Thyroid Health: Diagnosis, Hormones, and Treatment Transcript

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Podcast Introduction

We know they're going to benefit the quality of life is depends on them having the right amount of thyroid. Right. Don't forget that thyroid disorders, because you're, you are in this field.

It is that is tightly associated with so many long-term illnesses. For instance, it doubles you. If you have a low thyroid, It doubles your chance of getting Alzheimer's.

The Parkinson's is like shaking disorders. There's a whole lot of longterm effects that you, that may want to fix from an inherited thyroid disorder. it comes from the appearance.

Hey there. Welcome to the Recharged Biomedical Podcast. I'm Dr. Edward Park. If you're curious about regenerative medicine, you've come to right place.

We're diving into the latest breakthroughs in telomerase activation, stem cell exosomes, and all the cutting edge science that's shaping the future of healing and longevity.

Let's get started. Hi, everybody. This is Dr Ed Park, your host at the recharged biomedical podcast. Today, we're very, very fortunate to be joined by Dr Daryl Turner.

Dr Turner, thank you. Dr. Ed, thank you very much for inviting me to discuss quality of life issues.

Thyroid Basics and Body Temperature

Absolutely. So we'll just cut to the chase here. We're going to talk about the thyroid gland, which is this butterfly shaped thing overlaying your larynx.

Most people don't know or maybe don' realize that the thyroid is the core sort of thermostat of your body, hot, cold. So people run hot. It's very obvious.

They're sweaty. Uh, they have a good mood. Their elevated. If they're running cold, They might have dry skin, constipation, low energy. But every cell in your bodies somehow responds to this temperature, right?

Correct. In fact, the, uh, th the thyroid is a master hormone and the master regulator of your wellbeing for your whole body. Not very many people think about it because it's such a small little gland and yet it controls everything.

As you said, it controlled the temperature of body that was discovered by a bro, a guy by the name of Dr. Broder Barnes. who discovered that if you do the basal temperature, that the temperature first thing in the morning, people with hyperthyroid always have a low temperature.

Low temperature means that within your mitochondria, you're not burning your fuel as efficiently as you should. So your hands get cold, your feet get called.

So as soon as I shake your patient's hands, if they got hot, cold hands. I suspect that they have a thyroid problem and I say feet cold and yes. And then you touch the tip of the nose with a break and cold.

That's a dead giveaway that the have low body temperature and they possibly have an iron disorder. Again, yeah, it's a very underappreciated, I think, organ and function, even though it is quite literally the scent temperature that you're operating at.

And, you know, if you've ever had a long-term mate, some people like to sleep hot. Some people will like sleep

cold. But, whenever people are wrangling and worrying about their thyroid function.

If you ask them a few questions, you can tell if they're high, low, or somewhere near the middle, right? Because you kind of get more thyroidism in its extreme.

Yeah. Thyroid not only controls your temperature, but as you said, it slows the whole body down. So one of the slowing processes is to be more constipated because he slows, the body slows down, But the brain function slows them.

In other words, A person with who is hypothyroid, which is the majority of people, according to Broder Barnes and Terry Hurtog, who I co-lecture with, they postulate in the books that about 80% of the people have a thyroid disorder.

We're approaching patient number 3 million now and all my doctors around the world have confirmed that it's about 80% of everyone has a thyroid disorder.

I don't doubt that. You know, I'm often feeling kind of cold and low energy, but so let's dumb it down, break it to first principles. Shall we? So basically this butterfly shaped organ.

creates T4 and T3. What that means is four iodines and three iodides. And so when the blood tests in your serum measure the T-3 and the t-4, they have separate assays for those.

To be bioavailable, the more potent form is T 3. So your tissues need to deiodinate, take off one of the iodine to make the active T three. Okay, so, when you get a thyroid test, you have really two most important things maybe.

They can order five or six, but the bottom line is most people have a competent regulatory system in their pituitary, which creates TSH or thyroid stimulating hormone.

Thyroid Testing and Reflex Measurement

So in response to low levels of active, whatever T3, T4, you get a high TSh. If you're hypothyroid, your Tsh is usually highly sensitive. It's tested.

It's high. Whereas if you're the other way and you excess in thyroid, you are sweaty or you know, whatever, your manic. then that is going to give you a low TSH from the thermostat, the regulation in your brain, right?

So forget all the reverse and the esoteric and this and that. Basically the blood tests are good at detecting gross abnormalities. If you have a high TSh, you're hypothyroid, if you've got a Tsh, your hyperthyroid.

