What Your Gut Says About Your Health: Functional Medicine Insights with Daniel Chille Transcript

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Introduction and Foundation Five

And so I kind of refined it and it's you got to eat right, sleep right, move right, talk right, poop right, and you're going to feel right. So it's literally those those five pillars.

It's obviously the food definitely matters, which is highly personalized, depending on your microbiome. I think they did studies with with twins and they found maybe up to a 40 percent connection.

In identical twins with similarities in the microbiome, that's very dissimilar. So that becomes your blueprint. Obviously movement matters. If you don't use it, you lose it.

The body is designed to move to sweat to release toxins from lymph and to excretion portals such as respiration or through the skin. the elimination such as urine or stool naturally.

The stool also poop right. That's kind of where my focus has been for the last 10 years is focusing very deep in the microbiome and microbial medicine as I call it to make sure that we're excreting.

So we're not what we eat. We are what we absorb, assimilate, and then eliminate. So that matters. This is Dr. Talks. Okay, hello and welcome to The Functional Edge.

I am delighted to introduce a colleague who shares my deep commitment to root cause medicine, Dr. Daniel Chilay. He's a functional medicine practitioner who approaches health and advanced diagnostic insight and with deep compassion.

His work centers around gut-brain connection, hormonal balance, cellular function, and inflammation. And he's helped countless patients find answers where others couldn't.

So, Daniel, I'm so excited to learn about your clinical wisdom. Thank you for joining us. Yes, thank you for having me. Where would you prefer I Sark?

Well, let's start with what core beliefs drive your work with patients today that didn't exist for you in traditional models. Core belief. Well, immediately what comes to mind is my foundation five, as I call it.

And this is something I learned early on with one of my mentors. Actually, it was practicing out of Houston who we spoke about previous to this call. And so I kind of refined it and it's you got to eat right, sleep right, move right, talk right.

poop right and you're gonna feel right so it's literally those those five pillars it's obviously the food definitely matters which is highly personalized depending on your microbiome i think they did studies with with twins and they found maybe up to a 40 connection in identical twins with similarities in the microbiome and that's very dissimilar.

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So we're not what we eat, we are what we absorb, assimilate, and then eliminate. So that matters. The talk is often

overlooked in medicine. I think that the talk right component, so whether you have a spiritual belief or even the term of hope, Physiology follows psychology.

So until we tell ourselves, you know, words of affirmation or positivity, we get stuck in this kind of like negative self sabotage that I find most my patients in, which just really heightens the burden of disease.

So eat right, sleep right, move right, talk right, poop right. Again, that's my foundation five. So that's really my core that I start with. That's awesome.

That's great. I love how that you put that it just it's easy to understand it stepwise. That's great. So you see a lot of patients with GI issues. What are the underlying triggers that are often overlooked?

So now we spoke this kind of at length when I had you on our podcast, which let me go backwards. So I'll typically see a lot of patients for GI issues and unbeknownst to none, it's often GI issues.

Gut Health Triggers and Testing

But what happens is we'll get patients about 75, 85 percent better, which they're very grateful for because they've been stuck for years, if not decades, seeing multitudes of different practitioners from many different realms of medicine.

But for me, that's enough and then often I will do a mold or total toxin test and I find very, very quickly that their toxic burden is extremely high.

And then if you couple that with a genetic test to ascertain kind of phase two, phase three detoxification pathways, whether they have impairment within methylation, glucuronidation, sulfation, etc.

We get them on a very specific treatment plan to optimize the results to get to 100%. But looking at it from the root, the GI is typically where we circus.

As I spoke earlier with you, we're getting a lot more mental health patients with intrusive thoughts, depression, anxiety, mood instability. That's starting in the gut.

Most of our serotonin, dopamine, that begins in the gut. And we now recognize that the hormones or neurotransmitters of the brain, the hormones of the brain, start with our healthy microbes.

So, specific ratios within firmicutes to bacteroides, proteobacteria, tenobacteria, we go very deep on analyzing stool. to optimize overall health and human performance.

But many of our patients that come in with GI issues, they often don't recognize that it's GI because I think it's estimated 60% of people that have SIBO are asymptomatic.

