## Introduction to Peter Diamandis

– Welcome to another episode of reverse Inflammaging Summit Body and Mind Longevity Medicine. And I'm very pleased during this particular session to invite Peter Diamandis to join us.

Peter has been recently named as one of Fortune's 50th 50 greatest leaders. He's the founder and executive chairman of the X Prize Foundation, executive founder of Singularity University, and he's the author of four New York Times best selling books, including the most recent One Life Force with Tony Robbins. Peter. It's such a pleasure to welcome you to our program. – Pleasure, Steve. Good to be here.

– Let's start by just kind of giving us a sense. I know that there's so many different areas that um cutting edge areas that you're involved in. But how did you get interested in the area of longevity?

– You know. I grew up in a medical family. My father was an O B G Y N. My mom should have been a doctor around his office and it was expected to become a doctor. I went to M I T undergrad for molecular genetics. And in the night time I would do focus on everything related to space. I was a space junkie star Trek and Apollo really lit me on fire.

## How Longevity Became a Focus

Ended up going to medical school, did a joint program at M I T and Harvard. And after I got my diploma, I shipped a photocopy to my parents and then went and started focusing on my space journeys and started building companies in the space arena launch and satellite and uh zero gravity company Space University and, and pursued space for 30 years.

And it was about uh 20 years ago that I really started getting, focusing in on exponential technologies, how computation, sensors, networks AI, robotics and everything going on in biotech had the potential to reinvent every industry and in particular, um it hit me that lifespan health span was a huge opportunity for disruption.

And it came, my interest in this area came from two different places. One from my childhood desire to open up space. I, you know, there was not, there's not been enough progress to make me happy, right? We haven't seen the Star Trek, we haven't been on back to the moon or gone to Mars. So I figured, OK, I need an extra 50 years on this planet to at least see the potential of what I desire to see. The second is just the grand challenge of it all. And I think there's no greater gift you can give than increased health span and no bigger business on the planet.

You know, for me, I have, I have a half a billion dollar venture fund called Bold Capital. And we had been investing mostly in exponential tech and robotics and A I.

But I've shifted the fund mostly two thirds now to biotech with a age, you know, and longevity focus because I think it's the one of the biggest markets out there.

So, it, in those areas, there was one pivotal moment for me, Steve when I was in medical school, I watched this television show on long lived sea life and it, it was talking about how bowhead whales could live 200 years and Greenland sharks could live four or 500 years.

And I remember thinking, if they can live that long, why can't we? And I said it's either a hardware problem or a software problem. And I think this is the decade where we start to make a dent in those problems.

– Yeah. So it's a convergence of a lot of very important facts there, including your own interest in having more time here to do all of these exciting things. – Yeah, it's the most exciting, exciting time to be alive. So I want to see as much of it as I can.

– Right. Right. Can you give us your perspective on aging? Like why we age? I know you mentioned hardware software. But what's your perspective on why we age? – Yeah, that's a great question.

And I think of it, the following, right? And these are the fundamental sort of baseline facts that get me thinking about aging in this way. It's, you know, we're all born with 3.2 billion letters from our father and our mother and we have the same genome really throughout our lives at birth at 20, at 50, at 80, at 100. So why do you look different?

Why do you age? Right. It's not the genes you have. It's which genes are on and which genes are off. Obviously, David Sinclair is a friend and his theory on you know, the information theory of aging for me holds a lot of validity.

But it's again, it's the notion of making sure that uh your epigenetic uh control of your body of your, of your genome is, is solid.

## Why We Age and Longevity Escape Velocity

And it's, You know, the other thing that hits me is that when we were evolving on the savannahs of Africa 100,000 years ago, you know, during the time we call cavemen, you go into puberty at age 12 or 13.

By the time you were 24, 25, 26, you were a grandparent, your babies were having babies. And back then before we had an abundance of food before McDonald's and whole foods was around. If nature's mission was to perpetuate our species to pass on our genome generation to generation.

The last thing you wanted to do was steal food from your grandchildren's mouth. So there was a, a positive bias for an early end of life, there was no selective factors to keep you alive longer.

