Top 3 Things That Support Muscle Building | The Longevity Protocol Ep. 37 Transcript

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Introduction to the Longevity Protocol

Welcome to the Longevity Protocol Welcome to the Longevity Protocol with Dr. Christina Bosch and Dr. with Dr. Christina Bosch and Dr. John A. Robinson. We will be your guides John A. Robinson. We will be your guides to discovering the secrets of to discovering the secrets of optimal health, a better sex life, and optimal health, a better sex life, and happiness. From debunking myths happiness. From debunking myths about aging to exploring about aging to exploring the science behind what it means to the science behind what it means to live the longevity protocol. We live the longevity protocol.

Muscle as the Key to Longevity

We will delve into a wide range of will delve into a wide range of topics. So get ready for an topics. So get ready for an exciting journey about what it exciting journey about what it means to live well and feel your means to live well and feel your best at any age. If you want to live best at any age. If you want to live longer, you need to have more longer, you need to have more muscle. I mean, it's simply muscle. I mean, it's simply one of the best biomarkers we one of the best biomarkers we have.

have. have. Correct. For longevity, how Correct. For longevity, how well you will live and how long you will live, it well you will live and how long you will live, it all depends on muscle. So, all depends on muscle. So, today we want to talk about some today we want to talk about some strategic tools to help strategic tools to help build muscle mass. We'll talk build muscle mass. We'll talk about the three main things to about the three main things to help promote help promote muscle development. And well, you know, three muscle development. And well, you know, three main ones; We've narrowed this down to three main ones; We've narrowed this down to three that are quite important. And there are that are quite important. And there are many, but we have distributed them in many, but we have distributed them in this way. We'll talk about a this way. We'll talk about a hormone group, a key supplement, and a hormone group, a key supplement, and a key peptide. OK?

key peptide. OK? Everyone's talking about peptides, and we Everyone's talking about peptides, and we certainly use hormones, peptides, certainly use hormones, peptides, and, you know, high- and, you know, high- quality supplements to help our health and quality supplements to help our health and longevity. And in this longevity.

Testosterone and Nandrolone for Muscle Building

And in this particular case, to help with our particular case, to help with our muscle. So, let's go straight to muscle. So, let's go straight to the hormonal option. What is the the hormonal option. What is the best hormone for building muscle? Again, I'll say this is as a? Again, I'll say this is as a set. It's testosterone, but set. It's testosterone, but we'll also talk about something called we'll also talk about something called nandrolone. What do you think about nandrolone. What do you think about testosterone? What do I think about it?

testosterone? What do I think about it? Yes. What do you think? I find it Yes. What do you think? I find it incredible how many women, in incredible how many women, in perimenopause and postmenopause, have perimenopause and postmenopause, have heard that they don't need testosterone. I am amazed at how many people come to. I am amazed at how many people come to my office taking nothing or with an my office taking nothing or with an overdose of estrogen and no overdose of estrogen and no testosterone. I want to say loud and testosterone. I want to say loud and clear that women need clear that women need testosterone. Testosterone isn't testosterone. Testosterone isn't just for your fertile years; It is just for your fertile years; It is essential to prevent essential to prevent rapid and aggressive aging.

rapid and aggressive aging. Yes. I totally agree, and we've been Yes. I totally agree, and we've been doing this for 19 years. doing this for 19 years. And we have been And we have been And we have been advocating and promoting advocating and promoting the use of testosterone in women.

the use of testosterone in women. Yes. And well, we're seeing a Yes. And well, we're seeing a recent resurgence in recent resurgence in testosterone use for women.

testosterone use for women. And the thing is, John, And the thing is, John, aesthetically, as aesthetically, as women get older, they lose that softness women get older, they lose that softness in their bodies, that baby fat of in their bodies, that baby fat of youth.

youth. youth. And muscle is really what will And muscle is really what will help give them a new sense of help give them a new sense of aesthetic beauty. As you get older, having aesthetic beauty. As you get older, having that stronger physique, those that stronger physique, those defined arms and defined arms and toned legs will allow you to feel toned legs will allow you to feel beautiful in a very different way than beautiful in a very different way than when you were, perhaps, in your twenties when you were, perhaps, in your twenties. But it will give you that poise, that. But it will give you that poise, that strength, that posture, and a different kind of strength, that posture, and a different kind of femininity that is simply femininity that is simply very attractive.

very attractive. Yes, I agree. And that, Yes, I agree. And that, certainly, has been part of your certainly, has been part of your process. process. process.

Yes. Yes. I mean, it's definitely Yes. Yes. I mean, it's definitely been my biggest struggle. My biggest struggle been my biggest struggle. My biggest struggle has been gaining muscle mass. And before I has been gaining muscle mass. And before I started on testosterone and started on testosterone and nandrolone, nandrolone, nandrolone, and ate enough, it was really and ate enough, it was really difficult. So I've learned a lot. I've difficult. So I've learned a lot. I've learned a lot as a doctor and have learned a lot as a doctor and have been giving answers to my patients, but it's never the same as experiencing it, but it's never the same as experiencing it yourself, especially because I tend to yourself, especially because I tend to be one of those complicated cases.

be one of those complicated cases. You know, the results aren't easy. You know, the results aren't easy. How differently my body has responded How differently my body has responded to exercise with the presence of to exercise with the presence of testosterone.

testosterone. testosterone. Yes, it ends up being the final piece of the Yes, it ends up being the final piece of the puzzle for many people. puzzle for many people.

They often do very, very well with their They often do very, very well with their exercise. Perhaps they are consuming exercise. Perhaps they are consuming the right protein, the right protein, and are simply going around in circles for and are simply going around in circles for nothing. Literally, adding a little bit of nothing. Literally, adding a little bit of that makes a big difference. So that makes a big difference. So we're ultimately talking about we're ultimately talking about hormone replacement therapy versus hormone replacement therapy versus testosterone replacement therapy, testosterone replacement therapy, because now we'll be talking about men.

because now we'll be talking about men. Men, of course, tend to Men, of course, tend to focus on testosterone. We don't just focus on testosterone. We don't just see it see it as testosterone.

as testosterone. TRT, just to distinguish. TRT, just to distinguish. Yes. TRT, testosterone replacement therapy Yes. TRT, testosterone replacement therapy versus versus versus hormone replacement. And I say it that way hormone replacement. And I say it that way because hormone replacement refers because hormone replacement refers to the overall complexity of all the to the overall complexity of all the various things that can be done with various things that can be done with it. So we're never just seeing, well, for a man, it just takes a, well, for a man, it just takes a little testosterone. It goes far beyond little testosterone. It goes far beyond that. And one of the things we're that. And one of the things we're talking about today is nandrolone.

talking about today is nandrolone. So testosterone, that So testosterone, that particular hormone, is present in both men and women particular hormone, is present in both men and women, but so is nandrolone.