How interesting. So people are walking around with this what is now known as leaky gut or colically known as intestinal permeability and how that begins to affect every other organ system in the body.

Autoimmune is a diagnosis of 70 years, meaning you've been deteriorating for that long that the body begins to attack organ tissue. Certainly now we see with the prevalence and corruption in our food.

and our soil and our water, we are exposed daily. So the burden of elimination becomes much higher. And so with this representation and testable permeability, we have undigested food gets into the bloodstream immune system.

The alarms go off. Inflammation is upregulated. And now we have systemic inflammation unchecked. That's when you have chronic disease. So a lot of people, we don't feel sick until it's often too late.

Yeah, absolutely. Absolutely. So what tests do you rely on for assessing gut health and what markers do you find

to be the most predictive of patient outcomes?

You know, the best test is the individual. You often don't hear that, right? We complicate medicine in some regards. We've lost this intuition of how we need to eat.

And I'm not talking about like if you're creating sweets because you're overgrown with yeast or your specific bacteria that feeds on sugar, right? The bacteria that feed on kale is certainly not the bacteria that feed on sugar.

So context does matter. But often is we eat food and then we're bloated or we're distended or we have obviously gas, constipation, diarrhea. We're not eating the right foods, but yet we continue to repeat that same cycle.

So when I have patients that come in they're pooping maybe every two, three days and they feel that's normal, but yet they have aches and pains and they don't correlate the pain with the fact that their inflammatory burden is so high, their immune system has been revving up for so long now that now they have toxins deposited into joints.

So what happens is you're eating food and you're ignoring the signal that something is wrong or certainly you're eating fast food devoid of specific nutrients, right?

And so we are now overfed but malnourished. Beyond any sort of test, I like the patient to just step back and say, how does this food make you feel? Does it give you more energy or otherwise?

So when I have a conversation with patients, I make it simple. Nutrition is going to heal you or it's going to hurt you. There is no in between. Same thing with medicine, same thing with supplements, same thing with alcohol, same thing.

Everything is exercise as well. It's going to heal you, it's going to hurt you. So the context certainly matters. So I invite patients to just look inward and then just assess, okay, how does this make them feel, right?

With our stubborn, chronically ill patients, when we put them on a carnivore for just a very brief time, they begin to feel great. the bloating goes away, the distension goes away.

Now, I like fiber in the context to get people eliminating with a degree of regularity. So transit time should be somewhere between the 12, 16 hours. We can measure that.

I mean, I had a patient come in who she was going once every three weeks, a young lady. Wow. I've been seeing this more and more common now. We get some young athletes that come in here and literally they're going once or twice a week at best.

Yeah. I mean, People don't realize and that's abnormal, but we begin to normalize what's abnormal. Yeah, that's a problem and to be fair I remember distinctly when I was a medical student over 30 years ago having listening to this lecture by a Gastroenterologist who said you well, you know some people poop every day and some people poop once every three days and that's normal for them and that's okay and you know, I think we just we've been learning more as time goes on and now we recognize that no Pooping every three days is not normal.

You should be going every day, sometimes twice a day, you know. I like full evacuation AM and PM. That to me is the gold standard. Now, some of my peers suggest you should go after every time you eat.

Would like three full meals, so then you have three full bowel movements, which I also like as well. But certainly this metric of, you know, everyone's different, maybe once every few days for someone is normal.

I don't necessarily adhere to that doctrine. So I think that's a disservice. Now, as far as the testing goes, we definitely do like tracking data. I don't like guessing.

I certainly like testing. The microbiome test that we use for me is very, very profound. Often enough, my patients prefer the food sensitivity, which often comes up with a lot of red flags with what the patient is currently eating

because of the degree of intestinal permeability.

So that's when we suggest an elimination diet at the minimum, obviously, avoiding the foods that are triggers because it's just gas on the fire. So the test that we use, whether it's the GI map with diagnostic solutions or vibrant, we use a lot more with our gut tumor and looking more in depth to the specific strains of your microbiome.

