The Dynamic Duo: How PEMF & Peptides Can Revolutionize Healing & Anti-Aging Transcript

(Transcripts are generated by AI and may contain errors)

Introduction to stress and immune modulation

Stress is a killer. People think stress lowers your immune system. It doesn't. It modulates it. It lowers that one, but it raises that too. So you get a lot more inflammation with stress.

But you can't fight intracellular infections. You can't fight cancer. And it's so stress is like aging. Welcome to Doctor Talks the podcast where every episode leads to a healthier you.

Join us as we navigate the world of optimal health, uncovering groundbreaking strategies to conquer chronic disease. In each episode, we'll bring you the latest insights from leading health experts, medical innovators, and wellness warriors.

If you're seeking to transform your health journey, or if you're looking for answers to burning questions, you've come to the right place. Get ready to unlock the secrets of lifelong health and vitality.

This is Doctor Talks, real talk from real doctors on the issues that matter to you most. Today's episode was previously recorded on the Pain Solutions Summit that I hosted.

Hi Doctor Paul here. This episode of the PMF Healing Summit is about pmfs and peptides. The title is called A match made in Heaven for the treatment of everything from severe illness to nagging injuries to anti-aging and rejuvenation.

Now there's a title, and I'm not going to tell you who he is, because he could do a much better job than I can. So if you don't mind, please tell us about yourself.

But, I think I'm kind of like the standard. So call. We have this alternative. I hate that term. Functional medicine, integrative. Whatever it is. I was a very close minded standard physician and started getting very sick through medical school, the residency and going to the doctors there, and they're like, oh, you're stressed.

You're like depressed. I'm like, no, I'm not.

Doctor's personal health crisis and career shift

I can't function. And oh, here's some antidepressants, which didn't work. Of course, that horrible. And I'm like, I don't think I can practice medicine.

And, and so I went and I figure, okay, what can I maybe do? Because talking to a patient was so exhausting. Like, any noise, any just interaction would kill me.

And just sweating constantly. And, And so I went into anesthesia, figuring, okay, they're asleep. I can deal with them. Right? But I forgot about getting up early.

You know, and it's no offense to anesthesiologist, but it's pretty mindless, you know? But. So then, people were talking about some alternative of conferences, and I'm like, oh, I can't let anyone know that I'm going.

Right. And so I go and I and I'm like, listening. I'm like, this is more evidence based than the crap they're teaching me in residency, right? And, and I look at all my hormones, they're like the lowest 3%.

Lowest 5%. Oh, you're fine, you know, you're fine. Oh, you. Oh, yeah. You have no immune system, but but it's

like, it just it's in the normal range, you know.

And, and so I went on, basically, you know, all the hormones, testosterone and growth hormone, T3 was a savior for me. A little cortisol, like I did a review article.

HPA axis dysfunction and chronic fatigue syndrome, fibromyalgia and found that, you know, 97% of those patients have adrenal dysfunction. The fire manager patients just haven't.

The hypothalamus and the chronic fatigue have it in the pituitary, you know, and the pain centers and I that but and that's what of my big focus was fixing people with hormone.

So I took a when I said I'm getting out of anesthesia, I hate this and went in the family practice took over family practice and immediately converted to cash.

And, you know, people think like, oh, greedy has nothing to do with that. You know, it's and I could not stand for the short period of time I took insurance.

I'm like, this is crazy. Like, I, I have to see a patient every eight minutes. You know, I can't say hi in eight minutes. And and just really doing hormone optimization, T3, which is kind of my passion.

It, you know, no one thing fixes anything, but but when you're early on, you find something that works. It's, you know, and sort of the hormone optimizer, thyroid optimization clinic.

And people were just lining up, you know, and and we switched over to cash and then, moved out to California and I wanted to join the Independent Doctors Association, who they're trying to not take cash, take like 5% cash. 10%.

I said, I'm taking no insurance. Like, we're not letting you in. You can't do that. That's ridiculous. You know, and we've been doing it ever since. You know, you give a better service and you're going to get the patients.

So, so basically, I started feeling so much better doing this, whole, you know, kind of holistic fix in my gut, doing a lot of IVs. Ozone, you know, getting thyroid testosterone, you know, just basically, kind of doing everything, and felt fine, but then went through a nasty divorce.

You know, she hired Gloria Allred as a as a consultant, and then got in a fight with her because she wasn't tough enough. But anyways, so that was brutal.

The phone rang, and I just would just freak out, you know, just sweating. And then I went into heart failure. I could not walk up the stairs. I couldn't stand up straight.

And I'm like, I cannot live like this. I got a cardiologist and he's like, there's a lot of damage, a lot of scar tissue. And maybe in ten years you can get 10% better.

I'm like, how do you at the time? It was probably eight years ago. Yeah. And, and so I go, well, either I'm going to every Halloween was just going to up myself because and and I knew I had Lyme.

My blood was so thick you could not take it out with a 14 gauge catheter. It was just like motor oil. Right. And, and so I'm just, you know, in your panic, you can't get anything done, you can't sleep, you can't stand up, you can't lay down.

You got restless legs. I was taking 100 shower today, but it it's miserable. And so I said, well, I'm just going to go around the country and just find every treatment I can and go to other countries and found a lot of great treatments.