, but so is nandrolone. Nandrolone is called 19- nortestosterone. This is, in fact, a nortestosterone. This is, in fact, a

bioidentical hormone. Our body bioidentical hormone. Our body produces this particular form of produces this particular form of testosterone. The molecule only testosterone. The molecule only adjusts very slightly, but it is adjusts very slightly, but it is naturally present in our naturally present in our body at all times. But body at all times. But we can also synthesize it and then we can also synthesize it and then prescribe it to patients. So, prescribe it to patients. So, for us, we've found that the for us, we've found that the combination of testosterone helps combination of testosterone helps a lot more with muscle. So now we're a lot more with muscle. So now we're focusing on focusing on muscle.

muscle. muscle. Yes. I think it's one of the things we Yes. I think it's one of the things we do incredibly well: avoiding do incredibly well: avoiding monotherapy. Monotherapy means you monotherapy. Monotherapy means you use only one thing. And most use only one thing. And most men do a better job men do a better job now of speaking up for themselves and now of speaking up for themselves and advocating for themselves, in part because there has been a advocating for themselves, in part because there has been a lot of promotion in the lot of promotion in the mainstream media about mainstream media about low testosterone. But you see, that's what they low testosterone. But you see, that's what they do. They talk about do. They talk about low testosterone, low testosterone. TRUE? So low testosterone, low testosterone. TRUE? So men think, "Oh well, men think, "Oh well, I'm taking testosterone," but that does I'm taking testosterone," but that does n't mean you're actually n't mean you're actually replacing what your body needs replacing what your body needs for optimal results. And for optimal results. And when a person uses monotherapy or a when a person uses monotherapy or a doctor prescribes it, I think the doctor prescribes it, I think the tendency to exceed the dose is tendency to exceed the dose is much greater.

much greater. When you use a When you use a more sophisticated, multifaceted approach, you will be working more more sophisticated, multifaceted approach, you will be working more in line with the body's physiology. You will be less likely to overdo it and. You will be less likely to overdo it and less likely to experience less likely to experience complications, symptoms, and complications, symptoms, and side effects. Yes, that's an excellent side effects. Yes, that's an excellent way of putting it, and it's very true of way of putting it, and it's very true of our approach. We tend to see far our approach. We tend to see far fewer side effects.

fewer side effects. We simply know how to balance everything to We simply know how to balance everything to avoid that. But monotherapy does avoid that. But monotherapy does lead to that. You're absolutely right.

lead to that. You're absolutely right. Returning to nandrolone. That is if Returning to nandrolone. That is if we are talking about an improvement, so to we are talking about an improvement, so to speak, in the process of a man or speak, in the process of a man or a woman with their testosterone.

a woman with their testosterone. Nandrolone is much better. So Nandrolone is much better. So testosterone helps with muscle. testosterone helps with muscle.

This is true. It has This is true. It has anabolic effects. That means anabolic effects. That means muscle growth. It makes things grow, muscle growth. It makes things grow, it's anabolic, right? And it's anabolic, right? And nandrolone is purely anabolic.

So that helps, and nandrolone has been So that helps, and nandrolone has been around since the 1980s. It has been around since the 1980s. It has been used with AIDS patients if used with AIDS patients if they are wasted. Nandrolone has been they are wasted. Nandrolone has been used in used in postsurgical settings. So, if there is postsurgical settings. So, if there is weight loss due to weight loss due to surgical interventions, it helps to surgical interventions, it helps to regain it. It is very good for what regain it. It is very good for what is called cachexia or sarcopenia. These is called cachexia or sarcopenia. These are just fancy words for are just fancy words for muscle loss that occurs muscle loss that occurs particularly in the elderly.

particularly in the elderly. And where I've really seen a great And where I've really seen a great benefit is in elderly people who have benefit is in elderly people who have difficulty maintaining their difficulty maintaining their muscles; you give them a little nandrolone and it's almost give them a little nandrolone and it's almost like a miracle. Yes. It's a vitality.

like a miracle. Yes. It's a vitality. And it's not hard on the system. It's not And it's not hard on the system. It's not hard on the liver. We keep these hard on the liver. We keep these doses very, very low. It doesn't take doses very, very low. It doesn't take much to make a good profit.

much to make a good profit. But going back, let's say, to a man But going back, let's say, to a man with testosterone where we incorporate with testosterone where we incorporate nandrolone. It allows us to keep nandrolone. It allows us to keep the total testosterone dose low while the total testosterone dose low while incorporating nandrolone, thus providing incorporating nandrolone, thus providing more benefits. So you can more benefits. So you can alleviate symptoms of alleviate symptoms of testosterone deficiency like low libido, apathy, testosterone deficiency like low libido, apathy, and cardiovascular problems, but and cardiovascular problems, but you can raise the stakes on you can raise the stakes on muscle building because muscle building because you supplement it with nandrolone, right?

you supplement it with nandrolone, right? Where nandrolone doesn't, you don't get Where nandrolone doesn't, you don't get those so-called androgenic effects, those so-called androgenic effects, side effects, or effects, right? One effect would be, for example,? One effect would be, for example, libido. You don't get that from libido. You don't get that from nandrolone. You only get the nandrolone. You only get the anabolic benefits from it. But it's anabolic benefits from it. But it's always combined. And here's the always combined. And here's the thing, anyone considering thing, anyone considering nandrolone should always combine it with nandrolone should always combine it with testosterone. Testosterone.

testosterone. Testosterone. In the correct proportion. In the correct proportion. Where we have seen it work very well Where we have seen it work very well is in patients with GLP.

is in patients with GLP. Yes. LPG. Yes. LPG.

Creatine for Strength and Brain Health

So, you know, you use semaglutide, So, you know, you use semaglutide, tirzepatide, you get this tirzepatide, you get this fat loss, and we always say, "That's fine, fat loss, and we always say, "That's fine, but we want you to be ripped, not but we want you to be ripped, not skinny." So you get the change in skinny." So you get the change in metabolism through the metabolism through the GLP drugs and then you get that GLP drugs and then you get that anabolic benefit by anabolic benefit by combining testosterone and…

combining testosterone and… Yes, our patients, you know, since Yes, our patients, you know, since you mentioned GLP-1s like you mentioned GLP-1s like semaglutide, tirzepatide, etc. Um, semaglutide, tirzepatide, etc. Um, our patients don't lose our patients don't lose muscle mass in appreciable amounts, um, muscle mass in appreciable amounts, um, because we're giving them these other because we're giving them these other types of tools. We talked about types of tools. We talked about their protein intake. If you do it their protein intake. If you do it that way and keep the that way and keep the GLP-1 dose low, you get good benefits GLP-1 dose low, you get good benefits without those negative side effects.

without those negative side effects. And they gain longevity, because what they And they gain longevity, because what they 're not doing is just any old 're not doing is just any old fat loss program.

fat loss program. Testosterone, nandrolone, and GLP Testosterone, nandrolone, and GLP together increase a person's overall health and well-being while modifying their person's overall health and well-being while modifying their daily habits. So you daily habits. So you 're really providing the person with a 're really providing the person with a path to take them through their 30s, 40s, 50s path to take them through their 30s, 40s, 50s into the future they're looking for. It's not into the future they're looking for. It's not just about: "Oh, I want just about: "Oh, I want a dress to fit me well." Yes.