I think there's a couple of new tests that I'm really bullish on that's coming out in the pipeline with terro biome and I think gut ID. But needless to say is We are very, very bullish with the gut test only because to me, I define that as longevity medicine.

Until you can clean up someone's GI, until you can optimize specific ratios within the gut, you're never going to optimize health and human performance because we realize we are more bacterial DNA than we are human DNA by a factor of a minimum 10x.

Right? So we're walking microbes, okay? I'm trying to talk to my bacteria every day. I'm rubbing my belly. I'm trying to make best friends with them. I want it to be the best environment ecosystem so they can begin to thrive because they feed me.

So people think you are what you eat. No, you actually, I know we said what you eat, assimilate and eliminate, but it's also you are what you feed your bacteria because they run the show.

They will stabilize your mood. They will attenuate your inflammatory road via your immune response. So you said I like to connect the brain gut access via the vagus nerve.

We know how that innervates every single step of digestion. My big B. I. G. is brain, immune, gut. When you connect those three, you're getting someone better, whether it starts in the brain or the gut or vice versa.

We know that the gut talks the brain 10 times more volume versus brain to gut. So when someone has a gut instinct, that matters. We've just lost the art of looking inward to recognize that.

Or we just override that say, oh, no, I'm going to keep doing what I'm doing because someone else told me that, right? That is the worst disservice. When you're looking at the microbiome specifically with nutrition, like we think, oh, you know, we got to eat this way.

These are the superfoods. No, I couldn't. That's so far from the truth because some of my chronically ill patients, you give them and we're talking about glutathione with one of your patients.

And the wealth of knowledge you have is incredible. So I appreciate kind of some insights that you shared in a previous conversation. When you give someone like sulfur compounds, an example with SIBO, you're just in fiber.

Gut-Brain Connection and Mental Health

You're going to light them on fire. These are super foods, but yet not super for someone at that time. Yeah, yeah. That's the whole personalized approach to medicine.

And that's really predicated upon testing, too, because you can see very quickly where to make the biggest impact to improve someone's health outcome.

Absolutely. How do you explain to patients how their gut is affecting their mental clarity, mood, and even memory? Yeah, so going back to, I mean, 90% of the serotonin that is produced in the gut, if you look at it, we produce 400 times, up to 400 times more melatonin in the gut than in the pineal, which we didn't only realize until recently.

So when you're looking at mood instability, it starts with the gut. Someone who has depression, who has anxiety, who has mood swings, That's an unhealthy microbiome.

That's dysbiosis. I had probably my last five patients within this week all on different SSRIs, anti-anxiolytics, antidepressant medications. I clean up their gut, not only from their nutrition, but certainly some overgrowth of pathogenic bacteria, virulence factors, certainly parasite can play the mycobion or the impact of CFO and fungal overgrowth.

Obviously, the interplay within each of these species will impact how how your hormones are secreted and neurotransmitters are hormones of the brain. So until you clean up someone's gut, I don't know how they ever come out on top.

You're not deficient in the medication. You're deficient in a healthy microbiome. And until you can reframe that paradigm, it becomes very difficult. And the problem is that I see so many of these mental health patients that they've done a colonoscopy, they do an endoscopy, everything looks good.

They go to their gastro, everything seems to look fine, but yet they're only feeling worse and worse. Yeah. And the breakthrough becomes is when you clean their nutrition, when you clean up their gut, often is it's a lot of bad bacteria that begin to overgrow over time.

When you restore healthy balance, they can breathe, they can relax, and now they can repair. Yeah, yeah, absolutely. Do you see emotional trauma or stress contributing to gut dysfunction and how do you address that in a clinical setting?

You know, piggybacking on our previous conversation prior to this with the emotional trauma and we were just talking about fascial work and the power of fascia.

So we recognize now the fascia doesn't just encase his muscle, it acts on muscle and muscles move bones better than anywhere else, better than any sort of adjustment or anything like that.

