters that are coming up through the ranks aren't the same quality that they were ten and 20 years ago.

They haven't got the stamina, they got the strength and got this. They got that and they see a weakening of the military. So what they're actually trying to do is encourage the older guys because, you know, one of the things about being in the military is you you end up retiring quite early at 50, 55, something like that.

So they're trying to encourage the older guys and gals to stay on a bit longer to make up for this deficit. And so they're actually actively interested in finding ways to make the troops their older troops, as it were, both more physically and mentally more fit.

So there we go. Yeah, I heard about that too. And it's it's kind of crazy. I mean, we're we're not doing good. There's a lot of stress. There's a lot environmental toxins, there's a lot of things that are aging us prematurely.

So that's why we need to use these tools to combat that, along with colors of health like sleep and nutrition. So, it's so cool. I love I could talk to you all day.

I love your stories and tangents and all your expertise. And if you guys have never heard of Phil Micans I mean, just just Google his name and so much amazing thing comes up.

So I love what you're doing for bio regulators to. And then tell us a little bit about your event. Yeah. Oh thank you. yeah. So in England, on May the 25th and 26 this year, that Saturday, Sunday.

So the weather shouldn't be too bad either. we're holding a, a very intimate and luxurious event, called the Profound Health Summit. And, we've had in the previous one, we had the Russians come over.

Stress, Military Interest, and the Profound Health Summit

Now, I have to admit, on this particular occasion, they're not coming over, but we have a lot of very interesting speakers. It's not just peptides, I'll say that now, but our aim is to put on a conference or seminar, whatever, with two aims in mind.

Well, three aims in mind, I suppose. One, we ask all the speakers, there are no CMAs we have. Why? Why haven't you got any CMAs said, because we don't want to be restricted.

I want the speakers to tell us exactly what they think. Right. Tell us what you think. Tell us what you know. Don't be restricted by anything. So that's one thing.

Secondly, we give the speakers plenty of time, plenty of time for questions and all the rest of it, because people want to learn. They've come there to learn not to have an idea and go.

So we hope. And thirdly, and we got this many years are the other main reason people come to such a conference is to network. Yes, they want to listen to speakers, but they want to meet their fellow colleagues and to network unique time. Right?

Not running from one lecture hall to another lecture hall, as the case may. So we have one speaker on that. So how do we achieve that was very easy. We're all in the same building.

We all have breakfast together. We all have lunch together. We all have dinner together. And everybody, you know, the speaker is not on the stage. And then flying home, they're there for the weekend. So sort of 150, 200 people.

And we'll limit it to that. And it will mean you have the opportunity to meet every person that weekend. And so that's and we also hold it in a five star resort hotel, which gives a little bit of luxury and all that, you know.

So anybody bringing their spouses along and they don't want to go find they can play golf, go swimming, go cycling, you know, go to the gym, whatever.

Right. So so if anyone wants to look it up profound-health-summit.com, and you'll see it all for yourselves. And Bill Lawrence will be there. By the way, we spoke to that Bill.

and Bill was going to give his first lecture on how his patients, got some organ regeneration going on. I haven't even got those details myself yet, so I'm very much looking forward to that.

Well, that will be such a treat. And is this going to be a yearly event? Well, we're questioning that at the moment. Now, the it's quite a lot of hard work.

We don't make money putting these conferences. we lose it. And, and I put a lot of my staff time into it as well. And even including that in the cost, we're thinking of doing it every 18 months.

So it would alternate between like a may and then in October and then in May and then in October. So the weather's not too bad either. and also because I don't it's a bit like doing a magazine if you, if you say, oh, we're going to have a magazine every month, they'll come a month and you'll say, well, what have we got to say?

You know what's new? Nothing, really. And then you kind of regurgitating, plagiarizing, whatever. So I'd like to think that every time you come to a Profound Health meeting Summit, you, you'll say, My God, that really was you.

That really was interesting, you know? And we have fun, too. I've even booked a surgeon comedian to talk at lunchtime, you know, because laughter's the best medicine, isn't it? So, Yes it is.

Oh, I love it. So exciting. Well, thank you for all that you give to of yourself and your passion. We really appreciate it. Thank you. Know, it's great.

And I watch the DrSummits whenever I can and it's a great channel and there's lots of interesting people and and that's what it's all about isn't it? It's all about all of us sharing what we know.

You know. So it's great. Yes. Thank you so much for being here, Phil. We really appreciate you. Thank you guys.