Correct? It's sort of correct, but don't forget the test only according to the head of the endocrinology society, 18% afro. That is the problem with blood tests.

Right, we complicate it just like with the sex hormones. We have what's called sex hormone binding globulin, like we have the thyroid binding globule.

So the available resources are largely bound to thyroid-binding globilin. And so what you're talking about is tissue activity, right? So there's a variance, you know, how much is really indirectly measurable through the serum levels.

What are the cells in your body seeing in terms of thyroid effect, Yes. In fact, we, w we like to look at the endocellular and artifact of thyroid function, which is in the tissue brain.

And, and to do that, you've got to at look the speed of the reflexes, the olfactory method. Well, since you mentioned it, so you devised this wonderful device.

I saw the video and it creates a reflex to your middle finger, I guess your brachioradialis or whatever muscle, And it

can precisely measures how fast.

that response. And if you're hypothyroid, it's slow and latent. If you are hyperthyroid it might be fast. So that's a direct real time measurement. Yeah.

But in general, we need to be summed up. Right. This is called the thyroflex and clinicians can license this. It's 98.5% accurate. That's because the reflexes are a circuit that are subject to your state of thyroidism.

You're hyper or hypo, It'll show up immediately without lying. in your reflexes. Yes, in fact, the largest reflex in you, your body is your heart, which is controlled by your thyroid.

Slow pulse rate, you are hypo. Fast pulse rates, that you're hyper. And a regular heart rate is an indication of autoimmune. So let's pivot slightly to the two.

Okay. Well, first of all, we need to get out of the way. Iodine deficiency, right? Because one of reasons we know thyroid disease is high is because of, let say, inadequate iodine consumption, which comes from things like shellfish, but other things.

So it's just why the salt companies graciously agreed to add iodine back to our iodized salt, correct? But if you're in a situation where your iodide is insufficient, then you won't make enough thyroid hormone, right?

You make enough thyroid hormone, unless you have an inherited hypothyroid problem, which is a genetic problem. Which is what I specialize in. But it is conversion of T4 as you mentioned before into T3D into the free active form.

that iodine plays a major role. The iodide or I2 knocks off the iron of the T4 and converts it into a usable form called free T3. So iodite is essential.

Let's say you're eating ramen noodles and Appalachia or whatever, and then you don't get enough iodides, then the things that people may have heard of would be goiter.

You look across the table and the fellow or the lady has a swollen gland, that could be a sign that you gland is hypertrophying to compensate for the lack of iodine.

Okay, which could usually result in hypothyroidism, right? So that's something people have heard of, goiter. Well, we won't talk about nodules. Nodules are just lumps or gross, often benign, sometimes malignant.

But the two biggies that people know about are autoimmune in two flavors, Graves and Hashimoto's. So Grave's will cause that deposition of tissue behind the eyes and the bulging eyeballs.

That's right. Because of an antibody that mimics TSH, right? So the T SH mimicking antibody creates N-organ excess and hyperthyroidism is a feature of Graves in addition to the bulging eyes.

Yes, correct. That's how you pick up the symptoms of someone having Grave's bulge in eyes? Yeah. And so, you know, that can be treated with radioactive iodide.

It sounds very extreme, but it works. Because the iodine is so preferentially exclusively used by the thyroid, they can just kind of nuke it, right? Yes, That's right.

Yes.

Iodine, Goiter, and Autoimmune Thyroid Disease

So if someone, I think New Zealand is low on the nucleus, according to the billionaires who are getting passports, But if somebody drops a dirty ball on your city, You should have iodines around.

because the first and major complication is radioactive accumulation in your thyroid. So if you have, as I do, a 14-day supply of iodine, it will block briefly, the incorporation of radioactivity into your thyroid, right?

Yes. In fact, when the, uh, Japan had its major earthquake and its nuclear power plant was destroyed, I got enormous amount of requests for high dose of iodine.

I put all our patients on the high-dose of Iodine as a precautionary effect to stop any damage to the thyroid from radiation. Yeah. And again, that's why we just had on our interventional radiologists, why they always wear the neck strap because thyroid is one of the weak links in terms of getting cancer.

I just got an x-ray done on my teeth and I made sure that I had a thyroid collar around. Oh yeah. Yeah, so let's talk about the other big ones that people have heard Hashimoto's which can cause both high and low function in the long term low.