And so we evolved in that direction. Now, the question is, can we go from Darwinism evolution by natural selection to, you know, an evolution by intelligent direction? Can we reinvent the software and hardware of our body? Can we understand the fundamentals?

And along these lines, this is where you know the work that I do in studying exponential technologies really flips my mindset. The the realization is we all inherently have a linear bias in how we think we expect tomorrow and next year to be very much like this year, a little bit of progression, maybe not too much.

But the fact is, and I think this is the work that my colleague and mentor Ray Kurzweil has has spoken about we're gonna see in the next decade as much progress as we've seen in the past century, that's how fast technology is accelerating.

And so I think that we're gonna see a disproportionate application of artificial intelligence. And what's coming just after that, that's going to make A I look like it's standing still, which is quantum technologies, quantum computation sensors um uh and communications enable an understanding of biology which I think at its basis, you know, molecular in nature is quantum in nature.

We're gonna start to understand fundamentals there. And I think we're going to start adding additional healthy years onto our life. And that brings about what, what uh Ray and Aubrey De Gray have spoken about as longevity, escape velocity. The notion that there's going to be a moment in time that for every year that you're alive, science is adding more than a year to your life.

I had interviewed Ray and George Church for my book that I did with Tony, Life Force. And I asked Ray, when do you think we're gonna reach longevity escape velocity? And now Ray is not a biologist, but he is a technologist and has one of the most accurate predictions out there.

It's, if you Google his name and predictions, it's like 84% accuracy. And his prediction on when we reach longevity escape velocity is the next 10 to 12 years. I, when I asked George, I expected him to be a lot more conservative and he was, but not by much, you know, it's like 15 to 20 years.

So our job here isn't to live an extra 50 years. It's to live long enough to intercept the new technologies coming in the next 10 to 20 years. – Right. Right. Well, that's, we're very close then based on both of their predictions. Yeah. There are a couple of directions I'd like to go with just the first response that you gave me.

But one of the things that I know, is very important in your perspective. Is mindset. I wrote an article recently on purpose, which I did. I said is the ultimate and use it and lo or lose it.

And you talk about mindset as being very important. How does mindset uh impact longevity in your opinion? And what would be the mechanism that that happens in that process?

– Sure. So, there's a quote I use from my dear friend Dan Sullivan. He goes need to make sure that your future is bigger than your past, right? And that's a very simple but very big idea that if you're, if you feel like, listen, I've lived my life, there's nothing more to look forward to, it's done.

You know, if you look at the research, you can effectively will yourself to death. And we all know situations where, uh you know, one spouse dies and then a few days later or a few weeks later, the second spouse dies, you know, and that was not predetermined at birth. It was an impact of losing someone that's that close to you. So there is a physiological connection between mind and body. There's also a connection of, you know, if you're excited about about life, if you're vibrant, you know, keeping your mind engaged and your body engaged, all of these things have secondary and tertiary benefits.

One of my favorite stories has to do with the founding fathers of our of our country. I'm trying to remember which two founding fathers it was, was, I think it was Benjamin Franklin. And, I'm, I'm blanking on the second. Who, they both lived exactly to the 50th anniversary of 1776, July four, and died on that day.

They lived to see the 50th anniversary of the nation that they had started. And again, is that random? I don't think so. I think it's like having something to look forward to that keeps you alive.

So I think mindset is very important. I think of, you know, today before we have epigenetic reprogramming and gene therapies and stem cell, you know, uh restoration and all the like of medicines out there before we have that we have the basics for extending the healthy lifespan, right?

## Mindset, Purpose, and Staying Engaged

It's diet, exercise, sleep mindset and not dying from something stupid, which I can talk about in a second. But in the mindset, you have to believe that in fact, um, there are breakthroughs coming that the technologies to extend your lifespan are on the horizon that you have something to look forward to.

Uh, so that you have less inflammation, less aches and pains, less, you know, uh uh you know, low energy days. And one of the things I did, Steve was I built, um, an A I uh called, uh called Future Scope that searches the world's information for news on any subjects, uh, vets the information for high scientific validity and then creates a summary of the article with an appropriate image.