We need healthy bones naturally. We also need healthy muscles and we need healthy, hydrated fascia. But fascia also stores our emotion. So when you're talking about patients with trauma, we get people doing fascial stretch therapy that have a tremendous release and start crying on the table.

and it's just from healthy movement we are just manipulating fascia to provide a release whether we're doing cranial sacral work or throughout the entire body so emotions are very powerful obviously there's trauma involved here whenever you're talking about trauma stress impacts negatively on our microbiome it impairs healthy stomach acid secretion which provides an interrupted signal for digestive enzyme secretion and bile secretion from the gallbladder and the pancreas respectively.

If you have indigestion, if you call it, then you have food getting into the small intestine that's not entirely broken down. What do you have? SIBO, small intestinal bacterial overgrowth, or you'll have translocation from the colon into the small intestine because the gatekeepers are open.

So whether that's the lowest esophageal sphincter, looking at the ulcic valve, when you have digestive perturbations throughout the chain, you are not going to feel right.

You're going to feel off. How do we honor the principle of feeling off? Well, we begin to have anxiety, but it's not a product of sometimes just our stressful thoughts about career or finance or loved ones or family.

It sometimes starts internally and that's where it's often neglected or overlooked. So my goal is to figure out what's going on under the hood. Let's clean everything else up because 100% of my patients get better when you start cleaning up the microbiome.

Now, beyond that, when you talk about stress, stress just cripples the entire system. And our modern lifestyle is not conducive to our evolutionary biology.

We're doing everything backwards. We're under heavy blue light exposure even into the late hours of night. That's

stress. We're eating late at night. That's stress.

That's insulin resistance. That's further inflammation. We are always pressing the gas until we are empty. And then we hope that there's a gas station nearby.

So with stress in the vagus nerve, you have an interrupted signal again which starts in the hypothalamus. It doesn't allow the body to secrete adequate levels of stomach acid because you have an interrupted signal.

Same thing with your pancreas or gallbladder to release bile to bind to toxins to help with motil and release for elimination. when you have perturbations all along the system there's no way you can be in a healthy state there or it's only time until again chronic disease begins to set in assuming that the stress load can somehow be attenuated now looking at stress directly this is probably where i start all my patients so in terms of healing you were asking about core principles earlier so i have kind of several years to heal, but I'll give you the order of operations.

The first one is circulation and perfusion. So you have to make sure that you're able to deliver nutrients to the tissue. We talked about the technology, the unigrated, assessing the endothelial line, the blood vessel, the capillaries, the glycocalyx.

This is absolutely brilliant. This is layer one for us with all our patients. Layer two is blood sugar management because if your blood sugar is high it's not only just from what you're eating but it's from internal stress or dysbiosis the internal stress drives the dysbiosis that's what happens people only raise their hand with like Daniel I can't fit in a dress or like man I got a you know a fat tire on my belly I want to lose some weight I always say I don't care about the profile because I know I'm going to get you better.

I'm going to help you fit in that dress when I internalize the blood chemistry, when I manage the blood sugar, when I know how you're reacting to certain foods.

So we'll get someone on a CGM-2 evaluator or we'll take a look at that very, very closely to help reduce A1C as fast as possible with some different tactics.

Burberry one is an example. I know we can get into that strategies later, but certainly there's ways to optimize blood sugar management. So you're not constantly inflaming yourself.

And if you're inflamed, you're fat storing, you're not fat burning. So they care about the dress.

Stress, Trauma, and the Vagus Nerve

I care about the internal chemistry because they're going to fit in their dress faster. The third layer and fourth go hand in hand to me is gut and immune.

We know about 90% of our immunity resides in our gut lining. So when I fix the gut, I reduce the inflammatory load. Your immune system auto regulates.

Now layer five is hormones. Now you're secreting your happy, healthy hormones. Now you're looking how you want to look, but that's tier five. So going back to stress, we have a very, very profound, very inexpensive way To tell people it's called my stress leap reset, which again from from I have to credit my my mentor.

Dr. Casio is also in Houston and it's melatonin conjunction with L. Theanine in the therapeutic dosing. Then we'll also add in Ganoderma, which is the reaching mushroom sport.

which helps with rebuilding immune function, reducing the inflammatory load, optimizing blood sugar, and its adaptogenic benefit, obviously, on attenuating the stress response as well.

