Podcast Intro and Guest Background

First off, you should not be eating at least two to three hours before you go to bed every night. Ideally, should be tapering your calories as the day goes on.

Dinner should NOT be the biggest meal of the Dose it right before you go to bed. Empty stomach. And with testosterone, I use once a day. I tell most just once-a-day, but some people are like, they really want to bulk.

But I sleep like a baby. When I'm on a cycle of it, right now I don't know why I decided to cycle it. Hi, welcome back to the Healthy by Dr. Jenn podcast.

Stay tuned, today we are going to talk all about peptides from actual doctors, medical doctors. So stay tuned. Okay, so we're going be talking with Dr Russ, Dr Russell VanMalley.

He is a fellow DO. Which we love. And we actually met last conference and glad we were able to keep in touch and could have him here today. He went to medical school at Michigan State, did an internal medicine residency at Western Michigan.

and he's in private practice right now at his company. he loves working with insulin resistance, which is such a problem in the United States. We moved to Arkansas, what, a few months ago.

And he lives with his wife and two kids under two. So we should also talk about stress levels. Welcome. I'm so excited to have this conversation. You're having me.

Yeah. so you, you love peptides. you were like, I could talk. About GLP-1s all day. If you had a favorite peptide, it would be GLPs. Yeah, the class as a whole, what it's doing with everybody in America right now is amazing.

Yeah. And I think there's a right way to do it, and I there is a wrong way do do. I and think the vast majority of people are doing it the wrong. Yes.

It works with, you know, lifestyle interventions, not alone. it will work by itself, but it has not done the right because it is just going to bite people in the butt later on down the road.

GLP-1s, Weight Loss, and Lifestyle Foundations

So. Who wants ozempic butt? We don't want that. I've heard about Ozempic, name your body part, I heard Ozmpic that, so. We ladies, we still want to have a butt.

Yes. But I joke, but people are doing it the wrong way. Like it kind of like got out of control. Yeah. People look way too skinny. Why does that happen?

Well, they ignore the basic cores of lifestyle because let's go back at first. Why did people get there in the first place? You know, obesity, the crisis of obesity in America is huge because of our diet and sedentary lifestyle.

People aren't changing their diet. They're not changing in their lifestyle, but they're going on a medication that alters the way our body handles insulin, which is great.

It's reducing risk to an amazing degree. However, they're still not eating healthy. They're just eating less and they are still exercising, which is a big problem because when you lose weight, you're losing everything.

You lose fat, but yes, your butt, a huge muscle in your body, and therefore everything just gets saggy and turns into

nothing. The biggest problem we're going to see in five, 10, 15 years with all these GLP-1s is osteoporosis is going to go through the roof.

Yeah. And people are going be surprised, but we're not surprised. But isn't at the point more osteoporosis than they put them on, you know, bisphosphonate or something instead of doing that.

And that's why, we have to like for integrative medicine, like save the world, or just teach. That's the big thing that I like. So what are the statistics?

Like how many tons of people have been on GLP-1s? I know like people, so many people who have tried them and they don't even talk about it. you can get them anywhere.

And I talked to patients about this. They're like, can I talk about with you? I'm like yeah, let's talk why I didn't suggest it yet, why it's a next appointment thing, and why we can start a lower dose now.

I tell them, I know you could get a GLP-1 tomorrow, wherever you want, but they come to us because we know how to use peptides properly. So what is the correct way to get it?

So go back first, it's still before you entertain the GLP-1 conversation, you got to make sure people are on the right track to getting healthy. Yeah.

Because yes, so you can make them lose weight and that's, that easy medicine. Doesn't take skill. It does not take skills. So you have to start there because if you give them the medication, you can make them feel like that you're doing something good for them.

But you and I both know that long-term that's not fixing the root cause of the situation. I always start that initial conversation with, hey, these are my non-negotiables.

Even if we want to entertain the concept of a GLP-1, which I think is great, It's like we have to start talking about these three things. We have talk about number one, the basics of hydration.