So I set it free and, and, and built something called longevity insider dot org. So every day I get uh the top 10 breakthroughs in the field of longevity.

Um And uh I read and it's like, oh my God, that's amazing. I had no idea because, you know, we never see this in um uh in the news media today unless you're actively looking for it. So longevity insider dot org is free for me.

It's how I maintain my longevity mindset because I'm seeing every day the progress being made on all of these technology fronts. – I can think of two different ways that uh mindset may play a role here.

One is that it sends some kind of direct message to our genome that actually makes some changes there. And the other is simply that with a positive, healthy mindset, the body functions more efficiently, more effectively and therefore it ages more slowly.

Do you see those as two separate processes or the same? – You know, I won't venture to guess, but I also think there's a third process which is if you're excited about what you're doing, you're gonna get out of bed earlier, you're gonna get, you're gonna want to feel better, you're gonna learn.

Of course, we all know that uh you know, uh brain plasticity is a real thing. That you do when you learn, when you and Robert put on this event and you're engaging and you're learning and you're talking, that is really driving you forward instead of waking up in the morning and decided and deciding whether you're gonna make a cup of coffee or not.

So, I mean, there is you know, one of the challenges is this four letter word, spelled retirement. You know, it's people retire and lose their will to do anything.

And I think, uh, I think retirement is a, is a bad idea for anybody. Um, there's a correlation between when you retire and when you, you know, pass away, I think it's retirement is the equivalent mentally of telling the universe.

OK. I'm, I'm done making use of my body. It's time to give it back to the, to the ecosystem. – Right. Right. And yes, and I would agree that a positive mindset does drive healthier behaviors. So, I, I would certainly agree with that back to your analogy to the cave man and, uh, 100,000 years ago and how we lived into just our twenties or, or thirties.

Um, and we have the evolutionary sort of baggage or legacy of that in terms of many of our enzymes, hormones beginning to drop off around that age. – Yes. Exactly. – What's your feeling about replacement, uh, therapies to replace those decreasing uh, substances.

– Yeah. I, I think, um, that it is important to try and get us to homeostasis again, get us back to baseline. Uh So I do uh testosterone supplementation.

Um I use a peptide to boost my I G F one levels. Um and a variety of things and I won't go into a, a list of them here. But, you know, I, I've had the chance to start two companies. Um uh one called Fountain Life that we can talk about. That really is a diagnostic side of the equation, a therapeutic side of the equation. On the therapeutic side, it really is about how do we bring you back to, you know, hormone optimization versus just supplementation.

Where should you be? Uh And then another company I started with Tony Robbins, uh called Life force. Um that is similarly uh with peptides, medicines, hormones, really trying to get you back to a baseline. So do I believe that um that it's that we need to supplement what we have? Absolutely. I'm also a big believer in um the power to restore our stem cell populations, our regenerative engine of our body, right? Uh It's not legal in the United States other than uh your own stem cells from fat or bone marrow.

Uh But the research will get done. One of the companies I co-founded with Bob Huy, uh who's the chairman, Ceo of Cellularity. I serve as the co-founder and vice chairman um is the largest facility placental facility out there. We have stored hundreds of thousands of placentas, we decell uar those uh to bring out the natural killer cells, the T cells, the stem cells and the excess that are then uh really developed as cellular medicines to address uh everything from immune function to uh sarcopenia, to wound healing. To really the natural killer cells being used to fight a number of different cancers and clinical trials.

Today. – You mentioned in that comment exosoes.

## Hormone Optimization and Regenerative Therapies

What's your opinion on their value in terms of longevity? – So I think exo uh again, uh are in the gray zone from the perspective of the FDA today. I think that we need to um give those companies support to produce those because I think they are, there is value for them.

Uh I have used exomes myself in terms of accelerating wound healing, postsurgical. Um And uh I think that this is really, it's giving your body the growth signals and repair signals that it might have done in your twenties.

But in your fifties, sixties, seventies no longer has the capability to provide. So a lot of research still to be done. Uh A lot of work under I RBS and I N DS.

But I think these are incredibly important tools. Uh There's a company, I'm an advisor and an investor to called immunes that has been uh really um is in a, is in human clinical trials right now.