So that kind of one, two, three punch, it's almost everyone walks away only because of how high their stress profile is. Like, if we do a four-point salivary cortisol, I mean, it's, unfortunately, it's difficult to find people that are not

stressed, right?

It's a product of our modern lifestyle. Maybe we should take a page out of my predecessors or my heritage of Sardinians, the Blue Zones or, you know, where you work less and you live more, right?

And community and building your tribe, I think is critical to that. So that's why I love being able to have this conversation with you. Yeah, awesome.

Can you share a story where healing the gut led to a cascade of unexpected improvements? One that comes to mind was when you asked about trauma and the mental health patient.

We see a lot of patients here with intrusive thoughts who are trying to overcome something very, very difficult. And it's a privilege for us to be able to work with specific patients and really help them.

Because the harder the case, the more profound the transformation. And so one that we have in mind, and we have several testimonials on our page where you can find us.

was on several different medications, again, all dealing with trying to help him overcome depression, anxiety, instability in his mood and mood swings.

All I did was clean up the gut. That's it. I started with stress sleep reset. OK, then I got him into a five RGI protocol, kind of tailored specific for him.

Yeah, cleaved up his nutrition and he goes, Daniel, I didn't realize how much of what I was eating was actually triggering inflammation and triggering my my depression anxiety.

And he thought he was eating healthy. Too often people ask, you know, what what are good substitutes like to try to get in stevia or monk fruit or these are great substitutes.

But we have bitter taste receptors all over the body and bitter is better. so my goal is let's find food that you were intended to eat rather than kind of substitute sometimes that we're trying to still feed our cravings right and that to me is indicative of again some level of dysbiosis or unhealthy commensals so The goal here is once you begin to clean up someone's GI, not in terms of only kind of their microbial species by putting on specific strains of probiotic or getting them to fermented food when tolerated, but also combining that with nutrition and maybe like a food sensitivity to figure out why they're being lit on fire.

It's interesting because another case comes to mind is I had so many patients that they think they're doing everything right. One patient in particular, post-menopausal patient, she's like, Daniel, I'm eating healthy.

I'm doing carnivore with eggs and yogurt, and I'm doing my meals. I'm meal prepping for the entire week. I was like, OK, this is wonderful. I want to do genetic tests on you because I'm curious what your predisposition to histamine is because no matter what she was doing, she was constantly on fire, meaning like constantly felt inflamed.

She had neuropathy and she had tingling in her feet, tingling in her toes, couldn't walk up the stairs without pain. OK? And so I said, let's do a genetic test.

I just want to see specific predispositions. Histamine was very high risk for her. What is she doing? She's meal prepping. Yeah, that's high histamine foods.

Yes. She's finding herself a fighter. Yeah, leftover foods are high in histamine. Yeah. Next is she, we did a food sensitivity test and she was, I think, off the chart on dairy and egg.

Very, very high, like it was above 13. Yeah. And she was doing that every day because she thought like kefir, fermented yogurt, that's great for the microbiome.

Yes. but perhaps not, especially with high histamine patients or in terms of what you're going through, right? And same thing with the other culprit with eggs that she was eating every single day and beef, she had high reactivity to beef.

So everything that you do was lighting her on fire. Yeah. Yeah. It was just adding to the information. Yeah. Until you tap, you don't know, right? Because beef is typically benign, right?

You hear the carnivore diet, people reducing bloating, feeling so much better, more energy, clearer skin. Yeah. But for someone, I had gout patients. Same thing.

So he's of Asian descent and would do a lot of Korean barbecue. Now, I went over like what I wanted. I don't want to eat. We did the food sensitivity and his beef and pork.

off the chart like yeah every time he was eating a meal again it's just lighting gas on fire so the interesting thing you asked is there's so many case studies but the biggest thing is just we don't know what we don't know and that's the power of a test i don't want my patients to spend more money if they don't have to we try to keep costs as lean and mindful as possible but the reality is The power now becomes in some of these tests you can leverage so that you can help someone understand, okay, this is what your trigger is.