A lot of things work and, and, and really found, you know, looking back, it's the things that modulate the immune system. And you look at, you know, ozone, you know, with the peptides.

When I was in Europe, I didn't think they'd do anything. And then three days later, when 2.5 days later, I well, I just walked up the stairs, you know, and I'm like, this is this this is really weird.

And I didn't expect that to do it. But, and I love I went down to Mexico and did like, plasmapheresis and, a freezes with dendritic cells that we would, stimulate to, Lyme antigens.

Then we tried to freeze it, which we screwed it up, but but it was I was feeling better. I could function, you know, and, and then so really started just bringing.

And so I found peptides, but I couldn't use them on my patients, so it wasn't allowed. And then about a couple of years later, it was okay. And it just transformed our practice.

I mean, it is. And every doctor we train and at 22 centers that we opened up and, and then we did nine franchises, first won by a franchise was a hospital and, and turns out they went crazy.

They said we weren't practicing evidence based medicine. So they go, oh, you got to get out here. The hospital said that said that. And I was stupid and thought, that's what really they thought.

So I go out there and show that we're practicing evidence based medicine. They are not. And which was the wrong thing to do because they were just it turned out at the end, like, you think you're better than us, you know, and but as a small town, an hour outside, two hours outside of Kansas City, and a guy who lived there told me when we started because they won't let you in.

I'm like, what are you talking about? They love us, you know? And, and so I go and immediately the rheumatologist, as soon as I start speaking, just stands up because I'm not listen to this bullshit, you know, and walks out.

Finding hormone optimization and cash-based practice

And then the, cardiologist is playing Fox News piece where I said I wouldn't give my kid the H1n1 vaccine. And, the endocrinologist was so pissed because he got 24 calls about reverse T3, which he didn't believe it, you know, and so they said, you're going to the CEO.

He is just going to oh my God, he is so pissed. Right. Okay, great. I'll go talk to it. But, Oh yeah. And then the obese arguing like holding up, you know, her societal guidelines.

And I'm like, okay, where are the societal guidelines rank on the list of evidence based. The strength of evidence based medicine. It's last. It's after anecdotal cases because they're wrong and they don't change it for 20 years.

So it's not. So I go to the CEO and he's like he goes, listen, my wife has been going to these bozos for the last decade and no one's gotten her better.

Two visits at your office and she's dramatically better. I'll take care of the doctors. I'm like, you won't, you won't. There's no way. Let's just change the name that it up.

And I go over to this, pediatric kind of satellite. And he was into. He's like, this is really neat. And then the nurse goes, you got an emergency call.

He's like, no, no, no, no, I'm busy. You know, you have to take this call. So it was the OB telling him not to talk to me, you know. And long story short, they said we can't have you in here, you know, and but it just goes to show that it's.

They were they don't want patients better. And this is now I get it because I see it all the time is that if you're, let's say a doctor's beaten on a patient for ten years.

Can't get a better. They come to you and you get them better and send them back. It's a shame. And I used to be very mad at doctors, but they're in a bad spot.

We've given it up to, you know, insurance companies and big pharma and, and and administrations of different kinds. Yeah, yeah. And it's funny, I did a, paper on how to fix health care, health care reform.

Spent a lot of time on it, but I had to get it to someone big. Can you get people? I wanted someone new. Speaker of the House, Ryan. So got it to him.

He said the paper saying I had to sign, saying I will never quote him and blah, blah, blah. So basically, he sends back, you know, a short letter, it says, well, your proposal is very interesting, but, do you know how many people are slurping off the trough of of the health care industrial machine complex?

Yes. Yeah. And, it's true. Yeah. Big Pharma owns the world, man. Yeah. They started, a long, long time ago at the turn of the 20th century. Yeah. And it's just like we were talking wine, you know, with all the studies on PMF, why isn't everyone using it?

And it's how many people have been harmed by PMF. And but the doctors are like, well, here's 50 studies showing, you know, what you're doing isn't right.

We have a better therapy. No, no no, no, I don't believe in those studies. Yeah, yeah. They don't. It doesn't matter how much evidence you present. I have made this quote, multiple times, during the summit, and I've said a mind forced to change as well as other, say, opinion still.

And I and I have to remember that because I always get into I'm better. I'm way better. You know, you think you can overpower, what evidence doesn't work out?

They have to be open to it. And yet you are threatening their paradigm if you're threatening their, credibility. It's not going to work. So, you know, I decided a long time ago, just like you have.

Actually, I don't know if you're still, tilting at the windmill, but, I decided a long time ago. I learned this, actually, when I was a medical director of managed care.

And I knew what managed care was doing to try to prevent certain things from happening, including things like paying for acupuncture. And I knew that the only way to beat that system is, is to do like everybody at the summit is to go directly to the public because Covid, I think Covid has done us a favor.

People had to get health care on their own. Your body was designed to heal, but illness, chronic disease, stress, injury and time can slow that process down.

What if you could restore your body's natural ability to recover, recharge, and feel it's best? The key to healing is giving your body the energy to repair itself.

PMF therapy does exactly that recharging your cells, improving circulation, reducing inflammation, and helping you function at your best. For decades, I've studied this technology, work with hundreds of medical professionals and have thousands of people reduce pain, regain energy, and take control of their health.