You need to drink only water. I learned this from Dr. Erdborn, he was my mentor. you do not drink your calories. Even smoothies? I even say smoothie. If you have insulin resistance, you should not be drinking smooth.

There's a million other ways that you can get your fiber, your nutrition that does not need come in a smoothie. What about like a protein smoothie? I'm splitting hairs here.

Yeah, no, this is fair. These are the counter I get every single time. So my first rule is don't drink your calories. My second rule, tell me all the ingredients and everything that goes in your mouth.

Then my counter to that is what is in you protein shake. And most people have no idea because it's a triple chocolate fudge protein powder that they think they're just getting protein but now they are mixing it with pineapples and bananas and mangoes and making it taste good when it is just a sugar bomb blended to where your insulin and your glucose is going to spike and people are not exercising after that so where is it going?

Sadly, if you don't make your smoothie at home, it probably has added sugar in it. That's the thing. So when I had my brick and mortar for a decade, I would just always run late on appointments, of course, and I will just drink my lunch.

I have a protein smoothie, 30 grams of protein. The problem with some of these people on GLP-1s, I encourage them to hit protein goals. And I'm like, you're going to have to do a whey protein because they're just not hungry.

There's no way they are going hit that. So that's my caveat. But I am like you make it yourself. I give them the clean brands I recommend. For me as a woman, like I have a clear whay protein drink over there in case I didn't have time to sit and eat lunch.

So I think the preparation is really important that for the protein goal. So sometimes that can be helpful, but I agree. It would be better to make like just burger meat or ground meat, or have eggs or something like that.

But yeah, like smoothies and spinach smoothys and bananas and pie. Like you said, it's a no go. Yeah. They're branded as these health foods, health drinks when In reality, they're just sugar bombs because if you're a fruititarian, what happens?

You don't have any muscle mass and you get diabetes. Oh my gosh. And it's so funny because have you seen like those TikToks or Instagrams like this lady eating a whole watermelon and she's like all skinny and stuff?

I'm like, yeah, but you don' know what her liver looks like. She could have fatty liver. I've seen patients that are very thin and people think they are healthy and they have early fatty-liver disease.

That was one of my biggest revelations in residency when I was doing labs on my own, now ordering everything, like the whole panel. And I'm like, I would see an overweight person and I'd get their labs, the labs that I don't run now because I do a lot more labs.

But those basic labs I got back in the day when people were overweight, ordering these labs thinking they're gonna be a mess.

Nutrition Rules: Hydration, Protein, and Smoothies

And they were like almost stone cold normal. Then I got the labs on the skinny people thinking that it wasn't gonna a problem. They were actually the ones that probably had the worst diabetes than the bigger people and it was how people manage insulin in their bodies.

It was almost like obesity's this protective effect because it goes outside of your blood vessels into your fat instead of hanging out in your body vessels and doing all the damage there.

The biggest problem, like going back to like the protein and the smoothies and whatnot, protein, just like creatine now, everybody's talking about creatines.

Protein is in everything. Starbucks is like you add protein to Starbucks garbage. But people still aren't doing the basics, right? If you are just eating protein and you're not doing any strength training or not any exercise, that is going to get converted.

That's a calorie, just like anything else that you going be in an abundance of and it's going lead into fat. Yes. So protein, going back to my non-negotiables of a GLP-1, it's like you got to stay hydrated because if you don't, you're going to get constipated.

You're gonna have all sorts of GI issues. you gonna feel really cruddy. Number two is you gotta maintain adequate protein intake. And number three, resistance training is a non negotiable.

Right. I agree. Those are my big three. Hydration, protein and intake and resistance. Yeah. What supplements do you pair with the GLp-one? So everybody that comes into my clinic, if you will, my telehealth clinic is always on the basics of vitamin D, omega-3, magnesium, a good B complex in plus or minus DHEA.

I think that's like my standard cookie cutter for the one that, hey, I just want the absolute basics. And then I'll start throwing in some antioxidants and whatnot, depending on their mitochondrial status, if I think they're super fatigued.

But that's generally where I start. I Think GI health is huge. So you've got to be on some form of pre probiotic fiber supplement, which I love working with.