We can cut some things out like a food elimination diet, obviously is the gold standard. But again, when you're introducing, sometimes you don't always feel these symptoms because an IgG response can happen up to 21 days after exposure from a protein.

So this is where… Yeah, so interesting. I hope I answered that question. Yeah, absolutely. Absolutely. Well, I want to turn the conversation a little bit towards peptide therapy.

And, you know, peptides are pieces of protein that do cell signaling within the body. So when did you first start incorporating peptides into your practice and what drew you to them?

I think this was almost actually even over 10 years ago now when it said not for human consumption on the label. And I was myself as the guinea pig. And so I always test myself first with everything.

So I went down there and bandwagon. So I have a heritage. My ancestors are from Italy, from Russia. There is extensive. data and research coming out of Russia with Russian scientists and the efficacy of peptides.

Healing Protocols and Peptide Therapy

Obviously, they were using it early on with their athletes, Olympic athletes in particular, same thing out of China. That's why they were kind of always one step ahead once upon a time.

So we know they work. We also know they're extremely safe. I don't use anything that I don't consider safe that I wouldn't use on myself or my children.

So the power of pep test profound. Prior to this conversation, I had a patient who came in for for rehab. He came in bilateral peck tears, both sided from a construction accident, snapped both simultaneously.

And he just was referred to me by by happenstance. Like I was walking into another clinic, which we partner with here and. She goes, hey, you should you should talk to the doc about because he had a pep tech question.

And I go, yeah, we're glad to be asked. He's like, yeah, I was wondering, you know, is there something you think could benefit me? So sure enough, his surgeon just calls me the other week because his healing, they didn't want him to start rehab for six weeks after the surgery.

He's already healed. Wow. Completely. No pain, doing like anything, no limitation. He just confessed to me. He's like, Daniel, I just bicep curled 60 pounds, six zero.

I mean, he's a, we're going to be training him. He's going to be trying out for the UFL as a kicker. But the point is that the power of peptides and healing is, I don't like the word steroids, but it's like healing on steroids.

The capacity to provide the body the right signaling. So two that we use in there as an example, BPC 157, which I think when I was at the World Peptide Conference with Dr.

Siza, I think people believe it should be in our drinking water. So it's naturally produced in our gastric tract as in our enzymes here. So what happens is when you provide someone the right signaling molecule, it usher in more nutrients, more signaling capacity to deliver nutrients to the site of damage to heal.

We pair that in conjunction with cv500 or a fragment of your your thymine peptides with involutes as we age which really boosts the immune system but also helps rebuild the cellular matrix so that one-two punch allows for the ushering in of nutrients the all the beneficial cytokines to help restore the damaged tissue plus in conjunction with the extracellular matrix rebuild what was distressed Much much faster than our own capacity that's that again that's why I created to to healing and service but we know the the efficacy of peptide something is insulin for for so long.

Right we just don't necessarily construed as such same thing like a g l p one as an example too so. Areas peptides various length of sequence of amino acids the problem becomes when the FDA just Comes in where I used to compound these at the same pharmacy that it had the green light There was no issues most upon a time, but now we're a little bit restricted in our very sick Autoimmune patients, you know, we're very reliant on some of these thymic peptides who had tremendous reversals Feeling great when you can't access certain things.

Yes. There's other ways to help patients heal But I like using shortcuts if you will Yeah, yeah, no, absolutely. Which peptides have you seen the most success for with healing intestinal lining or reducing inflammation in the gut?

There's a brilliant formulator, Kyle, with Level Up, who's put it together in all in one. So the two immediately are BPC157, which again is naturally secreted in our gastric enzymes, and then second is that larazotide, which helps heal the tight junctions.

There's a lot of clinical data to demonstrate that. So those to me are the best two. Now you can integrate KPV if there's a level of dysbiosis as well, which the problem with the perturbation in the tight junctions is that you have damage to the gut lining, tight junctions open, xylene comes to the site, releases whatever kind of undigested protein or pathogen into the bloodstream.

And now you have chronic inflammation, systemic inflammation, a high immune response. So lorazetide helps repair that, the tight junctions very, very well.