So that is autoimmunity, right? So Hashimoto is just your body classically destroying its own thyroid gland, correct? Not only does this destroy the, your thyroid gland, but it goes to your digestive system first.

You start getting digestive. There's a negative feedback into the brain. It starts to have a major impact on your brain, then it gets to all your joints.

Do you get joint diffusion or other joints? Now tell me, is there a specific or a limited number of discrete tests for that? Just one test only, it's called TPOAB, is a blood test.

It's very accurate. Okay, so even if you have multiple forms, that's always attacking the thyroperoxidase. They're all T-P-O, or? T. P. O., yes. I thought that was thyroperoxidases, perhaps not.

Okay, so basically Hashimoto's, now help me grok this because it's a little bit unclear to me. I seem to notice that people with other immune and stressors like, you know, adrenal exhaustion and what have you, they tend towards Hashimoto's almost like it was a late stage manifestation of body dysregulation.

Explain how that could possibly be or am I just imagining that? Is there some gut dysbiosis? No, you're not. When we balance the thyroid, we always balance sleep, the adrenals, iodine, and the stress modulators.

You cannot take thyroid by itself. But talking about Hashimoto's, in my clinical trials on 2,200 people over three years, I discovered by accident how to reverse Hashimoto's and we've now done it to about half a million patients around the world.

totally reverse and not only put into remission but actually tanking the autoimmune response back to zero. Hashimoto's is triggered by low iodine and a hereditary thyroid disorder.

So you've been born with a hereditary thyroid disorder and you do not get enough iodine. It triggers a autoimmune response within the mitochondria. And in fact, it's 18% on average in most countries around the world, but India, for instance, where I do a lot of work is 60%. mainly because they're on a vegetarian diet.

That's what you're talking about, that little guy eating his noodles up in the Yukon, not getting any seafood, means that they are severely iodine deficient.

And if you've inherited low iodide function from one of your parents, and then there's a high probability that you are going to get a autoimmune response within the mitochondria.

By the way, you are correct. The adrenals do play a role, especially with reverse C3, but in the functioning of the thyroid on three different levels.

including the pituitary, as you just mentioned before, the hypothalamus as well as the thyroid. That's so interesting, isn't it? The iodine, and the genetic predilection, but also just clinically, just listening to people, it seems like

Hashimoto's is one of those unique conditions that can come and go, depending on stress.

It's almost like a predictable phenotype for some people. Or is that oversimplification? It's not, it's, not oversimplification because what you're observing is, is in, in your, your clinical practice, Dr.

Ed, Is that stress is a major influencer of thyroid function. And you get this, we always try and get the stress under control as best as we can. So yeah, what did you do as your cure for these people?

We give them hormones. We get them, we give the adrenal hormones, so like DHEA support. D HEA. Yeah. That's in the stress modulators and the pre-megalone is in this stress.

Modulators we address that. Now we make something called a bioadrenin that has four different hormones and extremely effective, but that don't forget that medications only do part of the job.

Yeah. We also use music to modulate the brainwaves. Love that. Yeah. So it's a binomial type of music that you're, that, um, That you listening to. And we, and if they are autoimmune, we always address diet as well, as far as exercise.

It's multi exercise music and a cocktail of which four hormones to re-adrenalize them with. In the adrenals we use the pituitary hormone, we used the adrenal cortex, the Adrenal Medulla and we also use a pitutary hormones.

All four of them. Okay. So you're ground up a pituitary extract or are you specific? We grind it up and put it in and we extract the hormones. Once we grinded up, and powder it, we strength the hormone.

We defat it and de-meat and extract hormones out of those glands. It's so interesting. Yeah. I know I'm a fan of Terry. Heard him, I've interviewed him before and he always has that parlor trick where he looks at you and says you're deficient in this or you deficien in that.

He's quite good at it. That's what I have been trained in and I actually co-lect you with Terry. Yeah, yeah, he's a good guy. So that's interesting. Well, it kind of begs the question of like organ meats, right?

Managing Hashimoto's and Adrenal Support

Like some people are very adamant that, you know, when you just do the skeletal muscle, You're not getting the nutrients from the animal if you're carnivorous.

So they like organ meats, but I'm a little less sanguine about that. I trust the nutritional manufacturing of the body in most cases, But you actually taking pituitary extract and that's fascinating because that has, I would assume all comers from, the anterior pitutary gland.

Right. Yes. Yes. Well, let me ask you a question that would come up a lot in a patient's pharmacopoeia. You know, classically, we have the Synthroid, which is synthetic thyroid, right?