Uh pulling, you know, CRE taking the exudate of stem cells, really all of the growth factors and the exo umes and um using that as a uh a mechanism to stimulate uh and maintain muscle mass.

And we, I think most everybody here will know muscle mass is one of the critical factors for longevity. Uh there's a direct correlation between your muscle mass. And so I'm, you know, I'm fighting Sarcopenia every day. I'm 61 and I work out, I've increased my protein intake uh to handle it. But I would love any other technologies that allow me to maintain a, a significant level of muscle.

– So these approaches that you're just describing, including stem cells, et cetera. What's the time frame in terms of when they are, might, might be fully available?

– So they are available outside the United States today. Um So, um we don't at Fountain Life uh on the therapeutic side, we don't have, we don't provide stem cells domestically today.

Uh We send um people, we've vetted six or seven different stem cell clinics outside the US and the Caribbean and Mexico, Panama, Costa Rica, uh other locations.

And we uh we've sent uh our members to the Regenerative Medicine Institute in Costa Rica. Um uh Doctor Vince Gim Papa there. Uh just because the level of service and the science there, we, we think is, is very high.

Uh We've been looking with uh cellularity uh to implement an I N D um to look at uh placental stem cells. So we're gonna see this over the next, you know, increasing in, in capability, but under under really critically vetted scientific measures and data collection, right? We need to collect the data uh to a dent to make sure uh that it is safe and efficacious under what conditions it is.

So, so I think that's this decade. Uh but stem cell exhaustion is definitively one of the hallmarks of aging, right? I mean, uh if you look at stem cell populations and a newborn, uh compare it to someone in my age, you know, in your, in every different um segment of uh tissues, we've seen stem cell uh reduction by a factor of 100 to 1000 fold.

Um And that's challenging and, and challenging in your ability to repair and challenging in your ability to uh maintain uh uh functionality and vitality of those tissues and organs.

– Yeah. Yeah. And so like back to some of these supplements, for example, N AD, which uh is so important to um the health of our mitochondria. What's your opinion in terms of when you take these supplements?

Do you, do you believe they're actually going to where they have an impact? – So N ad obviously is, is not a supplement, it is the powerhouse inside the cell, right? Uh uh the precursor, you know, there's no carrier molecule for N AD to get it across the across the cell membrane that we know right now.

Uh And the precursors are uh N M N and, and N R. Um And uh I do take about a gram of N M N every day. Um Is it, do I feel a physiological difference from that?

Uh Maybe. Uh But I think it's more based on belief than anything else. And there is good science data in animal studies today, not human studies. There is a study going on right now um uh by a company called Metro Biotech uh run by a friend of mine uh which is doing a study with the US special forces. And they have a very purified form of N M N called MI-6 M I B 626 that they're looking at. Uh and they're providing under a clinical study under a uh a double blind study with special forces looking at increased muscle strength and cognitive capability.

And the early study results were very positive and we'll see where that, where that plays out over the next few

years. So, am I excited? Yes. Do I think we really hit the knee of the curve yet? No, I think we're gonna see uh a massive data sets uh being analyzed by A I uh in the next 1 to 4 years.

And then quantum technology is really um making a huge dent in this, in the next uh 4 to 6 years. Hm. It's uh quite a quite something else uh for us to look forward to.

It is and I think having something to look forward to is part of that mindset element. – Yeah. I, yeah. Yeah. And so what other mechanisms do you think are out there in terms of our ability to slow or reverse epigenetic aging?

– Well, there's, there's one thing which is important and um you may have someone from Fountain Life speaking as well. It's a company I serve as executive chairman of and co-founded with, uh with uh Tony Robbins and, and Mark Benioff.

Uh and Fountain Life has built these uh 10,000 square foot diagnostic centers where we do full body MRI brain, brain imaging, brain vasculature and A I Coronary C T Dexa scan genomics, 150 gigabits of data.

## Diagnostics, Baseline Testing, and Disease Prevention

And the reality is we are always in a state of some level of degradation degeneration. Um As you said, you know, after 30 it's, you know, our thymus start shrinking, our hormonal levels, start going down, our growth hormone levels start going down.