However, not all PMF devices are created equal. No one size fits all. We offer personalized consultations so you can find the right device for your needs, backed by real science and trusted results.

If you're ready for a real solution, let's talk schedule a consultation at Doctor Polycom that's here via AL.com, because real healing starts at the cellular level.

Yeah, you know, they realize that standard government, which they put on a pedestal, they got it so wrong. You can't believe how wrong they got it. But there's a reason for it.

There's a big reason for it. Yeah, yeah. So anyway, so you learned through your own journey, right? Through your own journey that you have to design your own health care approach.

Right? Right. And that's what people have to do.

Immune dysfunction, Lyme, and alternative treatments

They're starting to realize that, as you're saying. But so many people and I've learned to it's like, and so many people are sick. They're stressed out of their mind.

Like, I have to carry labs, labs when I go to a party, you know? And what I found is that I don't even push it. They have to beg. They have to go do something because 90% of them won't do any.

My doctors like to talk to me like, oh, I'm so sick that I'm like, well, I think this is why doctors that don't have that well, how's that working for you?

You know, and they won't they won't change. Well, when it comes to people, therapy patients would often tell me, well, I'm going to go talk to my doctor about it.

So I think I'll go ahead and do that. I'll tell you what. I'll loan you my book. Yeah. He knows nothing. He knows less than nothing about it. I think I said, don't even bother.

If you want me to talk to your doctor, I'll be glad to. If they're willing to give me a call, we can have that discussion. There you go, there you go.

And of course they don't. They never do. So my patient's learned over time is up by talking to your doctor about it. Yep. Yeah. We can get we can give them the science or we can give them the rationale for why we do what we do.

Right. We can support it easily enough. And and of course they the results talk for themselves, right? Yeah. Like I had a patient who said he went to the endocrinologist, showed them my other review article and he goes, you got to read this.

This is just oh my God, it's changed my life. And he goes, this is a terrible study. I read it and he goes, no, you haven't. It isn't out yet. And you threw it in the trash and said, I don't have to read it.

I because I know. Yeah, yeah. So your journey taught you that you have to put together your own health care program. So what you said peptides, you said hormones.

And what else to do? Included your program? Yeah. I mean, there's just. Yeah, there is so many things, in terms of, you know, and we did do PMF, but I was originally taught that it was just for soft tissue. Right.

And, but, you know, a lot of I. V. therapies. Yeah. Basically hormones. We were doing high dose antibiotics, like for chronic Lyme. And there's a found it doesn't work.

We use so little antibiotics now because it's the problems immune system. And when you have basically two sides your immune system you get like then it's oversimplification.

Like anything with the immune system is th one gets stuffed inside your cell, tends to get stuff outside your cell. And then with any aging, your thymus imbalance with stress, toxins, chronic infection or immune disease, you basically it starts going like this.

So you can't fight interstellar infections or cancer, but you have all this inflammation. So and then that causes mitochondrial dysfunction debris particles in the cell danger response which is kind of an isolated part of that.

You get pineal hypothalamic pituitary hormone dysfunction. You get hyper coagulation and you get, you know,

basically gastrointestinal dysfunction. Your sleep center is on fire, so you can't get sleep.

And it just goes around and around and around. You can't detoxify, because there's no cellular energy. And, it everything's, you know, and then you get reactivating infections that now make it worse.

So what, you know, what kind of what causes it becomes chicken or the egg, but you gotta unwind all these different parts. So you really have to be. You know, the problem is two in medicine, you got your guest, general gist.

You get your cardiologist, that's your neurologist. They don't want to think outside that, you know, and you can't. It all happens to be hooked together.

Yeah. I had a patient one time, to go to your point, who was put on statins, and he went to went to a mall, forgot who he was, forgot where he was, forgot why he was there.

He had global amnesia. And it was the statins. Stop the statins. And his memory problems basically went away. Now, what if that happened after he did PMS? Yes.

What? What if that global amnesia happened after he did VMF? Is that what you're saying? I would be all over the news? Totally. Yeah, I like Robbins. He tells patients first visit.

He does, like, intervene. It's ozone gas. And he says, I can take my prescription pad out and kill you. Nothing will happen to me if I harm you with this gas.

I'm going to jail. So it's. Yeah, we we don't have the luxury of saying, well, this is what the side effects say, you know? But the nice thing is, the things that we're talking about have lower side effects than anything I've ever seen.

Right? When I made the switch from conventional medicine to alternative medicine, people are walking out of the office smiling. Yeah, they were functionally better than they ever were when I when I did conventional medicine, how many people walk out of a standard doctor's office smiling, I think, yeah.

Well, one of the things I learned when I learned acupuncture was that people didn't leave the office smiling or at least they had a glaze. Yeah, yeah, but it's scary.

You know, you got to be your own health advocate now, you know how you can't go by what your doctor says. Did you discover peptides first and then magnetic field therapy or what was the sequencing there?

No, we had PMF first, but we were very much under utilizing it because the guy who sold it to us said, you know, it's for joints and soft tissue and that kind.

Yeah, we still get some of that. And that's one of the reasons I wrote the book, Power Tools for health is that it's like way beyond that. There are people who still say, it's not it's not for healing.