Yeah. Yeah, for those are the basics for the GLP one, like I add on some other ones that I want them to be on. Like

I do have them take creatine. Yeah.

Non-ohydrate. I'll be like, you know, if they're not already taking it, I'd be five grams. And then have you heard of a plant peptide, plant-derived peptides called PeptiStrong?

I have not. So I'll share that info, but this company, Narita from Ireland, it's an AI technology and Peptis strong is great. So it helps maintain muscle basically.

Yeah. It's pretty cool. I will add that on and it decreases muscle soreness post-workout, which a lot of the times is a problem with. people just starting to work out and lift, right?

Or that's their excuse. So I add on that one. And then sometimes I'll add for women that are pretty insulin resistant, I will add inositol at night. Oh, yeah.

I love inostol. But definitely the magnesium because they're also And I tell them, I'm like, if your bowels slow down, let me know. We'll add some gallbladder liver support.

You know, we got to work through all this. But I've noticed when we don't do the high super therapeutic pharmaceutical dosing, they're not getting these side effects.

No, I was just about to mention that. That is, they're going to get those problems if they follow the standard cookie cutter dosages of start with, talk about semaglutide.

You're gonna start off with 0.25 milligrams on day one and on, you know, at the end of week four, your going up to 0,5 milligrams. At the week eight, it's just like, hold on a second, let's go back What are we trying to accomplish here?

Are we just trying lose weight from a vanity perspective? Or are actually trying improve somebody's health? I thoroughly believe in the concept of you do not give a man a fish, you teach the man how to fish.

in so many conveniences, everything in medicine, it's really easy, really quick to just prescribe and you get results. That's one of the things. It's hard to knock it because people are getting results by not doing anything at all, but there's going to be problems.

I know, and it's like, they look good, we know losing weight decreases cardiometabolic risk and all of that, but they're not looking like you said, like 10 years down the road, osteoporosis, muscle, rebound effect, I really believe peptides should be cycled.

Absolutely. It's when you drive a car, do you have your your foot on the gas pedal the whole time? No, you don't because you would wreck, right? But it's just not good.

So what are some of your favorite peptides to pair with a GLP one? So first I like to use the lowest dose GLP-1 that gets me the results that I want. Because the problem with going too high on the dose of GLPs is you lose muscle mass.

And muscle mask could arguably be the number one thing I prescribe to anybody. If I can prescribe you muscle masks, I have now fixed so many different issues.

We fixed insulin resistance with more muscle. So, in addition to like creatine and protein and resistance training, you pair a microdose GLP-1 with these growth hormone-releasing hormones.

Like those are by far my favorite and the class is, Sir Morlin. CJC, ipamerelin, and tessemerolin.

Supplements and Dosing Peptides Safely

And I find myself using tessameralin the most because I think it's the more potent and it has the visceral fat reduction component to it, which I really like.

Clinically and objectively, you see higher amounts of growth hormone, IGF-1, when you use tesemeraline as opposed to sermerelin. I like CJC 1295. I don't know, I just like hung on to that one since I started using it.

But yeah, so let's talk about growth hormone secretagogues, how you use them, because you'll be horrified by this. My husband and I were out to dinner with a friend and you know he's getting black market peptides, research purpose only, you just brogym peptide, which you guys, this is dangerous.

This is danger. Don't do that. That's why we're here talking about this, Work with a doctor and he was just taking it like twice a day, every single day.

Like just take it. And I'm like, hey, five days a week, take two days off because we're talking about hormones that are pulsatile. This is how God made us with rhythms, you know, and order.

I mean, when we put chaos into it and do things like go rogue, it's not good. So I had to kind of tell them, I'm like, yeah, so you're going to do it on an empty stomach at night.

If you want to add an extra dose in with working out. Now I would like your standpoint. Do you like to. Free or post-workout for your growth hormones to create a gag?

What do you favor? So people very, when I dose it, if you do that next dose, you know, for more muscle. So, uh, post workout, If. You're gonna do a based on a workout.