We have The Armour thyroid. We had, I guess, four signs derived to what's your feeling on the best way to replace if one needs replacement of thyroid?

In my clinical trials on 2,200 people, he tracked them for three, three years. We found we use everything over the counter, synthetic and natural. we found that we're using synthetic, it works, but only works for a while because it's a synthetic before and you have to put them on like a seesaw.

And you keep on, you know, a little bit increase, little but increase over time. We found that the natural bioidentical actually worked the best. And so now we actually manufacture the national bio identical porcine, the same as armor.

But, but an enhanced version of, of it. So you do as a clinician like armor slash porcsine mix T3 and T4, correct? It

has T1 T2 T3 T4 and T7 in the natural Y identical.

And those T's in combination, what we found in our clinical trials perform a lot better. and once we get the patient on the right dose, which we, as you said, our machine is very accurate.

It tells you what dose to put the person on. it holds them stable for the rest of their life. So there's like a tachyphalaxis with the synthetic version, but not so with mixed, you know, most people.

You know, as an OB-GYN, I visited this with equine estrogens, right? So because the dominant player was white, they have, yeah, pregnant mare urine or premarin.

I guess for all the clinical trials were done, but who knows how much of the associated cancer risk was because they were not human specific, Right? But you're saying that the base pair, the based pair homology between pigs and humans is very much identical if not identical or It is identical.

And in fact, we actually manufacture the natural by identical estrogen projection, testosterone, oxytocin as well. Yeah. I think there's been a quiet shift, although we all like to cite literature and be FDA compliant.

There's no real thought experiment whereby a pregnant horse would be better for you. inherently than having bioidentical, at least have it be the same.

But in that, what reminded me, you said one, two, three, four, seven. I had no idea there was a seven, but like with Estriol, Estrial has three groups.

You know, estradiol has two. Yeah. So the bioactivity is largely modulated in a similar fashion, not by the number of iodines, by by number hydroxyl groups, so.

Anyway, this is way above my pay grade. If we're circling back and a person is listening and they're bored, they might be hypothyroid. if they are super interested, They might hyperthyroid, but in general, what would you estimate the, you already said 60 to 80% are hypathyroid clinically.

I'm of the mindset and I used to have thyroid hormone in my medicine cabinet that it just kind of like a little pick-me-up, a non-caffeinated, non come down sort of pick me up.

And people like running a lot hot, don't they? Yes, they do. Yeah. It's better to run a little bit hot than, uh, towards hyper than hypo. Hypo has so many different, not only symptoms, which I did send you the symptom sheet out of my endocrinologist's handball, but it's also there's the.

There's a lot more benefits to being running hot. In other words, my thyroid is normal, My hands are warm all the time. My brain functions better. There is a whole lot of things that function a little better if you are pushed towards more towards hyper than hypo.

Yeah. And unless you're taking a big dose at night, it's not going to give you insomnia or jitteriness. So yeah, It's that one of those drugs of abuse is that you could take a little bit of supraphysiologic thyroid hormone and just go about your day.

Yeah, in fact, I have a hospital in Dubai, the largest hospital Dubai that gives all the geriatric patients a quarter of a brain. You know, I'll never forget this patient when I was doing OB.

I did a tubal ligation on her and I driving home 40 minutes later and the anesthesiologist told me she was about to die. And so the back story was she had a pheochromocytoma, which is something you only read about, right?

So the pherochomocitoma it excretes epinephrine, norepinephrin. It's that gland that goes whenever you almost hit an 18-wheeler on the highway, that gets you excited.

So she was running hot all her life. She was 205 pounds, very excited, and very active. And thank God the anesthesiologist controlled her circulation.

she didn't stroke out the surgeon a couple of days later, took out her adrenal gland that was affected.

Thyroid Replacement Options and Bioidentical Hormones

But you know, she ended up being normal and gained like 50, 60 pounds. So, She hated it. Actually preferred to have the field crew, giving her like constant adrenal like She's constantly high on adrenal hormone.

Yes. Okay. So if people are in thyroid treatment and they need to monitor it, their doctor can get a thyro flex machine, but people know if they're high or low, they should trend towards the bioidentical products.

Correct. And should they supplement iodine routinely? I have iodide, I rarely take it. Should I be taking that more? Okay, everyone needs, we do have an iodone testing machine by the way, basically everyone and everyone a base amount of iodine within their cells to function properly.