What's it for? It's for make you feel better. It's for helping you with your aches and pains. But it's not going to heal you. So the high density systems that you have a high intensity magnetic system, right?

Your your high density magnetic system will cause muscle contractions, right? Yeah. So you have people out there in the community who are selling PMF devices that are mattress pad systems.

They can cost $6,000 for one of those machines, $6,000. And then they're telling everybody, you don't get high intensity, it'll hurt you. But the same people who are selling that pitch know nothing about magnetic field therapy.

It's easier that way. There's lots people can sell it easier. It ought to be rational. You have the scientific. So we know that's not true. Because actually now we have FDA approved machines, right.

That for treatment resistant depression, for Parkinson's, for OCD. That basically are treating the brain at very high intensities. It's kind of like, you know, with Covet and Vitamin D, why are we giving everyone vitamin D?

You know, it's sense and no, let's go with the vaccine route. You know, it's just oh, that's a whole that's a whole nother ball game. Isn't that excellent? Black helicopters are coming.

So you start with high intensity magnetic fields. Why did you incorporate that into your and your work? Because I was at a conference and I said, all right, let me check this weird pulsating thing out right.

And I don't think I had anyone lecture on it yet. And, I had terrible back spasms, you know? And so I did it, and I'm like. And I don't like massages.

They kind of freak me because I had an idea where if anyone touched my skin, I would just, And so massage the room. I think, and then I'm like, oh, my God, I can move my neck, like, quickly, you know, within a minute or two minutes it was like, wait a minute, you know, what was the name of this damn thing?

Yeah. So, with that. So I had to I had to get it and share it. And then. So you start. That's when you start doing the research. No, no, I got it. And I am still blown away.

All the studies, hundreds and hundreds and hundreds of studies, all showing this. It's it's it's just crazy. But I have a whole piece on our nonprofit, the National Academy of Hypothyroidism, integrative Sciences and Hypothyroidism, for which I started just to show that the way we're treating thyroid in this country is just wrong.

Right. And wrote two review articles, you know, 500 references each. But one of the what the question you probably get this all the time too. If this is so great, why doesn't my doctor know about it?

And so what answers that question. So if you go to any hypothyroid resource org, if you're wondering about that read that and it will it will tell you.

Yeah we see this I see it all the time in practice as well. I do, as you said, a reverse T3 or I do a free T3, free T4, TSH. I almost always adore the TSH.

I can about the 53 to 4. Oh, I get calls. The patient's hypothyroid, all their pulses 40. Their basal metabolic rate is 20% low. They're freezing cold and they're gaining, you know, 3 pounds a week.

Is that hyper metabolic? Yeah. Right. You know, it's like no sense. So anyway, the device you had I think we talked about this before we started that probably is the NF1 20, which is one of the earliest devices, available that were higher intensity.

The history behind that is the guy that developed it, built the first wind farm in North America, really in California, first wind farm. And, he was approached by somebody who imported the device from Greece, called the Papini, which is a basically a horrible machine.

And people were importing it in the US and doing studies on it. They actually had, IRB and Institutional Review Board approval from the FDA.

Discovering PMF therapy and early clinical use

Unfortunately, the doctors are too gung ho and they started making outrageous claims that were publicly visible about brain cancer. All of a sudden, the FDA swooped in and and collected all the machines, confiscated the machines.

They protect their turf, man. So the guy that brought them into the US from Greece, went to this guy. They had the wind farm who is a physicist and said, can you duplicate this machine or improve on it?

Which he did. They actually improved dramatically. Huge improvement. And that's the beginning of a whole series of machines that he's developed that are high intensity.

And I know that that's cool. And of course, you know, people are not people wise or now they don't make those kinds of outrageous claims. But having being part of an AI IRB is a two edged sword.

And, it cuts. It's it cuts back both ways. Yeah. Now, but if you're doing it during the, the, if you're using it during the course of your treatment, you technically don't need an IRB.

But actually as an MD, as a physician, you can do whatever you want. Your practice, you just can't do it across state borders because of the FTC. Within your practice, as long as I tell people there's an alternative therapy that's not supported by science in the community in general, which is also, you know, not right.

And people don't know about it. But as you said before, it's extraordinarily safe. Even not used properly, but used properly, it's amazingly safe. Yeah.

Even if someone was just nuts, I don't see how they could harm the like. Would they hold it there in their hands? I mean, it's just like, oh, stove. So dangerous.

Well, I think they'll move their hand if they. You know, touch it. Well, there are contraindications. Clear day. One of the most important contraindications is implanted electronics.

But these days those implanted electronics are actually mere conditionals. So even with even with those, we are less concerned. And you could do up to one and a half, 15,000 gauss, basically without having to worry about it.

But there is one cost indication that I follow, and that is that you shouldn't be messing around with organ transplants. And then the problem is too, there's some things I don't treat, not because I think it will harm it, but if something happens and they have a lot of stuff happens, they're going to blame that.

And their doctors are going to blame it. Yeah, I totally agree. So what things would you not treat. You know, and I say that after you set it on like I end up doing it usually.

But you have the right patient, right? That, you know, a educated patient is your best friend, because when they go home, okay, they're feeling great and they're all happy.