That's what I would recommend. Some people do it different. And that I don't think is as big of a deal as making sure you're taking breaks two days off a week and at night.

Yes. So why at nights? Why would you do that at a night? Girls' Worm was releasing in a pulse style fashion throughout the entire day. But that first wave of deep sleep is when you're going to get your biggest pulsatile flow, if you will, of growth home.

Yeah. So you want to pair it with that. And the biggest thing that I, my non-negotiable, because, and this helps too, this stuff is not cheap. Right, true.

Like anything in the peptide space is cheap, I go, hey, you are going waste your money if eat before you go to bed. Why? Because you've got insulin in your body, cause most people's late night snack is generally not healthy.

No one's eating sardines. Exactly. It's not just a pure fat or pure protein. There's always something sweet. So if you have insulin, it is going to completely knock out any effect that growth hormone gives you because growth hormones secrete mostly at night and you cannot and should not have an insulin spike at nighttime.

That would be really bad for our health. We'd probably not be around if hormones work that way. What I tell people is, First off, you should not be eating at least two to three hours before you go to bed every night.

Ideally, should be tapering your calories as the day goes on. Dinner should NOT be the biggest meal of the Dose it right before you go to bed. Empty stomach.

And with testosterone, I use once a day. I tell most just once-a-day, but some people are like, they really want to bulk. But I sleep like a baby. When I'm on a cycle of it, right now I don't know why I decided to cycle it.

You should definitely cycle. Well, no, I mean, just haven't cycled it through for a while. I'm just like, it's been like six months. So I was, and I just, forgot how good I feel like sleeping wise, how, you just it so good.

Yeah. Your dreams, super vivid dreams when you're on these things. You sleep deeper and you get a better

pulsatile max of your growth hormone. And when they're used right with.

resistance training, consistent resistance, training and a proper diet, they work really, really well. But you got to, you gotta earn it with these things.

They don't just like magically make, beautiful physiques. You have to earn. Yeah, and I agree with that. And I tell patients, like I believe in this, I've called it like peptide prep, where we need to do some basic lifestyle things and detoxify and things before you start the peptides, because they're gonna work better and they are expensive like you said.

But there are times where I'm like, okay, we're just gonna go into it. Like for example, KPV and certain peptids that like if there's like a mast cell thing and we are working on other things, yeah, were gonna calm things down.

But these ones, you know, especially like, yeah, GLP-1s, like you want to make sure that they're pooping every day, their liver is working, because if they are losing fat, I mean, they need to be able to handle that from a detoxification standpoint, too.

Absolutely. So yeah. With everybody, peptides work really well when the foundation is set. If you are not working out, if you're not eating healthy, and I'm honest with people in my head, that I just don't think this is the right thing for you.

And honestly, we should evaluate if I'm a good fit for you as a doctor because this is what I am going to recommend to you today and what am I going recommend for the rest of my career.

Right, because you care about that. You know it works. Yeah, you can go somewhere else. This is the way I practice and I truly believe in this stuff and it's like I just want to have a relationship where we're both, You expect a lot out of me, I expect lot of you.

Yeah, no, absolutely. Now, the wolverine peptide stack. Can you tell us about that? Because that's pretty popular. Sure, sure. So the Wolverine Peptide Stack is a combination of BPC 157 and TB 500 or thymus and beta 4. And the combination, they both work on similar mechanisms.

Growth Hormone Secretagogues and Recovery

They increase collagen, the increase nitric oxide, increase overall growth signaling. So you combine them both together and they do really well for injuries, chronic injuries acute injuries.

I just read an article on, because they help with the collagen. And so they're very good for your vessel health and blood flows the key to any health condition, health in general.

So if you're improving the collagen in a joint, why would that not be improving collagen, in your vessels? Like anybody that has heart disease, post MI, heart failure, you name it, just plaque, heavy plaque burden, anybody would benefit from there.

When I get out the BPC, the Wolverine stack, I just am silly, and I'm like, Wolverene. And I start going like this, my husband's like Jenny. I don't want you to look like a man.