Very well, let's continue. That was Very well, let's continue. That was about testosterone and nandrolone. Um, about testosterone and nandrolone. Um, now let's move on to a very, very now let's move on to a very, very important supplement. Um, probably the important supplement. Um, probably the most researched supplement of

all, most researched supplement of all, uh, creatine. Um, so really…

…… That's interesting. Yes, you would say that. That's interesting. Yes, you would say that. Yes. Yes. Of all the different types Yes. Yes. Of all the different types of supplements, that's probably it.

of supplements, that's probably it. And, um, St. John's wort. And, um, St. John's wort. St. John's wort has been the subject of many St. John's wort has been the subject of many studies. It's usually up there.

studies. It's usually up there. Yes. When it comes to, say, Yes. When it comes to, say, supplements, herbs, and things like that supplements, herbs, and things like that. creatine. Creatine is. creatine. Creatine is found naturally in muscle.

found naturally in muscle. So when you consume animal meat of So when you consume animal meat of any kind, creatine will be any kind, creatine will be present. Beef, in present. Beef, in particular, is a fairly high source particular, is a fairly high source of it. Since the 1990s it has been available of it. Since the 1990s it has been available as a supplement and we have as a supplement and we have always associated it with always associated it with bodybuilding. I was going to ask you what bodybuilding. I was going to ask you what happened, because you usually know these happened, because you usually know these things. What happened to make things. What happened to make creatine suddenly become popular? Because you're always talking about her. We? Because you're always talking about her. We were talking about that this morning, about how you remember when you used to, about how you remember when you used to read Muscle&Fitness magazine. It was read Muscle&Fitness magazine. It was before the internet, so I looked for whatever before the internet, so I looked for whatever I could find.

I could find. Yes. But they had good information, Yes. But they had good information, often too much. They had a tendency towards often too much. They had a tendency towards that. But when did it become popular? Why did it suddenly appear? Why did it suddenly appear everywhere on social media?

everywhere on social media? Yes. I don't know the answer, Yes. I don't know the answer, beyond whether you're asking why they beyond whether you're asking why they started studying it.

started studying it. No, why has it become popular now? What happened to make everyone suddenly? What happened to make everyone suddenly talk about creatine?

talk about creatine? I think it's because everyone started I think it's because everyone started talking about muscle. They're all into talking about muscle. They're all into this concept of muscle, menopause, this concept of muscle, menopause, aging, and longevity, like the aging, and longevity, like the Peter Attias of the world out there.

Peter Attias of the world out there. So they dusted off So they dusted off old information, saying, "this is it." It old information, saying, "this is it." It all started when people all started when people began talking about longevity, began talking about longevity, biohacking, and general health, which biohacking, and general health, which led to the most obvious thing: exercise and, led to the most obvious thing: exercise and, therefore, muscle. Correct. It's something we therefore, muscle. Correct. It's something we 've always known.

've always known. And the way you eat. And the way you eat. And that's how it is, the way you eat. That And that's how it is, the way you eat. That naturally led to those topics and in naturally led to those topics and in turn to many studies on women turn to many studies on women and menopause, recognizing the and menopause, recognizing the importance of muscle, importance of muscle, osteoporosis, and all that. It simply osteoporosis, and all that. It simply led naturally to the led naturally to the obvious importance of exercise and obvious importance of exercise and muscle. Then they began to study it muscle. Then they began to study it in greater depth with respect to in greater depth with respect to muscle, its benefits, how to gain it, what to do and how to preserve it. And, what to do and how to preserve it. And inevitably, the circle closed inevitably, the circle closed back to creatine. Which has always back to creatine. Which has always been, you know, the "gym science ". I take my creatine in my ". I take my creatine in my pre-workout drink before going to the gym. And pre-workout drink before going to the gym. And all of that is true. Help with all all of that is true. Help with all those things. But now we understand that those things.

But now we understand that creatine goes far beyond creatine goes far beyond muscles, but I assure you that muscles, but I assure you that creatine goes far beyond creatine goes far beyond simple muscles. You need about five simple muscles. You need about five grams of creatine to fill your grams of creatine to fill your muscles. For men or women, the dose muscles. For men or women, the dose has always been five grams.

has always been five grams. Yes. This is one of those cases where I do Yes. This is one of those cases where I do n't vary the dose according to the n't vary the dose according to the patient's gender or size.

patient's gender or size. Yes. You don't have to do it. Yes. Yes. You don't have to do it. Yes. Because, again, it's incredibly Because, again, it's incredibly safe. It is found in food, safe. It is found in food, and because many times one of the and because many times one of the main ways I use it main ways I use it is for the brain, which I think we're going is for the brain, which I think we're going to talk about. So we don't have to talk about. So we don't have significant changes in the size significant changes in the size of the human brain. So you're going to of the human brain. So you're going to administer the dose that's good for administer the dose that's good for cognition regardless of— cognition regardless of— well, that's what I'm saying—the size well, that's what I'm saying—the size of the patient. That's what I'm getting at of the patient. That's what I'm getting at. So once you. So once you take five, it will go to the take five, it will go to the muscles first. He goes there first. But then, the other key tissue it will go to once you, the other key tissue it will go to once you exceed five grams is the exceed five grams is the brain.

brain. brain. Yes. So there has been a lot of Yes. So there has been a lot of recent research, perhaps only recent research, perhaps only in the last five years, on in the last five years, on cognition, cognition, cognition, Alzheimer's prevention, and this sort of thing, Alzheimer's prevention, and this sort of thing, again, particularly in the again, particularly in the aging brain, in both men aging brain, in both men and women; I mean, now I and women; I mean, now I just automatically take 10.

I take more than that, but my I take more than that, but my base dose now is 10. I 've been taking 20 daily because I 've been taking 20 daily because I really want to get those really want to get those cognitive benefits; I know there's a cognitive benefits; I know there's a lot of brain slowness that comes lot of brain slowness that comes from childbirth and pregnancy, really. It's not from childbirth and pregnancy, really. It's not childbirth, it's pregnancy. So I childbirth, it's pregnancy. So I think it's one of those supplements that think it's one of those supplements that 's very important for women to 's very important for women to achieve that brain recovery, achieve that brain recovery, since the brain takes up to three years since the brain takes up to three years to fully recover after to fully recover after pregnancy.

pregnancy. pregnancy. So I think 20 grams is So I think 20 grams is also excellent for also excellent for anyone in their anyone in their senior years.

senior years. Yes. Again, for that Yes. Again, for that brain protection. brain protection. Absolutely. Uh, so, and for the Absolutely. Uh, so, and for the muscles too, for the muscles.

muscles too, for the muscles. So it's going to fill those So it's going to fill those muscle reserves first, and then muscle reserves first, and then we'll start to see benefits with we'll start to see benefits with your brain and other organ systems your brain and other organ systems also benefiting from that also benefiting from that creatine. But ultimately, we're creatine. But ultimately, we're talking about muscles here. Yes, at least five grams. But it's. Yes, at least five grams. But it's so simple. No, it's not, it's economical. It doesn't have a strange taste. If. It doesn't have a strange taste. If you wanted, you could take it alone. It's just you wanted, you could take it alone. It's just a little bit of water, but it mixes really a little bit of water, but it mixes really well in protein shakes and things like that well in protein shakes and things like that. I. I mean, mean, mean, you put it in your tea and, I do you put it in your tea and, I do n't know, it doesn't taste weird. I think maybe I n't know, it doesn't taste weird. I think maybe I 'm not the best.