Then their husband says, oh, this is quackery. And the neighbors say it. Then their doctor says it. They're feeling great in other PC. You know what this guy did to me and you don't have a chance to refute it.

So that's something we spend a lot of time educating patients. It sounds like you do. Because they're they're your best friend. People who don't know are going to get swayed and say, it's voodoo.

You know, throwing a chicken around the air or whatever, you know? So, yeah. And that's what we find, you know, with the peptides and they're like, oh, they're so great. Why is everyone using?

Well, we're trying to get everyone to use them, you know? But, peptides are complicated in many ways. More complicated than pmfs. Yeah, definitely. Yeah.

In California banned, basically, which is crazy. And now they're banning glutathione and vitamin C. California. Yeah. And like famous and Alpha one was shown to be numb number studies showing the.

So it boosts thymus the thymic peptides. So as you get older your thymus invalids. And that basically caused your immune system to age basically. And it also if you have like a constant stimulus, whether it's environmental, chronic infection, cancer, the T cells all shut down so they get T cell exhaustion.

And this is just really low. So we can really judge how sick a patient is correlates with their symptoms, how old they

are, how what kind of health they are just looking at that balance of that immune system.

And, and we found fixing that just fixes so many things. The hormones go back the, mitochondria a little more difficult because if they're like senescent, I don't want to get too into the weeds here, but you have to kill those cells with people. Oh, my gosh, I don't know.

But no, your body's killing bad cells all the time. The problem is this immune system so low it can't do its job and kill these bad cells, which then.

So instead of let's say you got them in the heart, they're not heart cells that are pumping. They're basically sitting there pumping out all this oxidation.

And then they recruit other cells. And if you just getting this is, I think going to be the biggest breakthrough and, you know, anti-aging or whatever you want to call it.

But just getting rid of those senescent cells selectively, it reverses diabetes, heart failure, the neurodegenerative diseases. And and the thing is, so if let's say you boost the mitochondria, which a lot of a lot of things do, but now you're boosting the mitochondria that are just pumping out inflammation, you're not doing a good thing.

And you're wondering what like how why is this patient feeling terrible. You know. And so it's timing is key. Timing is key. Yeah. And you look at you know, what is even the CDC states that 80% of people, of age, age people, whatever they that is, have at least one disease that is due to the evolution of the thymus.

So why would you just give everyone thymic peptides? You know, just it's like replacing the thymus and fix the immune system and heart disease go down.

Cancer, you know, infections, name it. It and it just boggles my mind. Everyone's like, well you give everyone that like, yeah, you should who doesn't need it?

Yeah. You know, if you're older than 24, who doesn't need it. Yeah. And they're like, well, it's normal to be low. Well, it's normal to get cancer too.

Or you're not going to treat it, you know. Well, actually, you could argue, quite frankly, that it's not normal to be 45 or 50. Yeah. Yeah. And and people are getting sicker younger.

We're living longer. But you're stuck in a nursing home and demented and in and out of the hospital. Congestive heart failure wants to live like that.

And I think, like, we were talking, before we recorded that stress, you know, stress is a killer. People think stress lowers your immune system. It doesn't.

It modulates it. It lowers that one, but it raises that, too. So you get a lot more inflammation with stress. But you can't fight intracellular infections.

You can't fight cancer. And it's so stress is like aging. What health stress. Yeah. It's like hey stop being stressed you know? Right. Right. It's here's your prescription.

Stop being stressed. Yeah. And then they come back. I told you, you know, they won't listen. So Amazon is called Amazon right. Is an injectable or how does it how is it delivered.

Yeah it well it depends on there's the so famous enough for one it was it was approved as an orphan drug in the US. Proven 37 countries for cancer and hepatitis.

So what it does is raise that one right. So kills cancer, kills and infections. The problem was people were using it for Covid and it was working and it was safe and effective.

So they made sure you can't get it. You know, it's it's crazy. So but there's a lot of different thymic peptides. So we have integrated peptides as the founder of a kind of push off.

So I'm trying to do, clinical trials. But, another dumb thing for all my sins, right. But the a fragment is actually much more potent than the whole molecule.

And it lowers also human transforming growth factor beta, which causes fibrosis and tons of inflammation. And so it, specifically will attack that. So we're finding two and we're starting to get it.

We call bio regulators. They're just by peptides. So two amino acids stuck together. And they can have huge effects you know. And we used to think kind of hormones kind of controlled everything.

But the peptide or another layer that fine tune everything. And and or for instance, with this was a rat study, but they had 135 rats, all menopausal.

They gave them a which pineal hormone, pineal peptide and all of the started menstruating and 35% of live birth. And they were aged. Yeah. They're all menopausal.

Half of. Yeah. So what do you advise your perimenopausal women. Yeah. Well, it's it's interesting. So I don't have a period.

High-intensity PMF, safety, and contraindications

But if but also you look at huge I think probably the most anti-aging by epithelial especially when you combine it with a, with a thymic peptide. They had a 15 year study of people over the age 65 with signif against cardiovascular disease.

And they followed them and they only gave them like six doses of what they what what did they give them? Oh, they gave them epic talon which is pineal peptide.

So another one is pineal gland, and a famous and and they actually stimulant which is it's a little more anti-inflammatory. But they all are similar but, but have differences.