This one will not make me. Like I am just being silly because I think the name of it is so funny. But that one's a little bit more volume of an injection.

That and Matzi and my husbands, he does not like injections. It's so fun. When your kids get older, you should have them give you your injections, but I won't let them inject me, they'll inject my My 13-year-old felt like, oh, he and pretend to poke him.

It's so funny. In a couple of years, you could have your kids inject your peptides, but I talked to them about it. I'm

like these are peptide, they're chains of amino acids our body makes.

These are to help us age more gracefully because we live in a broken, fallen world and there's death and disease. Anyway, my kids are just used. They're like what are you doing now?

They are used to it, we hope and we pray that, you know, things are kind of smoothing out for the peptide world. But, there is this discussion and I would like your take on if people want peptides, they should be what?

Going to a physician that prescribes a prescription from a 503 compounding pharmacy because safety is important. So, explain that because I think this is like, You know, it's just kind of gotten out of control, you know where we've been using peptides for years and years, and it just is getting popular.

And yes, people should get access, but we have to do it safely. Yes. So I'll be the first to admit, I tried the research peptide out for myself. Okay.

You know, I had, the experience was fine. I thankfully did not get a bad outcome or, you know react to it. And it worked out fine for me. But if the purity is not as close to a hundred percent and you get 1000 people that are a hunt, say a 100 people and yet 99% purity, one out of every hundred people is going to have a negative effect.

That's not good. There's a lot more than a hundred people doing peptides. More than 1,000 people do peptide. So everything in medicine should be controlled and the peptid space is like the wild west right now.

Hormones are too right. Yes. It's wild. And we don't want people to get hurt. I know, and that's the thing. It is hard. The amount of guys that I get, I borrowed my buddy's testosterone because he said it was good for me and I've been dosing it once every three weeks for the last six months.

What is going on? Dude, we need to talk. But back to the Panties, it is the Wild West right now. It's gotten a lot of hype for good reason. Yeah. it just needs to be controlled.

And selfishly, I want to have that control because I know where I'm sourcing it from. Well, and it's not selfish. It's also, this point isn't talked about a lot.

If I'm gym bro, whatever, at the gym, or if I am even a health coach, I can say whatever I want. I don't have a medical board to answer to. So doctors are held to a higher standard and that protects the patient.

Yeah. so I think that everyone's a peptide expert on the internet right now. Yes. And they're like, but you're not, because you don' work with patients.

And yeah, so I think that that is very frustrating. It can be done correctly. And we're trying to do that correctly by seeing patients and giving that good care.

So people just, you do need to look out for this. Yeah. You and I have a lot to lose. Multiple state licenses. Uh, you know, years and years of training, hundreds of thousands of dollars worth of education.

And this is our careers that we can't just like start something new tomorrow. Like these are our career. So we take them very seriously. Also, we have to have clinics that pay for malpractice insurance, but, with great power comes great responsibility.

Peptide Safety, Sourcing, and Regulation

We should be taking charge of knowing where our stuff comes from. Yes. I'd treat my parents, I treat friends, family, and I would not treat you as my patient any differently than I will treat them.

I want them as healthy as possible for as long as I can. Guess what? I'm not giving anything to them that I wouldn't give to you or do for myself. I only source the peptides from 503A, 502B pharmacies, which is just kind of the

pharmacy lingo for very scrutinized, a lot of oversight.

They have to pay a hot to make sure their licenses are up to date, their facilities are clean, they're using pure. formulations and they know where it comes from.

Fun, you know, kind of quick story. I get a lot of calls to do side hustles with people. And a lot of these entrepreneurs are coming to me and be like, hey, peptides are a hit right now.

I'm like yeah, been doing them for years. Like, I get it. And they're like I can make a lotta money doing peptide. So I was like okay, where are you going with this?

He's like well I am getting my peptidies from X, Y, and Z out in China. Okay. The guy is like the last batch I had was a bad batch. and I threw up a few times.

so I decided to throw that one away. But I only lost a couple of grand. but I will not give that away to patients. Is this your like, this is your regulatory process?