'm not the best. I have a rather demanding palate. I have a rather demanding palate. It turns out I have a very It turns out I have a very refined palate. It doesn't bother me. I don't refined palate. It doesn't bother me. I don't think it has an unpleasant taste, think it has an unpleasant taste, but I do notice it. One of the things I but I do notice it. One of the things I asked John was if I could asked John was if I could put it in hot liquid, because it put it in hot liquid, because it wasn't clear if it could be taken wasn't clear if it could be taken hot. But you discovered that it

does, hot. But you discovered that it does, as long as it's not boiling.

as long as it's not boiling. It was specifically 80°C, which is It was specifically 80°C, which is equivalent to 176 degrees Fahrenheit. So, equivalent to 176 degrees Fahrenheit. So, 212 being the boiling point.

.. Yes, but just below the Yes, but just below the boiling point. You know, you boil your boiling point. You know, you boil your tea or prepare the water for the tea, maybe it's tea or prepare the water for the tea, maybe it's already boiled, then you let it already boiled, then you let it cool down a little before adding the cool down a little before adding the creatine. Probably by the time you creatine. Probably by the time you 've put the tea bag in and let it 've put the tea bag in and let it steep, then you would add it. The steep, then you would add it. The same goes for coffee. By the time same goes for coffee. By the time you served it, you let it rest for a minute, you served it, you let it rest for a minute, then you put it on. TRUE? So, that's then you put it on. TRUE? So, that's how I'm taking my two how I'm taking my two doses. I will take 10 grams in the morning doses. I will take 10 grams in the morning with my morning drink.

And then at night with my drink And then at night with my drink before bed, that's when I'll before bed, that's when I'll add it. Whether it's bone broth or, add it. Whether it's bone broth or, as I've talked about many times, preparing as I've talked about many times, preparing something like something like hot protein chocolate milk or my saffron.

hot protein chocolate milk or my saffron. I will take hot saffron tonight. I will take hot saffron tonight. Those are very easy ways to get Those are very easy ways to get that dose of creatine. And the reason I'm that dose of creatine. And the reason I'm taking a minute to talk about taking a minute to talk about how I take it is because many of the how I take it is because many of the products available are in products available are in gummy form. I don't know why everyone gummy form. I don't know why everyone needs to take gummy bears. Gray. I want you to be needs to take gummy bears. Gray. I want you to be consistent. So, if this consistent. So, if this is the only thing that will make you do it, is the only thing that will make you do it, then that's fine. But what then that's fine. But what we're really talking about is a we're really talking about is a very clean, very simple powder, with no very clean, very simple powder, with no added junk, that you can added junk, that you can simply spoon into, simply spoon into, as you said, a little water or, as as you said, a little water or, as I say, add it to your coffee in the I say, add it to your coffee in the morning.

morning. morning. That's what we have in the office. And That's what we have in the office. And we analyzed gummies and that kind of we analyzed gummies and that kind of thing when everything started to take off thing when everything started to take off about a year or so ago with about a year or so ago with creatine again. And the gummy bears, creatine again. And the gummy bears, yes, we simply couldn't find yes, we simply couldn't find any.

any. any. Now, the problem with that too Now, the problem with that too is the dosage. So you say you take is the dosage. So you say you take 20 grams a day. That's like, you 20 grams a day. That's like, you know, a handful of these gummies. There is know, a handful of these gummies. There is nothing. And then it's not practical. It nothing. And then it's not practical. It 's not financially practical.

's not financially practical. Creatine powder is relatively Creatine powder is relatively pleasant, mixes well, and is not expensive. pleasant, mixes well, and is not expensive.

So what does it do to your muscles? It definitely helps with strength and? It definitely helps with strength and power. It will definitely power. It will definitely help you get a little bit of an help you get a little bit of an edge in the gym with creatine. We edge in the gym with creatine. We 've known it for years. It 've known it for years. It definitely helps with definitely helps with hypertrophy or muscle growth.

hypertrophy or muscle growth. Again, especially with Again, especially with testosterone, you'll get much more testosterone, you'll get much more benefit from having it there. It locks in benefit from having it there. It locks in hydration, which is one of the hydration, which is one of the key things it does, and it locks it key things it does, and it locks it specifically in the muscle. If your specifically in the muscle. If your muscles are hydrated, they perform muscles are hydrated, they perform better better better and look better, right? It's cute, and look better, right? It's cute, like when you're wearing that like when you're wearing that sleeveless dress and you want your arms to look

sleeveless dress and you want your arms to look a certain way. You know, people will see a certain way. You know, people will see the bride on social media doing the bride on social media doing a few bicep curls right a few bicep curls right before she walks down the aisle.

before she walks down the aisle. Yes. Because it gives you that short- Yes. Because it gives you that short- term pump, and creatine will help with that. Did term pump, and creatine will help with that. Did you do that? I do you do that? I do n't remember. No, I didn't do it n't remember. No, I didn't do it. She. She was also dramatically was also dramatically thinner.

thinner. thinner. Yes. Yes. Yes. And not that loud. And your dress, I don't think it And not that loud. And your dress, I don't think it was… You didn't have much mobility was… You didn't have much mobility in that dress. I do n't know what he's saying to everyone who's n't know what he's saying to everyone who's listening. I really don't know. It listening. I really don't know. It was very tight. What are you talking about?

was very tight. What are you talking about? And And And I moved perfectly well in my I moved perfectly well in my tight dress. tight dress. You looked amazing, but those were You looked amazing, but those were very short steps.

very short steps. They were elegant steps. Alright. One They were elegant steps. Alright. One of the ridiculous things. I rolled my of the ridiculous things. I rolled my eyes at him.

We'll discuss this later. One of We'll discuss this later. One of the things I love about it is the idea that it the things I love about it is the idea that it gives you that intensity during gives you that intensity during short bursts of exercise, because I short bursts of exercise, because I usually recommend it for those who don't usually recommend it for those who don't have much time. Oh, you don't have time have much time. Oh, you don't have time to do those long exercises? No to do those long exercises? No problem. Go to the gym and do problem. Go to the gym and do something intense for 20 minutes, with lots of something intense for 20 minutes, with lots of jumping, lots of sprints, lots of jumping, lots of sprints, lots of fast and strong movements, and fast and strong movements, and you'll get a great workout you'll get a great workout supported by creatine. Yes, okay.