And so we're in a slow decline. And The other thing going on is that we start to develop diseases that were never preselected against because you had reproduced by the age of 30.

And so these diseases would occur later on in life and we're all developing cancers all the time. Hopefully, our innate immune immune system, our natural killer cells are finding those cancers and zapping them.

But there's another thing called immuno exhaustion as we get viral burdens in our body, our N K cells are focused on viruses and not cancers. And that's a, that's a challenge. So, one of the things that we do at found life is we do a uh an annual upload uh where you're fully digitized and then um quarterly additional testing.

And the goal is to find disease at inception. Um and zap it at the beginning, our bodies are incredibly good at hiding um problems. You know, you don't feel a cancer at stage one or stage two, you experience at stage three or stage four many times when it's too late, right? Uh for Parkinson's, you don't really have the tremor until like 70% of the neurons are gone and your body compensates for all these things and unless you're looking, you do not know.

So in our first, I think like four or 5000 patients going through all this testing, our members going through this testing, um We've discovered 2% have a cancer, they don't know about 2.5% have an aneurysm. They don't know about 14.4% have a significant finding uh that is uh could impact their lifespan that they need to know about.

And so uh I call this category, uh you know, not dying from something stupid. In other words, looking and understanding and then when you find something, taking action right away, you know, in like in the wildfire world, do you want to try and put out the wildfire after it's a conflagration or at the first spark, right? And it's the same thing here.

You know, you're gonna find out eventually. When do you want to know the beginning or later? So that's what we built with Fountain Life. Um We also built an insurance company called Fountain Health Insurance, which I'm very proud of uh where for your current health insurance for self-insured company? At 1000 bucks a month, we give your employees all of the testing for free.

So the health insurance instead of paying you after you're sick and have had your surgery. The goal of the health insurance is to keep you from getting sick in the first place.

So, um, again, there are lots of things that can be done in that regard. – You know, I think it's so important to get

baseline, baseline measures and then as you continue to take measures, perhaps every year, it's not only looking at you compared to the normal, it's also you compared to where you were a year ago so that you actually pick up on changes that may not be appropriate. – Exactly. I first time I did a full body MRI I discovered I had an enlarged aortic root and it was like, is that me or is there something going on?

And it hasn't changed in eight years. And so it's my baseline, which is good to know, right. And so understanding your baseline, like you said, Steve is, is super critical. – Yeah. Yeah.

So in terms of uh when we think about repair, cellular repair, uh a a more and more popular approach now is intermittent fasting, fasting, mimicking diets.

And I've heard people talk about, well, you have to do, you have to fast for two days, 48 hours before that repair process takes place. Others say no, it's more or less on a continuum uh that you can, you can trigger uh the process after 14, 12, 14, 16 hours.

What's your perspective on that? – So, listen, the, the work done by Victor Longo at U C L A I think is, is pretty definitive and has been uh vetted by multiple studies.

Um You know, the, the fasting mimicking diet. I actually just did it at this on January 2nd through sixth, right to start off the year. Uh And it's a five day diet. The first day is 1200 calories.

The second through fifth day is 800 calories. Um And uh it's uh the prolong diet is what it, what it is and it, I found it very easy to do. Um according to them, that diet is better than just a water diet.

Um Meaning the impact on uh on your physiology and uh uh and uh knocking out your senile cells and, and getting in stimulating auto is, is higher than if you did nothing.

Uh So, uh I found it sufficient enough that I'm, I'm gonna probably do it once a quarter. Um at least twice a year, but I hope for once a quarter. The second thing I've just started doing uh in my abundance 3 60 Community Steve at the beginning of the year and we, I just did these back to back.

Uh We do a 22 day no sugar challenge. And if there is one recommendation on diet over fasting over in fasting over plants over anything, it's eliminating sugar.

Um uh I think, you know, glycated of proteins uh of cholesterol is a root cause for much cardiovascular and neurological disease. And so I'm wearing my CGM, I've got my levels patch on my arm over here and uh let's see what my level is here right now. Let's see.