Every single cell in your body needs it. No, it won't hurt. You probably can't over go, Simon, if you're just taking a few drops. Sorry, I missed the question.

You can't overdose on it like the fat soluble vitamins, you'll just excrete it, right? If you go up to super high doses of iodine, it interferes with the thyroid function.

Okay. We do put some people on high dose of the iodines, if they've got breast slumps, uterine fibroids, technique of the uterine lining, ovarian cysts, and of course prostate enlargement for men.

We do cycle them on to prevent cancer onto a high dose of iodine, but it has to be done under very controlled circumstances, which you have to monitor and control.

Okay. I did not know that. That's interesting. So supertherapeutic iodine can be helpful in some reproductive conditions you're saying. Absolutely true.

Yes. In fact, for you as an OBGYN, if your female patients should be taking iodide 12.5 milligrams every day to make sure the fetus's brain is wired. and the mylar gets around the wiring of the brain and it also increases the IQ of lamentable words that they coined was cretinism.

And so, you know, I guess that was, yeah, if people are hypothyroid, the kids can actually have developmental delays. So it's important to understand that I appreciate the critical role of iodine in our diet, especially if you are trending towards a plant-based diet.

But also the fact that anyone can recognize When they're hyper and hypothyroid and through beautiful stress regulation, great music, you can avoid this risk of Hashimoto's, which is kind of like not that uncommon in autoimmune disease.

But then again, as we, this is the 14th month of my podcast, we've done a lot of things on natural sort of foundational things and I realized that gut dysbiosis, immune dysregulation, stress, all these things are kind of interplaying, aren't they?

Yes. In fact, I'm giving a major discussion on a, on the 28th of this month. I am talking at a conference on The Gut and the connection to thyroid and autoimmune disease.

But you are correct with the gut disruptors. Okay. So we want to be you, EU. That means good thyroid, so we wanna have a good balanced diet, stress modulation, and if needed, replenish our thyroid hormones with natural options that you produce.

If they wanted to buy your products of the thyroid or the sex hormones or even the adrenal mix, you're out of Scottsdale. Do you do that, sell that domestically?

Yes, we do. We actually manufacture everything ourselves. I have two pharma plants, but you can't buy direct from us. You can only, We only sell to doctors.

So we will supply you, you supply your patient. Yeah. What's the name of your brand? Bio, B-I-O. Hey, I've seen that in the market, your bio, great. And the machine that the clinicians can rent out is called the thyroflex?

ThyroFlex, yes, and the thyroid flex means that you have a machine, that's 98.5% accurate, the test is four minutes. We test the speed of the reflexes, we test speed the neurotransmitters in the brain, and we check the resting metabolic rate, which of course produces low temperature and of cause cold hands and cold feet.

So that is done in one four minute test. The patient fills out the symptom survey and with those, with that piece of information, within four minutes, we can assess dose and titrate.

Excellent. Yeah. Now what a great tool that you've come up with. So, but in general, am I remiss to suggest that people are not abusing medicines? If they have a little extra thyroid hormone, can they just take it like a Flintstones chewable or is that malpractice?

That's malpractice. We know we don't, it is a regulated hormone. So we, that's why we only sell it to doctors who are licensed to prescribe it.

Iodine, Pregnancy, and D3K2 Support

My bias is that, like I said, people like to run a little hot, and as long as they're not going nuts with it, adjusting it not to the TSH plasma level, but actually people can be a bit running hot and enjoy their life without endangering themselves.

I've seen that in clinical practice, I'm like, why are you on thyroid medication? And the doctors just gave it to them to make them feel good. So yeah, it's kind of a gray area where they're slightly super therapeutic thyroid hormone is okay.

As you age, what we found in other countries is that thyroid does improve your quality of life. But generally we don't recommend that you give thyroid, unless you just do a reflex test.

Look, 80%. Which we've confirmed now with, we're approaching patient number 3 million being tested on our machine. That 80% of everyone we test needs a little bit of thyroid.

I don't know if people want to get their doctor to suggest that or prescribe it. It's certainly not over the counter in this country, but it could be part of the biohacking armamentarium.

Like people will use caffeine or nicotine, maybe a slight dab of thyroide will give you. Some help. I'm not saying you're suggesting that I have seen it.

Yeah. If they present with the symptoms, Dr. Ed, you test them. We know they're going to benefit the quality of life is depends on them having the right amount of thyroid.

Right. Don't forget that thyroid disorders, because you're, you are in this field. It is that is tightly associated with so many long-term illnesses. For instance, it doubles you.