Let's talk a little about some of the Let's talk a little about some of the myths; I've been hearing these things for myths; I've been hearing these things for years. Um, creatine is a steroid. I don't know who the hell would think that,. I don't know who the hell would think that, because it's not true. It's simply a because it's not true. It's simply a natural supplement, something that your body, natural supplement, something that your body, uh, even produces naturally uh, even produces naturally to some extent and that to some extent and that is certainly present in food, as is certainly present in food, as we said.

we said. Um, here's an important one: it Um, here's an important one: it damages the kidneys. They've been saying this since damages the kidneys. They've been saying this since the 90s. Um, regarding certain the 90s. Um, regarding certain concerns, it's been studied concerns, it's been studied extensively, demonstrating that it doesn't affect extensively, demonstrating that it doesn't affect the kidneys. Having said all that, as the kidneys. Having said all that, as with anything else, yes. I with anything else, yes. I mean, if someone—well, not only that, but that's what I was getting at— mean, if someone—well, not only that, but that's what I was getting at— if someone if someone really has kidney disease, really has kidney disease, then there's a possibility of then there's a possibility of elimination. It's called creatine. Something you elimination. It's called creatine. Something you measure in the blood is called measure in the blood is called creatinine, which is related to creatinine, which is related to that. So you should know that that. So you should know that you can actually see you can actually see creatine levels indirectly through creatine levels indirectly through something called creatinine, which we measure in something called creatinine, which we measure in a regular blood test that a regular blood test that looks at kidney function. Um, but that does looks at kidney function. Um, but that does n't necessarily mean there's a n't necessarily mean there's a problem. But if a patient has problem. But if a patient has kidney disease, then perhaps the kidney disease, then perhaps the amount of creatine should be regulated.

amount of creatine should be regulated. Yes that's fine. Brilliant. So this Yes that's fine. Brilliant. So this is a very good point you make, is a very good point you make, which is something we don't usually talk about on our which is something we don't usually talk about on our podcast. But this is podcast. But this is obviously not, this is

obviously not obviously not, this is obviously not specific medical advice. These specific medical advice. These are generalizations that are generalizations that we discuss in this program. What we are we discuss in this program. What we are looking for is for the audience to have looking for is for the audience to have thoughts and ideas that they can then use to thoughts and ideas that they can then use to participate in a conversation, participate in a conversation, a polite conversation, with their a polite conversation, with their doctor. If you have doctor. If you have specific disease processes, then the specific disease processes, then the uniqueness of that uniqueness of that disease process must be considered in whatever disease process must be considered in whatever we are recommending. So, we are recommending. So, thank you for pointing that out. That's thank you for pointing that out. That's important. One of the other important. One of the other potential myths, or let's call it a potential myths, or let's call it a side effect, is that there may be some side effect, is that there may be some swelling that comes with it. Um, but swelling that comes with it. Um, but that's usually at higher doses, and that's usually at higher doses, and here you're giving your example, I here you're giving your example, I take 10, at least you take 20, and without bloating with that. So I, and without bloating with that. So I think these higher-quality think these higher-quality creatine monohydrates that we usually see creatine monohydrates that we usually see just don't do that. But just don't do that. But is it possible? I think it is. But is it possible? I think it is. But certainly with five grams, it certainly with five grams, it simply isn't. And the other reason simply isn't. And the other reason why I believe, from what I've read and why I believe, from what I've read and this, I didn't read specific articles, this, I didn't read specific articles, but anecdotal things, uh, or but anecdotal things, uh, or excuse me, specific research ; It's more what I've read ; It's more what I've read anecdotally, and it makes sense, that I anecdotally, and it makes sense, that I think people will experience think people will experience more bloating with creatine if their more bloating with creatine if their hydration is poor or if they are hydration is poor or if they are dehydrated. If you don't drink dehydrated. If you don't drink hydrating water, that is, water rich in hydrating water, that is, water rich in electrolytes, you will retain more water electrolytes, you will retain more water outside the cell and that, combined outside the cell and that, combined with creatine, will cause that with creatine, will cause that bloating. So I think if you take bloating. So I think if you take higher doses of creatine, but with higher doses of creatine, but with hydrating water, you won't suffer from that hydrating water, you won't suffer from that bloating.

bloating. bloating. Yes. And again, you mean Yes. And again, you mean hydrating water, that is, hydrating water, that is, activated hydration full of electrolytes.

activated hydration full of electrolytes. Yes ok. Yes ok. OK. Well, that's pretty much all OK. Well, that's pretty much all about creatine. Um, what about about creatine. Um, what about sleep cycles? I don't see any reason to do that.

see any reason to do that. None. I mean, for me, this is something you None. I mean, for me, this is something you should do forever. Amen. That is should do forever. Amen. That is,,, yes. I almost compare it to a yes. I almost compare it to a whole-food product. I think when whole-food product. I think when we say whole food, it means we say whole food, it means something we basically equate with something we basically equate with eating food, right? So, um, eating food, right? So, um, I think you can take creatine I think you can take creatine regularly and you don't have to regularly and you don't have to cycle it.

cycle it. Agreed.

CJC and Ipamorelin Peptides

Um, well, we have we have creatine in beef. I try creatine in beef. I try to remember what the number is. Yes. to remember what the number is. Yes. So, you know, 100 grams of, So, you know, 100 grams of, say, 4 ounces of lean ground beef, say, 4 ounces of lean ground beef, you get half a gram of creatine. So that's not even you get half a gram of creatine. So that's not even close. Obviously close. Obviously we can increase the doses with the we can increase the doses with the supplement, but there you only have, you supplement, but there you only have, you know, half a gram. A know, half a gram. A sirloin steak or a ribeye provides about sirloin steak or a ribeye provides about one gram of creatine. Um, so one gram of creatine. Um, so probably with a diet rich in probably with a diet rich in good quality protein, someone good quality protein, someone gets three to five grams a day gets three to five grams a day potentially. Anyway, potentially. Anyway, that's a very good point I have to make that's a very good point I have to make. I'm not sure I've. I'm not sure I've considered it for myself. So, considered it for myself. So, thank you. I think I'll calculate that a thank you. I think I'll calculate that a little more precisely. I've been little