And they just followed them for 15 years. And they found the people who got that combination, their heart, their cardiovascular function got better. They had less infection, they had less cancer, and they lived significantly longer.

And it's and they've had studies they can't find the toxic dose. They gave them a thousand times a dose. I've nothing try that with water. You're dead, you know, but it's so if you want to, you know, have all these things for anti-aging, I'm like, I don't need.

Right. I'll just take a shot. People have, problem sleeping. I've had. Because it turns out that I had Lyme, but bc a Bartonella growing up, you know, like, my arm would stop working.

One pupil is bigger than the other, and, I was out and, like, all of a sudden, my girlfriend's kids said, your eye is so cool. Wow. I'm like, what are you talking about?

I go in, my pupils just blown, right? And I'm like, I gotta go to the hospital. So I usually it's, you know, it's a it's a bleed or it's, usually a clot.

So I go in and I'm giving them study saying, can you get me this? Can you even just progesterone protect my brain? And they're like, oh, we'll take the studies.

Like, will you give it to me? No. You know, I'm some calm people and they're sneaking peptides in, which works great for traumatic brain injury protecting brain.

All those things and everything came up negative. But I had forgotten that I had started antibiotics a week before, so it's kind of my Herk Zimmer, you know, and, so it.

Yeah, it's it's been a weird, weird ride. I never I thought it maybe one point I'd be happy that I got sick, but I would never wish when I say Lyme, it's always something else like.

And I had Bartonella which my vessels were so big they were like pipes. And I remember some kid saying, oh, daddy, what's wrong with that? You know, and so I got him sclerosis, but then I got rid of Bartonella.

I'm now I have no veins, but, it's, This baby is the nastiest one, I think. And it really suppresses your immune system. And it's it's hard to get. I mean, we had one lady who had terrible babka.

We used to have at the time, we live cell, so we could look at, and we had immunofluorescence antibodies, which are very specific. So you could tell I have never seen more bugs ever.

And so we put her on, you know, quadruple egg time, malaria and take a BCR check. 2 or 3 months later, there's more. You know, it's like they ate it for for dinner, but because she had no immune system, and, and we're finding we can we, you know, because so many docs, it's it's let's just keep rotating antibiotics, okay?

Five years, seven years. And you wonder why the studies are mixed. Right. And plus, you really don't know what you're treating because, yeah, they may have Lyme, but they could have, you know, 20 different things that we can't test for.

But we see the picture and it's as EBV. Yeah. And and so what you find is that will be positive because the Lyme or of ABC have suppressed the one. Now those come back out and now the doctors think it's it's the viruses but it becomes chicken or the egg because those also suppress the immune system.

So yeah, it's becomes everything in medicine is a vicious cycle. How do you incorporate PMF in your practice with everything else you're doing? It's crazy good for doctors to say how you make money.

I'm not good at making money. I give my things away. They. My accounting tries not to let me see patients, but we just. It's free reign. You can use it as much as you want.

So, have an order that you're used things. Yeah, yeah, they'll just say, look, you can you can do that. I suggest you do this much. Come in every day, and, we find that works like depression.

I was very surprised. Anxiety. You know, of course, anything healing we treat. That's for free. And we just had a a guy with, post-traumatic stress, and he had a rod in his leg and terrible pain and no more pain.

We have ALS patients come in wheelchairs, they're jogging, they go back to their allergist, they're like, oh, most of that in this diagnosis. Well, three of you have diagnosed with them, you know, and they won't do they ask what you do. No.

But that's there, there is a mad, really which, is for ALS. That doesn't work. But I like it for anxiety. It works for anxiety. It blocks Gaba in the brain.

But, so we were thinking of doing actually ALS because I didn't realize it was an orphan drug, an orphan illness, a rare illness. So, that may be one of the ones we do, but, what were you doing for the ALS patients?

Yeah, it came down to get rid of the inflammation immune modulation. And they they always have an infection. It's usually the triad is infection stress, especially emotional stress.

And which goes against people because, like, it's a mom who, let's say their husband died. And that's when everything happens. But the emotional stress really sets everything off.

And then some sort of environmental toxin, which most people have. And then it just there's a tipping point. And it just because once you suppress it now other infections come out.

And it's kind of like now we're seeing monkeypox, you know, which no one got your immune system, everyone's immune system shot and everything. I should talk more about the damn vaccines.

But you know, the more you're vaccinated, the more likely you're going to get Covid. And we did a we did a trial and we did natural killer cell function before and after vaccines.

And they were significantly lower. But I sure the heck wasn't going to try to publish that. But and then, you know, people get mad at you for telling them and, patients get mad at you.

Yeah, yeah. I mean, I tell them, don't do it, or I had a doctor who was sitting in the parking lot of, of a facilities and give her a shot, and she's like, talk me out of it, talk me out of it.

And I'm, like, trying to block her out of it. She's okay. I won't do it. She ends up getting it because all her colleagues got it. She was in bed for six months and she's still not right.

Peptides, thymic support, and anti-aging

But it has nothing to do with with the injection. But why are people out there? It's. It's your own choice. But it's it's a choice. I heard recently that, the spike protein, actually, is activating latent viruses.