Is your safety protocol like injecting? And let's not forget, like we are literally getting injections to inject through our body's defense mechanism, straight into our blood.

It has to be from a pharmacy, a 503B. Well, people are so desperate and then these peptide companies and stuff that are doing research purpose only and they have health coaches that will tell you what to do and how to buy and to how reconstitute it.

I mean, they're making so much money and that's the thing. And I've seen this a lot in the functional integrative biohacking space is all these investors just look where people spending their money.

Sure. Then they try to make it cheaper and it's just not as good as it was. It's so frustrating. And they have nothing to lose, right? They have… They don't care about the people.

That's why… I feel like that's a little tougher. They're looking at making money and not making people better, which is what we care. It's so hard. But it's good.

You turn that guy down. Oh, yeah. It was just the conversation. I was like, hey, man, I'm not your guy. And I'll be over the great rest of your day, and I am just not you're guy I told my wife after these calls, honey, you have no idea.

what people are actually doing. Even when you buy something, even on Amazon. It's sketchy. I don't tell anybody to buy anything on the Amazon, tell me where it came from, just like your food.

Where did it come from? Even like, it's really hard for even our foods that we think are good for us to say where it came from, who touched it. Like, is it good?

Is it bad? Who knows these days. But if you're injecting something in your body, like gosh, make sure it is clean. Right. It's crazy. Well, thank you so much.

it has been a great conversation. I am going to do a lightning round with you. Awesome. What is your favorite biohack that actually works? Ooh. So my favorite biohack is the sauna.

Yes. By far. I think… Tried and true….is the best one. It's, I say I love passive income. And I have one rental home that I've held onto. Passive income is great.

You don't do anything. Yeah. Just kind of sit there and you get healthier. From a bio-hacking perspective of like something that people can get over the counter.

Mm-hmm. is the best cheapest entry point thing that you can do for biohacking because it tells you instantaneous feedback on what you're doing with your health.

Lightning Round: Sauna, Alcohol, and Intentional Living

Yeah, that's good. If you could eliminate one toxin from the world right now today, what would it be? Alcohol. Alcohol, good one. Yeah. Easy. I mean, I went to Michigan State.

And I had years of drinking Thursday night, Friday night and Saturday night. It killed my body and I'm probably going to pay for it later down the road.

But that is something I've just, I have a really hard time, even to this point, recommending any alcohol, because there's no good, there is no safe amount of alcohol.

Well, for women, they can have zero. It used to be like two glasses, it used be one glass, and now it's zero glasses. Or we increase our cancerous because of breast cancer.

Yeah. Because of estrogen metabolism. But yeah, my husband and I just went, we're done drinking. We're gone. And I don't miss it. See, the thing is, I'm like not done drinking.

I'll probably have a drink every once in a while, but it's nowhere near like every weekend or every, how would you say, maybe every couple of months I have something to drink.

It's not a coping mechanism. And I just don't, honestly, feel like crap every time I drink, so. The older you get, your body, you're mitochondria are…

Yeah, this is always… I don' even feel good. Okay, and then one word to leave our audience with for the week. My favorite word on the planet is intentional.

That's good. Be intentional about everything you do from the time you wake up in the morning to how you treat your spouse to, how, you, treat, your children to your relationship with Jesus Christ.

Like you have to be intentional, about, everything. And if you don't, The opposite of intentional is just kind of lackadaisical. You're just kinda living, you know, doing whatever.

That's when I think the devil kind takes in and takes over us and leads us down a path that we don't want to go on. And that's so good. So good, thank you, Dr.

Russ. How can everyone find you and tell us if they want work with you? Are you taking new patients still? I am taking a new patient. Oh, there we go.

Yes. My company is called blacksheephealth.com. Which we love. When he told me that, when I met you, I just loved that black sheep. It's just so funny.

So good. Yes, but I am taking new patients and love with, it's a really, It is an intense program. I work very closely with people, so I don't take very many people.

But they expect a lot out of me. And I expect out a them. and it is truly a true doctor-patient relationship. Great. Thank you so much. Glad we got to talk.

Dr. Jin.