OK, I'm at 90 90 mg per deciliter. And so I, you know, I look to make sure I have zero spikes during the day. Um and trying to get my, you know, my uh hemoglobin A one C is been at 5.3.

I'm trying to get it down to five. We'll see if I can if I can do that. Uh You know, I take a gram of Metformin uh near as a friend. I, I believe the data that he has.

Um And so, and then I'm also taking rain. Um The data is reasonably good. Again in animal studies, there is a rain study that has just been initiated, I believe, to look at its impact and right now it's a lot of trial and error for people.

## Fasting, Sugar Reduction, and Metabolic Health

Uh, it's what do you feel is got enough upside and is safe enough for you? And what makes you actually feel good? I know that I feel better on, on a no sugar diet. Right. It's, it's difficult for sure.

But after a few weeks you're, you can, uh, you can break the habit. It's, it is, it's addicting sugar is addicting. And again, going back to our hominid ancestors 100,000 years ago, they didn't have sugar, there was no sugar cane plantations and, and you know, M and MS and Snicker Bars. I mean, it just, we never evolved for that. – Right.

Right.

Yeah. And I know that uh I've heard you say sugar is poison. It is. And uh and you know, it's one thing for people to know this, but it's, it's also addictive. So, um in finding ways to eliminate it or reduce it, it's really um a challenge to habitual behaviors of ours.

So it takes us back to the, to the mindset issue because really we have to be very uh incentivized and intentional in really following through with a lot of what, what would be good for us.

– It is, you have to care enough about yourself and your physiology and the mindset that I'm in is one that this, I'm investing in my future and the future of my kids, I have 2, 11 year old boys.

Um and I'm excited about the future and I want to do everything I can to maximize my physiology and health to get there. Uh And one other thing I'll mention, you know, this 20 day, 22 day, no sugar fast or no sugar diet.

It's hard to do on your own. But we have a whatsapp group with 100 and 40 of my uh of my 360 abundance, 3 60 members and every morning people are sharing their experiences, their weight loss, their energy levels, their tricks and trades and what they're eating and what they don't. And doing things in community settings is much better. – Yeah, I would totally agree with that.

In fact, community and feeling a part of community is, I think one of the keys to longevity as well and it's been shown to be one of the key factors. – It is being loved and, and having a purpose and being in family and being close friends.

All of things is very important. – Yeah. Yeah. I noticed another startup of yours and you know, I marvel at how many of these you were? – Number 26. Yeah. – Fantastic. The one I was thinking of is the vaccinate.

– Oh, yes. – And you've talked about it as um one of the goals, there is a vaccine to address cardiovascular disease. Can you say a little bit about that. – Absolutely.

Absolutely. I'm super aware. That's that. Yeah, super excited about it. So, uh vaccinating is a company that manufactures a uh a peptide vaccine uh against uh proteins in the body.

So, unlike a vaccine that trains up your immune system to attack a foreign virus, uh this is looking at uh at endo uh you know, endogenous proteins in your body and I have hyper cholemia. Uh my dad had it um and I handle my uh my high L D O levels by taking something called uh repatha, which is a monoclonal antibody.

And uh it's a monoclonal antibody against an enzyme in the liver called P CS K nine and P CS K nine in the liver produces low density lipo proteins, which is the bad cholesterol.

And so if you block the P CS K nine enzyme, uh you can reduce your L D L levels and it does it very effectively. Um And so in a vat wherever they produce it, let's say in New York, there's these clones of B cells producing these antibodies and the antibodies get delivered to me in a self injecting five M L syringe and I inject myself every two weeks um uh in my thigh and uh it's great, but it's 1000 bucks in injection. It's, it's expensive, right?

I say five, I'm sorry, it's 1000 bucks a month, 500 bucks in injection and it's twice a week. So it's inconvenient at twice a month and expensive and I can afford it.

But it's a third line defense. But if you can reduce your L D O levels, it is one of the greatest um combatants against heart disease and stroke.

## Community, Purpose, and Social Connection

So uh a year two ago, we started an internal program uh to see can we develop a uh a vaccine to stimulate your immune system to create the same antibodies produced by that vat of B cell clones?