more precisely. I've been taking my medicinal dose of 10 to 20 taking my medicinal dose of 10 to 20 grams, mostly 20 a day, without grams, mostly 20 a day, without really considering that I have a really considering that I have a high-protein diet. How high-protein diet. How interesting. Okay, thanks for interesting. Okay, thanks for sharing that. Let's move on sharing that. Let's move on now to CJC and Ipamorelina. This now to CJC and Ipamorelina. This is a particular peptide. We started by is a particular peptide. We started by talking about a hormonal strategy talking about a hormonal strategy for muscle. This is testosterone for muscle. This is testosterone and nandrolone together. We talked about and nandrolone together. We talked about creatine as a supplement and now CJC and creatine as a supplement and now CJC and Ipamorelin as a peptide. So, what are peptides? I think it's what are peptides? I think it's important to mention that we hear important to mention that we hear this term more and more. We have this term more and more. We have heard this term in relation to heard this term in relation to GLP-1s such as semaglutide and GLP-1s such as semaglutide and tirzepatide. But a peptide tirzepatide. But a peptide simply means a short, simply means a short, small chain of amino acids that has small chain of amino acids that has various effects on the body. a type of various effects on the body. a type of communicative benefits that are communicative benefits that are similar or mechanisms, as I say, similar or mechanisms, as I say, similar to similar to hormonal stimulations. So it simply affects hormonal stimulations. So it simply affects the cell in a certain way, but they are the cell in a certain way, but they are different from hormones in that different from hormones in that hormones are much hormones are much larger. Uh, these various peptides larger. Uh, these various peptides are much smaller. Hormones are much smaller. Hormones affect the central part of the cell, affect the central part of the cell, at the DNA level, and peptides at the DNA level, and peptides primarily affect primarily affect cell membranes. Um, a little different, but cell membranes. Um, a little different, but these peptides are quite profound these peptides are quite profound and can help with your and can help with your immune system and immune system and tissue repair. Um, and some peptides will tissue repair. Um, and some peptides will communicate with your communicate with your pituitary gland. So your pituitary gland. So your pituitary gland can produce pituitary gland can produce growth hormone, produce growth hormone, produce human growth hormone. And that's what we're human growth hormone. And that's what we're talking about here with CJC and talking about here with CJC and ipamoreline. These ipamoreline. These particular peptides stimulate your pituitary gland particular peptides stimulate your pituitary gland to secrete more to secrete more growth hormone. That growth hormone. That growth hormone, in turn, is very good at growth hormone, in turn, is very good at building muscle and bone.

building muscle and bone. Yes. And this is a really Yes. And this is a really important peptide for longevity because as important peptide for longevity because as we age, we release, we age, we release, produce, but then release less produce, but then release less of our of our endogenous or self-produced growth hormone endogenous or self-produced growth hormone.

.. Yes. Yes. Actually, it's still Yes. Yes. Actually, it's still pretty much trapped in the pituitary gland, pretty much trapped in the pituitary gland, but it can't get out on its own. And but it can't get out on its own. And then, as we take these then, as we take these types of peptides, this CJC 1295 types of peptides, this CJC 1295 is telling that pituitary gland, hey, is telling that pituitary gland, hey, go and squeeze it out of there. And that's your go and squeeze it out of there. And that's your natural growth hormone. The natural growth hormone. The great thing about these peptides is that they great thing about these peptides is that they encourage your own production instead encourage your own production instead of giving it to you directly. Therefore, the of giving it to you directly. Therefore, the side effect profile is side effect profile is incredibly low, practically. I mean incredibly low, practically. I mean, frankly, we've, frankly, we've been prescribing these peptides been prescribing these peptides for about 10 years and we were among the for about 10 years and we were among the first to adopt them. Again, first to adopt them. Again, we're hearing more about them in the we're hearing more about them in the last one to three years maybe. Um, I don't see any side effects. I. Um, I don't see any side effects. I mean, I know they exist, it's just mean, I know they exist, it's just not…

not… not… there are some reported, but I've never there are some reported, but I've never seen anything. And let me tell you, if I've seen anything. And let me tell you, if I've seen anything like bloating, I think seen anything like bloating, I think bloating might be one of them, or bloating might be one of them, or water retention. I would say that's water retention. I would say that's probably the cause of many other probably the cause of many other things in the patient before I would things in the patient before I would blame the CJC. And I'm pretty sure I'm blame the CJC. And I'm pretty sure I'm right because when right because when we changed a few things, that symptom we changed a few things, that symptom disappeared even though they continued disappeared even though they

continued taking CJC. So, I mean, it's taking CJC. So, I mean, it's always worth noticing. It's always worth always worth noticing. It's always worth pointing it out so the pointing it out so the person is aware, but I mean person is aware, but I mean, I've never seen it.

, I've never seen it. Yes. I think that's the important thing, this is what I Yes. I think that's the important thing, this is what I mean by mean by side effects. What I'm also trying to say side effects. What I'm also trying to say is whether there are any side effects is whether there are any side effects from injecting a peptide, a from injecting a peptide, a protein, into the body. Yes. Sometimes protein, into the body. Yes. Sometimes you speak generally now, about peptides you speak generally now, about peptides in general, in general, any peptide could, where the any peptide could, where the side effects we usually see side effects we usually see for any of them don't come for any of them don't come from the mechanism of how it affects the body. It's how it enters your body and then your body. It's how it enters your body and then your body has an immune reaction. It makes you has an immune reaction. It makes you itch. You have a kind of itch. You have a kind of local swelling around where you local swelling around where you inject yourself, near your stomach. Some inject yourself, near your stomach. Some people may have, you know, people may have, you know, quite strong negative immune reactions quite strong negative immune reactions and simply can't do it ; It's rare, but it can happen. But that's ; It's rare, but it can happen. But that's not due to the nature of how not due to the nature of how CJC stimulates your pituitary gland to CJC stimulates your pituitary gland to produce growth hormone and the produce growth hormone and the effects of all this extra hormone on effects of all this extra hormone on your system. You're simply not your system. You're simply not experiencing any side effects from it.

experiencing any side effects from it. At least I don't see that with the doses At least I don't see that with the doses we prescribe. we prescribe. Yes. In addition, we evaluate the patient Yes. In addition, we evaluate the patient to see if they are a candidate. Is he a good to see if they are a candidate. Is he a good candidate for candidate for growth hormone replacement? Does he need growth hormone replacement? Does he need growth hormone? So, it's not growth hormone? So, it's not like we're working with people who like we're working with people who already have already have extremely high measurable levels or very extremely high measurable levels or very healthy levels of growth hormone and healthy levels of growth hormone and overloading them.

overloading them. Correct. Correct. Correct. Correct. Yes. And usually, by the Correct. Yes. And usually, by the time someone considers these types of time someone considers these types of peptides, they are over 30 or 40 years old peptides, they are over 30 or 40 years old. And that is the initial phase.

NAD for Energy and Mitochondrial Support

And that is the initial phase where they would potentially have where they would potentially have low levels of human growth hormone. low levels of human growth hormone.