But to me, peptides aren't always enough. Sometimes obviously we want to get in healthy fiber if we can, if the patient can tolerate it. Why? Because the postbiotic or sacrolytic fermentation of these microbes or proteolytic fermentation of these microbes drive short chain fatty acid production such as butyrate, acetate, propionate, which we know has helped rebuild that mucosal layer which sits right above the tight junction, which then creates a healthy gate to prevent that from happening again when pathogens come to cider, undigested food, any other toxins that we're constantly under deluge from.

So the two that come to mind again, peptides are our BPC 157 lorazetide in conjunction with KPV, we're prudent. Other ingredients I like, which is great in this formulation too, glutamine feeds the colonocytes, the aterocytes to rebuild the mucosal layer as well as zinc carnosine.

So critical when looking at secretory IgA. So vitamin A, obviously you need vitamin D for everything. It's a hormone. Vitamin E, which is great for balancing hormones as well.

And then glutamine, colostrum if someone can tolerate dairy. Otherwise, we use a lot of immunoglobulins, which helps as well. So that was kind of a more comprehensive answer, but definitely peptides for the win.

And the beauty of it is they're oral now. Yes, and some people are doing interesting things. I think i'm forgetting

your name sarah the gene queen I forget the name of her company She has a buckle delivery which is oral so you can put at the roof of your tongue or in the mucus membrane of your mouth So that enhances absorption, but otherwise oral are uh, definitely Injectable if we're doing something more someone kind of comes in with specific injuries and trauma But yeah, go back to the gut a great.

Yeah, right oral is The oral is ideal for the gut healing, I think. It just kind of stays there in the gut. Have you seen any peptides that make a difference for patients with cognitive decline or persistent energy issues?

Yeah, cerebral lysin is a good one for the brain. They have, again, level up. Just shout out, I guess, to them because we use a lot of their products.

I have no affiliation. I just like using stuff that works. So they have a good neuroformulation as well. You can use something like some nasal spray sometimes too.

MotC sealant comes to mind. It also improves the mitochondria. Anytime you have an eye oxidative burden. Let's go back one step even further. Leaky gut, leaky brain.

Yeah. First, we got to fix the we got to fix the gut. And in turn, your brain is going to come back online. So when we go back to kind of our patients with depression or anxiety, also reframing that to I know you asked that question previously, which was an answer in terms of Anxiety to me is when you're ruminating too much kind of in the future, right?

You're not really fulfilled in the present. And I'm not trying to make this a spiritual conversation necessarily, but living in the present is key because too often we're thinking about the next step.

We're planning ahead. We're trying to design our future and then we lose track of the present. And depression is obviously ruminating in the past. And so trying to to let go I think is also very powerful.

But going back to the power of the mind, the power of the mind is tremendous. It can help you heal. I mean, we have so many anecdotes with people overcoming cancer just with kind of thought.

So I always say physiology follows psychology. Certainly, we were discussing vagal nerve tone and different ways to come in and, you know, stimulate the vagus nerve to Just reset, meaning get yourself out of fight or flight, resynchronize your circadian rhythm, allow the body to restore itself in a more parasympathetic state, which forces us to down regulate stress.

And it goes both ways. One feeds forward to the other. But getting out in nature, just even tying with friends, walking along the beach, six diaphragmatic breaths, as they say in Japan, really can shift someone into a parasympathetic state, which has a profound effect on the brain.

If you're looking at breath work alone, again, a lot of things we say start in the gut, but we recognize that connection. And so too often is if one is overlooked, you're never going to optimize the other.

But so those are some of the peptides that I like. For brain, some people are using nicotine. Some of our sick patients actually like with mold or Epstein-Barr or COVID, long-haul COVID, will use very kind of low doses to kick it off the spike protein.

Otherwise, I mean, nicotine can be nootropic. I don't condone necessarily cigarettes or smoking, but you were speaking on your podcast about microdosing.

Cognitive Support and Closing Remarks

So there are certain nootropics that will help as well with enhancing cognitive function. If you look at like any sort of the paracetam or anuracetam, those will also help.