And if you ask, like the obese tons of cervical cancer from HPV because it's coming back out, but, yeah, because you're there wrecking the immune system, trying to get, I but I better stop.

But, it's and there's been no long term trial. They didn't even do a short term trial. Okay. What what is a the biggest like basically sin to do is do a study and you have an endpoint which was reduction in death.

They go, oh we're not going to make that. Let's have it reduction in symptoms in the hospital. No one else would be allowed to do that. Then they took the placebo group and gave them the vaccine.

So now you can't compare side effects. And so when people are like the whole ivermectin thing, like, oh my God, there's hundreds and hundreds and it was won the Nobel Prize and it's probably the most prescribed drug, but oh, it's a horse de Wormer.

There's more studies on that than there are on the vaccine. And now they're getting five year olds. I was going to say, what would you do for somebody who had the vaccine?

How how would you tell them to, protect themselves? Are you tired of living with chronic pain? Medication only masks the symptoms. But real healing starts at the cellular level.

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Don't just manage pain. Transform your health. Visit Doctor park.com today and let's get started on your healing journey together. So many people like they don't say anything, but if you ask them, they still have brain fog.

They don't feel right, after the vaccine because, you know, the studies when it was first. Oh, it incorporates in the DNA. That's impossible. Oh, studies show that it can.

And who knows when does it turn off? But the spike protein is the poison, you know? So, you want to do thing really fine is moderate immune system. And it's interesting, like what we do huge panels.

I'm a fan of huge panels, initially. So you know what's going on? An autistic kid looks just about the same as a line patient. You know, it's it's the immune system.

So we first fix the immune system, then we'll do things to block the spike protein that's hanging around. And there's pieces of the spike protein, from from binding.

We like stem cells to, which we, usually get people's, smell back and, like, for days, with that. But it's I, it's kind of weird. It's kind of feel like we're cheating because the same principle works and all these illnesses, you know, and, and in fact, we have we want to do a risk mitigation for vaccination and looking at people's immune system. Right.

And you can tell who's going to have an issue. And it totally fits. And older, less, you know, less healthy diabetics. Auto immune, their immune systems are already like this.

So now just going to go like that. So, yeah, it's I mean, they're all different, but the underlying pathophysiology is often the same. So these therapies and I'll take, you know ozone I like IVIg if I can get it, you know.

But they've kind of made that ridiculous. Plasmapheresis. I like, adding ozone. It's funny, I went to the hospital. I said how much to do? A plasmapheresis.

He said, I don't know, but we'll give you 90% off and, like, okay, it sounds great. Can you go see how much that is now? They came back, said, well, $38,000.

I go, oh, 90% off of that. No, that's with the 90% off. Oh good lord. Yeah. I for one treatment. One treatment. One treatment. Yeah. So it's nice because it filters out.

You're getting ozone. So you're basically oxidizing all the toxins and all the, pathogens. And then, you know, it's filter and then you're getting ozone the whole time.

So it's, and there's a dialysis and a plasma freezes. I, I flew to Puerto Vallarta to see Omar at line Mexico. And, we were cooking up a lot of just interesting stuff and the plasma free.

So I always felt better immediately. And that's what we did. The cell therapy, as I read, I was reading about how dendritic cells, which are the cells that will like, see a tumor or an infection and present that to the rest, the immune system and I was reading that they're screwed up when cancer and the same day I'm reading a different, journal and it says dendritic cells are screwed up in line.

And what they do is they stop secreting IL 12, which stimulates one. So, so I started calling like Cancer Centers of America. I said, can you do a dendritic cell?

If I bring Lyme antigens in, we stimulate them like crazy. I'm calling the police, you know, and, so I went down to Mexico and brought the Lyme antigens, and he expanded them and, you know, stimulated them.

And it really did work. Then we screwed up. We tried to freeze them so I could take them home. And then that's where we messed them up. But, I'd like to try it again, but, so we're actually looking to have a center in Mexico because, you know, people keep saying, oh, the FDA has been doing this.

They've been going after all these, like, if we lose peptides and they want to take away hormones, they want to take away everything, like they said, curcumin.

No, we have non-steroidal. You don't need curcumin. You know, it's just nuts. But I, I think that, it's it's going to go bad. So I hope not. I hope I'm wrong.

Well, hopefully we will go bad with that therapy. Right. I couldn't imagine because I don't know what they're going to, you know, come after you for. But, I mean, it's so safe.

Who's going to, you know, all the harm it's done. You know, if we don't make it, people don't make claims. Stupid claims. My claims are the biggest thing.

Vaccines, immune risk, and treatment controversies

And, Yeah, well, the FDA basically considers PMF therapy to be wellness equipment as long as you don't make claims. So if you're making wellness claims for the PMI therapy, you're okay.

And you don't even need you don't even need FDA approval. I have a friend who actually went down and tried to submit for, FDA approval said, don't even bother going.

Yeah. And that's why I think ozone has been allowed, because if a doctor's not selling it, it's just in their office. They can do it. You know, your license doesn't allow you to do that.

Every last word you want to say about PMF integrating PMF therapy with everything you're doing. God. You know, it's just. Yeah, the problem is that, you know, with peptides, they all go through each peptide.

I don't think that's going to help anyone, you know? But they have peptides. They control very specific parts of the body. They're short on, short off.