If you have a low thyroid, It doubles your chance of getting Alzheimer's. The part is it's like shaking disorders. There's a whole lot of longterm effects that you, that may want to fix from an inherited thyroid disorder.

it comes from the appearance. Like, okay, so there are a couple of genomics, a single nucleotide polymorphisms

you can test for, I'm sure. Your wording is correct.

I am a DNA RNA specialist. They specialize in this. And we're the, for instance, some of our patients have both Hashimoto's and Graves. It automatically triggers in our protocols, our DNA, RNA, DNA test, and we do an RNA intervention and reversal.

Yeah, I think there's some kind of variance like B27 or something. I know some weird things that they can find. But yeah, in the end of the day, like we said, the offset Thyroid is the master hormone for the temperature, the speed at which all your cell processes, all of your biochemical processes done by those cells is regulated.

So it's good in a nice, tight, normal range. And sure. Why wouldn't all the other regulatory things, including your immune system, your bone health, All the rest of it be controlled by that.

Of course. Now, can I say one more because you weigh in and I have quite a lot of OBGYN doctors around, you know, around the world that use my systems is that if your young patient is trying to get pregnant, they better have their thyroid balance.

It enables them to carry the food to full term. The thyroid, of course, when we talk about thyroid we're talking about the D3K2 iodine iodide and the thyroid hormones.

Yeah, so important. So take a little supplemental iodine if you're pre-conception and during pregnancy perhaps even. But I think people underappreciate the D3K2 connection.

I guess some of the science nutritionally in the last 15 years has told us that vitamin D 3 alone doesn't help that much with bone health or immunity.

So you really need it with the K2 in order to not get pathologic calcifications and osteoporosis. Yes, absolutely true. And that's why we always put the, well, my D3 is derived from the wool of New Zealand sheep and my K-2 comes from Japan.

Uh, so we do a true natural, identical D-3 K 2. The uptake's 380% better than anything else on the market. But it is one of the main, one, the primary, this, we call it the trifactor.

Closing Remarks and Podcast Outro

We put a patient onto thyroid. There's always D3K2 and iodine iodide. As we just discussed the iodines iodides makes the conversion into a usable form and the D2, sorry, D 3 opens up the receptor pathways into the mitochondria and into themselves to allow the thyroid, which is the energy engine to perform.

Amazing. Okay, so great take home. Apparently the sheep from your country outnumber the people there and they make really good vitamin D. But people should be careful because you can overdose all the ADEK fat soluble.

You can do damage because they're stored in the fat. So, but nevertheless, supplementation with the D K and iodine is the trifecta, as you said. Especially the K, that's why we limit the amount of K.

We don't want patients taking more K as they suck. I know, I was just talking to the head of the exosome company. He said his labs changed overnight when he started sampling with D3K2.

And I think these are not just vitamins which cause disease when they're lacking. but also master regulatory hormones, if you will. So. All right. Excellent knowledge.

Thank you for sharing that with us. And so your website again would be. N-Y-T-E-K. And you have the bio thyroid bio estrogen branding for your bio identical.

Everything. Yes. We have six. Okay. I need some testosterone. Not tell you what, but I'll get to you offline. Dr. Ed, I

have, the most amazing testosterone that totally replaces injectable.

It's amazing. Need that. All right. Well, great. Stick around. I want to do a little deep dive interview just for a second after this. Okay. Hi everybody.

Dr. Daryl Turner. Thank you so much for sharing what you know. Appreciate it. Doctor Ed, thank you very much, for having me and sharing the message that there is an answer to your quality of life.

This is all about quality in life, Absolutely. Absolutely many clinicians are getting interested in exosome therapy and they hesitate for good reason.

Questions like, does this work? What forms do I need? How much should I charge? how do i stay out of trouble? All these questions are addressed in my online course.

That's why I created it to help you get started. The online course is your permanent turnkey resource to get started either treating yourself, friends and family, or to expand your practice and help more people, as well as increase your revenue.

Thanks for tuning into the Recharge Biomedical Podcast. If today's episode got you thinking, you'll love my book, Exosomes, Songs of Healing. It's packed with cool analogies, full color illustrations, and all the science you need to understand how exosome are changing the game in aging and regenerative medicine.

You can grab it in paperback, ebook, or audiobook, whatever works for you. Now head over to www.rechargebiomechanical.com to check it out. And don't forget to like and subscribe so you never miss another episode.

See you next time.