So it really is the So it really is the human growth hormone that causes human growth hormone that causes muscle growth. It is causing muscle growth. It is causing a positive reaction to help you a positive reaction to help you recover from exercise. That's a recover from exercise. That's a very, very important part.

very, very important part. Yes, that's very important. Correct. Yes, that's very important. Correct. So, we get effects from the So, we get effects from the body's own hormone; it's not the body's own hormone; it's not the same as getting an effect solely from a same as getting an effect solely from a drug.

drug. drug. Correct. Where, let's say, the Correct. Where, let's say, the testosterone we were talking about testosterone we were talking about earlier, we usually prescribe it earlier, we usually prescribe it exogenously, which means it comes from exogenously, which means it comes from outside and we introduce it. We are outside and we introduce it. We are replacing what is deficient. We replacing what is deficient. We are not necessarily telling are not necessarily telling the testicles or ovaries to the testicles or ovaries to produce more testosterone. We are produce more testosterone. We are replacing her. It is a different type of mechanism replacing her. It is a different type of mechanism. But when it comes to this. But when it comes to this growth hormone, it's wonderful to growth hormone, it's wonderful to be able to convince the system to be able to convince the system to produce it. Perhaps patients produce it. Perhaps patients reach a certain age where this is more reach a certain age where

this is more difficult to achieve. They may already be difficult to achieve. They may already be over 70 years old. I think this type of over 70 years old. I think this type of approach is approach is perhaps underperforming, but it can still be perhaps underperforming, but it can still be useful depending on the type. But, well, anyway, yes,, anyway, yes, muscle and bone recovery is increasing. It muscle and bone recovery is increasing. It definitely helps burn fat. I definitely helps burn fat. I mean, when people mean, when people combine this peptide with testosterone combine this peptide with testosterone and, you know, a and, you know, a really good exercise process and regimen, it's really good exercise process and regimen, it's amazing what it can do. That's right, and because it's a right, and because it's a growth hormone, which is almost one of the growth hormone, which is almost one of the most anti-aging hormones we most anti-aging hormones we have. So you also get have. So you also get those aesthetic benefits. You get recovery and repair even in recovery and repair even in the skin. and you get that glow of the skin. and you get that glow of younger-looking skin. Um, and because younger-looking skin. Um, and because you get better hydration, you get better hydration, again, aesthetically, you look again, aesthetically, you look better. Think about what all those better. Think about what all those fillers that are hyaluronic acid are. It's fillers that are hyaluronic acid are. It's all about humidity. It's all about all about humidity. It's all about adding volume, and you sleep better with adding volume, and you sleep better with CJC. So, CJC. So, growth hormone growth hormone definitely helps you sleep. It's a definitely helps you sleep. It's a recovery.

recovery. recovery. It's recovery. It's recovery. Yes Yes Yes ok. ok. ok. So, um, that's CJC. Oh, and how So, um, that's CJC. Oh, and how is this? You know, I guess we didn't go into is this? You know, I guess we didn't go into too much detail. We were too much detail. We were talking about creatine. Obviously, that talking about creatine. Obviously, that 's oral. When it comes to 's oral. When it comes to testosterone, we tend to give it as an testosterone, we tend to give it as an injection, nandrolone as an injection, nandrolone as an injection, and CJC-Ipamorelin would injection, and CJC-Ipamorelin would also be administered as an also be administered as an injection. Okay, those were the three injection. Okay, those were the three main ones. We have a bonus here.

main ones. We have a bonus here. Well, actually, I have another one to Well, actually, I have another one to add, but talk about your bonus first and then I'll add, but talk about your bonus first and then I'll give mine. It's fast.

give mine. It's fast. No, I want to know your bonus first. No, I want to know your bonus first. Okay, my bonus is NAD. Oh, Okay, my bonus is NAD. Oh, and the reason I say NAD is and the reason I say NAD is because for myself, and I would say for because for myself, and I would say for most of my patients, that most of my patients, that general lack of energy, especially general lack of energy, especially when you're very, very, very busy.

when you're very, very, very busy. NAD has been one of the most NAD has been one of the most profound replacements in my life and in the lives of profound replacements in my life and in the lives of most of my patients, giving them most of my patients, giving them the impetus to do more. And I find the impetus to do more. And I find that when I add NAD to the patients' profiles that when I add NAD to the patients' profiles, they are much happier, they are much happier with their workouts. They say, "I want with their workouts. They say, "I want to train." "I feel so good." "I to train." "I feel so good." "I want it." And I wanted to mention it as a want it." And I wanted to mention it as a bonus because I think NAD is bonus because I think NAD is trendy, and whenever something is trendy, trendy, and whenever something is trendy, it tends to fall out of fashion until the it tends to fall out of fashion until the next thing comes along, which next thing comes along, which we'll talk about repeatedly in our we'll talk about repeatedly in our episodes. But I say we must episodes. But I say we must stand firm. Get that NAD at the stand firm. Get that NAD at the dose that's right for you. And it dose that's right for you. And it will vary. The dosage varies depending on what will vary. The dosage varies depending on what you need at that time in your life.

you need at that time in your life. But man, your workout feels so But man, your workout feels so much more rewarding when you have much more rewarding when you have the energy to do it.

So, NAD is a precursor. It helps So, NAD is a precursor. It helps your mitochondria inside the cell, the mitochondria that produce, the mitochondria that produce energy inside your cell, to energy inside your cell, to produce more energy, something called produce more energy, something called ATP. And if we're talking about something that produces ATP. And if we're talking about something that produces energy, NAD is simply energy, NAD is simply necessary in that process. That necessary in that process. That Krebs cycle that we had to learn in Krebs cycle that we had to learn in school. I still have nightmares about school. I still have nightmares about it. But in three different

parts of it. But in three different parts of that Krebs cycle to produce that Krebs cycle to produce energy, NAD is required.

energy, NAD is required. We understand that most We understand that most diseases, certainly one theory diseases, certainly one theory of aging, is a problem with of aging, is a problem with the mitochondria. Mitochondria.

the mitochondria. Mitochondria. So, if we can help and heal the So, if we can help and heal the mitochondria now, we're helping mitochondria now, we're helping with aging, helping with with aging, helping with energy, as you say, if you have more energy, as you say, if you have more energy, then it will help with your energy, then it will help with your training. So I think it's a training. So I think it's a wonderful advantage. I didn't expect it.

wonderful advantage. I didn't expect it. Good for you. Look at you, always Good for you. Look at you, always surprising me and keeping me on my toes surprising me and keeping me on my toes. Well, my advantage was. Well, my advantage was stem cells.

Stem Cells and Regenerative Therapy

And you know, particularly these And you know, particularly these tissue allografts, tissue allografts, stem cell therapy is quite profound, and stem cell therapy is quite profound, and we can talk briefly about we can talk briefly about stem cells here as far as stem cells here as far as orthopedic reasons are concerned, i.e., orthopedic reasons are concerned, i.e., administering stem cells that help administering stem cells that help with with with joint repair. Obviously, if you're in joint repair. Obviously, if you're in pain, you won't want to exercise. If you do pain, you won't want to exercise. If you do n't want to exercise, you won't be able to n't want to exercise, you won't be able to build muscle. Therefore, build muscle. Therefore, stem cells end up being stem cells end up being incredibly regenerative for incredibly regenerative for joints and we highly recommend them joints and we highly recommend them. But. But stem cells can also stem cells can also potentially be administered systemically via intravenous injection potentially be administered systemically via intravenous injection, which in turn may, which in turn may have an overall have an overall longevity and anti-aging benefit that longevity and anti-aging benefit that helps with energy and, in turn, helps with energy and, in turn, aids muscle growth.

aids muscle growth. Well, and stem cells Well, and stem cells were once, and I think perhaps still are, were once, and I think perhaps still are, considered something unattainable for the considered something unattainable for the average citizen. But they really aren't average citizen. But they really aren't. I mean, the world of. I mean, the world of stem cells in these allografts stem cells in these allografts has expanded incredibly.

has expanded incredibly. So much time, energy, So much time, energy, money, and research has been invested in this, that I money, and research has been invested in this, that I think many of you would be think many of you would be pleasantly surprised at how pleasantly surprised at how accessible they are, especially given accessible they are, especially given how powerful they are.