They work on the cell surface where hormones go into the cell basically attached to the DNA. You know, they're slow on, slow off. So the peptides can be much safer.

But they are also epigenetic, and most things end up being a jerk. So they'll stimulate the body to stop making, say, you know, oxidative stress and, and start making more antioxidant.

So, they're, plea atrophic. I mean, they do a lot of things which people like, we like drugs that do one thing, but it's actually opposite that supplements are all a trophy.

They do a lot of things. It's when you do that one thing is it screws everything up, and that's when you find you have more side effects. But that's standard medicine from, you know, from day one, a a a plus B equals C.

And yeah, it's predictable a plus b equals C. Yeah yeah. It's never that way. It's always a plus b plus x equals c. And and then the mechanism they thing is not what's going on.

Yeah. Any depressants you know or antidepressants like people are like 0T3 largest study ever done. An antidepressant star report showed that T3 was a better antidepressant than antidepressants.

Less side effects. And it worked when the other ones didn't. But they didn't make it into the abstract because they didn't contribute. And or another study, treatment resistant by bipolar 135 patients, they didn't respond to, on average, 14 different medications.

No response. They just gave them all T3, doesn't matter what their levels were. 70 something responded and 20 like 25, 27% total resolution of symptoms.

Like, why aren't the psychiatrist just doing this? But let me ask you, let me be a devil's advocate, okay? I like that. All right. If I rev you up with T3, then you just think you're okay.

No, because people actually get calmer. You know, if you're revved up, it's, it's. Which will see, Yeah, if you give

especially T4, but, because what happens is with mitochondrial dysfunction, we're taught that all these electrons are taught that the whatever's in the serum, the fusion of the cell, but it needs active transport from the mitochondria and the mitochondria.

Yeah. Or the transporters for T3 are much more energy dependent. Excuse me of T4, much more energy better than T3. So that's why T3 works. There's no one thing you know.

There's something works for everyone, but nothing works for him. And, and so, I mean, I love I love heparin. I find so many people are hyper quagga. Well, what else do I love?

Yeah. Again, we're really immune modulation, and we're we're coming out because they got rid of thymus in alpha one. So we did some studies with metabolomics and we found two, very short thymic peptides that actually were more potent.

So those should be out in a couple of weeks, but, by by whom? Where where would somebody get that, you know, with, and, with integrated peptides by imaging alpha one and it's, by peptide and time again, which is a tri peptide.

So they, orally active and then we're doing mouse sprays. So, we're gonna have a lot of unique, delivery systems. And for instance, cp PV, which is the, terminal fragment of alpha minus H20 hormone, which a lot of doctors would give for Lyme because it's hugely, anti-inflammatory.

The problem is you turn tan. What do you think is great?

Home PMF use and closing recommendations

But if you're older, you get blotchy. And. And I did it, and I'm A. D. D.. I'm like, this isn't working. It went to higher. Oh, my gosh, I was so I looked like some weird painted person.

But, And it is we've been out, with supply chain stuff, and it just knocks inflammation down like, like crazy. And you don't get any of the, any of the tanning.

So, you do that, BPC is like the go to for heals. Gut, heals really anything, traumatic brain injury. And then you, basically had a famous sit in there, cerebral case.

And so it's been approved for 38 years for dementia. It's porcine brain peptides. And, and again, they banned that because too many people are using and safe and effective and but we have it this is license from the manufacturer.

And we have a great testimonial. This person a traumatic brain injury for like ten years. And after two days she's like, I'm a new person. You know, that's a very well cerebral license.

Yeah, yeah, it's called cerebral pet. Yeah. Like, okay, go do it every day. Every day. And I found it makes such a difference because. But people tend not to.

It's like too easy. It's too easy. It's easy to do. It's easy not to do. And but if you get them to do it, it makes everything work better, do it more often.

Did make a big leap, you know, and and the benefit and whatever they were doing, it just made it so much better. What I, what I recommend is that, people write a contract, the patients have to write a contract because what happens is life intervenes.

Yes. Yeah. You lay money down and you write a contract for five visits or ten visits, you're going to go back and the timing becomes really important to doing the right sequencing, because then you lose.

You lose the benefit. You lose the momentum, right? The cumulative benefits that you get if you're breaking up the treatment plan. So commit to commit to a program and then people will get get better result.

I think that's smart. Is is there, inexpensive home model. So I recommend that people get my book Supercharge Your Health with PDF therapy in a book, I talk about the different kinds of magnetic systems for different kinds of problems.

Now, one size fits all. And I do believe that you can go into a practitioner's office with the right person equipment and get benefit in that office. But if you have a chronic condition, which we've been talking about, chronic immune condition, you're going to need chronic health.

So you should bridge you should do something for yourself that you can combine with whatever you're doing in a doctor's office to be the most powerful.

But you're getting, you know, the treatment for basis on a regular basis. And Doctor Polycom has those, devices, and I offer consultations to people to get the best piece of equipment for their for their, home use.

That's worth your money sort of buying the wrong thing. It is because people do pay $6,000 for a 1000 machine, and they're getting very little value from it.

Thanks again for your time today. Thank you. I always really enjoy speak with you and and learning and, I just love it. I'm a sponge. Whenever you say anything.

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