In other words, anti, can you get your immune system to generate antibodies with high specificity against the P CS K nine enzyme? And in fact, we can uh we just finished our studies in primates.

Um And it was exceptional at or above anything else we've seen out there. Um And uh there is a very high uh con uh conservation between primates and humans. So we're now entering human trials and unlike the $12,000 a year, uh This and an injection, you know, uh 24 injections a year, this would be two injections a year every six months and cost $50, right? So, because these, these vaccines are very low in cost uh to produce.

Um and so what we have is the ability to do preemptive vaccination of individuals against developing heart disease and stroke. And there's evidence in lots of different societies that, you know, you can start to see cholesterol build up again.

This is not just cholesterol by itself, it's all it's glycated uh cholesterol, right? Sugar sticking to the cholesterol and sticking to the side and, and generating soft plaques that can evolve and, and cause a heart attack.

So, yeah, so this vaccine uh from vaccinate is uh super excited about it. – And again, what's the time frame? – We're in human trials now. Um I, I not sure, you know, we're in phase one for safety. Uh And we have this vaccine platform.

Uh we have had in hundreds, probably thousands of humans uh for other targets. Um This vaccine platform has been, we have a COVID-19 booster that has outperformed everything else that is uh looking for is is in its registration trial right now.

But we also have a vaccine against Alzheimer's against uh a beta.

## Vaccines for Cardiovascular and Other Diseases

We have a vaccine against um uh C G R P uh for for uh migraines and one against Parkinson's too. So the system has been in humans and is safe. Uh And we just need to get the efficacious data to be able to go to registration or trial for that.

– Do you engage A I in this development process? – We are just now um honestly, any vaccine has got a very simple target list, any place there's a monoclonal antibody, uh we can train our system to produce those same antibodies that are manufactured outside the body as a monoclonal.

– Well, this has been a fascinating conversation. Peter I so appreciate it. And, you know, we're in this field. That's almost like the wild west where it's so rapid and so many things happening. So, uh, Rob and I are so, uh very interested in not only finding what might work but also what's safe and, uh, it seems like that's also something that we should always take into consideration the safety of whatever we're doing.

– Yeah. No, for sure. I mean, I think the big, what makes me the most excited is uh we have in medicine been flying for the most part blind uh since its inception and it's just now um really with the emergence of, of sensors that we wear, that we inject that we consume that are in our environment.

And then the massive power of A I uh we're gonna see a fundamental revolution not in 10 years or five years in the next two or three years in which we're, you know, we're moving medicine out of the hospital, out of the doctor's office into the home, right? I've got an apple watch is uh levels, continuous glucose minor and or ring, you know, and there will be uh many others and all of my data will flow to an A I that knows what I ate for breakfast, lunch and dinner, how much I exercise knows my genetics uh understands my blood chemistries.

And as a result of all of those things coming together is able to reach conclusions, analyzing the, the data that no human ever could. And so this is the magic that's before us. Um And what makes it exciting to be alive right now? – Yeah, definitely.

And just the ability to measure uh and monitor increases a person's awareness which in and of itself creates

change. So all of this is, is wonderful. You have a, a great website.

I've been on it. I've engaged in your mindset program and others, You have a wealth of information. How can people uh find that information? Can you give us the, the website?

## AI, Wearables, and the Future of Medicine

– And yeah, if you go to just my last name, Diamandis.com, I put out uh two tech blogs per week. Typically on one's on health and uh and biotech focused ones on exponential technologies and how they're transforming industries.

There are, I have a you know, a program on finding your massive transformative purpose. And then I'm on social media. I'm just @PeterDiamandis for Twitter and Instagram. And my, I have a podcast called Moonshots and Mindsets um available wherever you get your, your podcasts.

And it's really focused on what are the amazing moonshots that we're taking right now. And one of the biggest ones is adding 10 2030 healthy years on your life that bridges you to get the next 10 2030 healthy years after that.

– Well, we will look forward to all of us um living that long and getting to that velocity stage where who knows what will happen next? So Peter again, thank you very much. All of your links will be in our show notes, so people will be able to reach you. So again, thank you so much. – My pleasure, Steven, take care to you and Robert. Bye now.