Yes. And a lot has changed. We've been Yes. And a lot has changed. We've been dealing with the world of dealing with the world of stem cells for about 10 years and we've stem cells for about 10 years and we've seen it change. We've seen seen it change. We've seen new regulations come in that I think new regulations come in that I think were actually good. I think there were, were actually good. I think there were, and still are, a lot of things out of and still are, a lot of things out of control out there with, uh, control out there with, uh, stem cells.

Uh, in the United States, certainly Uh, in the United States, certainly what's happening what's happening abroad… And I think it's important to abroad… And I think it's important to make sure that, uh, we're make sure that, uh, we're watching this, that we're using watching this, that we're using companies that really know what they're doing companies that really know what they're doing, that the people know what they're, that the people know what they're doing, and that who we use is doing, and that who we use is really the best of the best, right? Uh, I've worked hard to right? Uh, I've worked hard to talk to these people until I was talk to these people until I was exhausted in order to really filter out much of exhausted in order to really filter out much of the noise, because a lot of it the noise, because a lot of it is marketing and, in a way, is marketing and, in a way, nonsense.

nonsense. nonsense. It's just misinformation and, as you It's just misinformation and, as you said, it's marketing. Uh, let me said, it's marketing. Uh, let me take advantage of that idea by talking about take advantage of that idea by talking about quality. I cannot overemphasize quality. I cannot overemphasize the importance of the importance of consumers not buying supplements from consumers not buying supplements from generic warehouse-type websites. Uh, there's simply a huge lack of, there's simply a huge lack of control. There is a lot of repackaging. There's a control. There is a lot of repackaging. There's a lot of relabeling. You really want to lot of relabeling. You really want to make sure you buy your supplements make sure you buy your supplements directly from your doctor, directly directly from your doctor, directly from a nutraceutical company, or directly from the brand from a nutraceutical company, or directly from the brand itself.

itself. itself. Uh, there are warehouses out there like, uh, Full Scripts. Full Scripts., Full Scripts. Full Scripts. Full Scripts. Uh, these are companies Full Scripts. Uh, these are companies that have dedicated themselves to ensuring that they that have dedicated themselves to ensuring that they have the quality that doctors have the quality that doctors ask you to take.

ask you to take. Yes. Yes. Yes. So be very aware of that. I've So be very aware of that. I've had patients in the past who say, "Oh, I found this on any "Oh, I found this on any website much cheaper." And I website much cheaper." And I tell them, "Yes, especially things we don't tell them, "Yes, especially things we don't have." It's not about me making have." It's not about me making money from it. It's all about the money from it. It's all about the quality of what you're buying. And quality of what you're buying. And there are two problems with that. As with there are two problems with that. As with stem cells. One, you're not paying stem cells. One, you're not paying for what you're getting, or you're not for what you're getting, or you're not getting for what you're paying for. And getting for what you're paying for. And number two, which is perhaps even more number two, which is perhaps even more worrying, what are you worrying, what are you getting that you don't want?

So, as you mention, the So, as you mention, the quality of the supplier and the quality of the quality of the supplier and the quality of the vendor really do make a big vendor really do make a big difference.

difference. difference. Yes. And I would say that's correct about Yes. And I would say that's correct about anything you're going to ingest, but anything you're going to ingest, but certainly when it comes to certainly when it comes to stem cells, going back to that, it's a good stem cells, going back to that, it's a good point you just made.

point you just made. Yes. Uh, with stem cells, uh, Yes. Uh, with stem cells, uh, you know, how they're obtaining them, which you know, how they're obtaining them, which by the way, in general, uh, these are by the way, in general, uh, these are allografts of tissue that come from allografts of tissue that come from the placenta, uh, particularly from the the placenta, uh, particularly from the umbilical cord. Well, there are umbilical cord. Well, there are stem cells and stem cells and growth factors found in the growth factors found in the umbilical cord, but the mother has umbilical cord, but the mother has been tested for about 30 been tested for about 30 different diseases. Then, these different diseases. Then, these placentas are donated, yes, they are donated placentas are donated, yes, they are donated after natural births. They are obtained after natural births. They are obtained via cesarean section, so everything is via cesarean section, so everything is very intact. And, again, they were very intact. And, again, they were examined before being sent to the examined before being sent to the manufacturer. They examine them again. They then remain in quarantine. They then remain in quarantine for several days and are for several days and are examined again.

examined again. So, when it's done right, it's done So, when it's done right, it's done right. right. right. And correct means that there isn't And correct means that there isn't a range. It really has to be a a range. It really has to be a high-quality product. Then, from high-quality product. Then, from there, there are there, there are additional manufacturing processes. I would say that additional manufacturing processes. I would say that many places do more or less what I just many places do more or less what I just described. But it depends on described. But it depends on how they process it, what other things they how they process it, what other things they do, and what claims they make do, and what claims they make about whether it contains stem cells or not.

about whether it contains stem cells or not. There are many regulations that There are many regulations that simply do not allow certain simply do not allow certain statements to be made in this regard. These are statements to be

made in this regard. These are tissue allografts. That's the tissue allografts. That's the most accurate way to put it, since they most accurate way to put it, since they contain these various elements.

contain these various elements. But making direct claims about But making direct claims about what they contain is, frankly, what they contain is, frankly, illegal. It is important to be sure of illegal. It is important to be sure of who you are working with; The company we who you are working with; The company we use is the same one that the UFC uses use is the same one that the UFC uses for its fighters. I know that the company we for its fighters. I know that the company we use is the same one used by use is the same one used by Kash Patel and RFK Jr. We have gone to great lengths to Kash Patel and RFK Jr. We have gone to great lengths to ensure that we use the ensure that we use the best of the best and that they strictly adhere to best of the best and that they strictly adhere to the regulations on how the regulations on how this should be done in the United States. I think all of that is very important,. I think all of that is very important, but the ultimate question is whether it can but the ultimate question is whether it can help with muscle. The answer is help with muscle. The answer is yes. From a regenerative point of view yes. From a regenerative point of view, it can do a lot. And it is,,, as always for us, part of a as always for us, part of a comprehensive approach to what we do. We comprehensive approach to what we do. We asked ourselves, "From how many asked ourselves, "From how many different angles can we help you reach different angles can we help you reach your goal, in this case, muscle? " " " Exactly. Very good. Excellent.

Exactly. Very good. Excellent. See you next time. Do you like what you See you next time. Do you like what you 're hearing? Do you want 're hearing? Do you want to hear more? Are you loving to hear more? Are you loving this great content? And do you have this great content? And do you have any questions for us?

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