Sometimes there can be some negative consequence because you can get sometimes jittery or difficult for sleep. So being mindful of timing. People are looking for that edge, but I usually found they haven't mastered the foundation, right?

It's the foundation five, as we discussed earlier, but those are some of the some of the peptides that we use for enhancing cognition. I feel like peptides are a nice sort of icing on the cake.

They're not going to be fixing things unless you've done the foundational steps first. Couldn't it be more? Yeah. So what would you consider essential when it comes to patient education or protocol design with peptides?

I think you just said it, for them to be optimized. So let's look at even one layer further with, you know, exosomes and stem cells as an example. has to be able to receive it.

These molecules are absolutely brilliant in their capacity to help us heal, often enough, most of which reside within us. So in order to set someone for success, we have to have a body in a state where it can take in some of these agrogynous molecules.

And so it's anything like with hormone replacement is if your toxic load is very high, it's difficult for the hormone to dock and receive that signal.

Peptides can be no different in some capacity, depending on what pathway that we're working on. So sometimes it is very pathway specific. But the principle is to try to restore someone's micronutrient balance and to reduce their toxic burden.

Because when you do that, your body is in a more receptive state to allow these molecules to do what they were intended to do instead of being just degraded to nothing almost because the toxic burden, the oxidative burden is just far too high.

So what are we doing? Again, mastering the foundation, the stress leap reset, supporting someone wherever they need support, whether again, they're overcoming trauma, personalized nutrition plan obviously will help.

What else are we considering is we're definitely cleaning up the gut microbiome. So when we start there, we find tremendous results ensue. So the athlete that I spoke about, you know, bilateral pectorals, where we did the injectables with him, where tremendous level of success.

I mean, I was even surprised how quickly he healed. Sometimes I surprised myself. We had a kid, and this is actually happening more often, a pelvic bulge and a fracture from just kicking a soccer ball.

I'm doing hormone testing, specifically testosterone for you looking at our younger athletes. What are we finding? They are half of what they were when I was their age.

So what's happening I see is that because our toxic burden is so high, stress fracture on the rise, injuries are on the rise. we would do injections with peptides with these athletes and it was incredible.

Again, sometimes I get surprised how quickly the body can heal under the right circumstance. With kids, usually that happens quicker because their toxic burden isn't necessarily as congested, if you will, as some of our aging population and myself included as adults.

But needless to say is with these peptides, my goal is first to kind of clean up where I can. So we'll also use a medical detox, an example. So the stress and reset or cleaning up the gut, supporting the liver, then we're going to layer in some of these really powerful peptides.

And now you have people feeling not great, but extraordinary. I mean, it just takes them to the next level. But again, that that doesn't happen until, again, you're working through that new journey, right?

So people often like, oh, let me just, we discussed that, I think, with a GLP-1 on your podcast, people just think that there's a shortcut, I can take this and a miracle happens.

Same thing with peptides, it doesn't work that way, unfortunately, right? So we have to discuss with our patients lifestyle factors to make sure that when we use new tools in our toolkit, that it's received with the highest degree of potential.

That's awesome. Yeah, absolutely. Well, Dr. Chilly, it has been an absolute delight having you on the functional edge. If people want to find out more about your practice and how to get in touch with you, where do they go?

So I'm also the TBD fit podcast or TBD fit.com. So that's total body diagnostics of TBD, FIT, TBD fit.com. That's where you can find myself, my staff.

We do telehealth consults. If anyone wants to ever learn more, you're just incredible. Your practice to learning kind of about everything that you're doing even offline is extremely profound.

So I know that your patients are in tremendously good hands and The point is, I mean, we're always learning, growing together, right? Science is evolving, use of peptides is evolving, it's now we're integrating exosomes, stem cells to help potentiate the power for healing.

And we spoke about hyperbaric, you do it at your clinic, we do it at ours for stem cell proliferation. I mean, the body was designed to heal. Sometimes we just have to get the heck out of the way.

Yeah, yeah, absolutely. Well, thank you for joining me on The Functional Edge. I hope today's episode gave you fresh insights and practical tools to level up your life.

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