Why Peptides Need Healthy Mitochondria Transcript

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Introduction and Summit Welcome

Doctor Rob Silverman. Welcome to the bioregulator and Peptides Summit and everybody else who's tuning in here. Welcome. Welcome back to the summit. I'm super excited to have Doctor Silverman here to talk to us about, well, just about where he sees peptides fitting into the framework of work that he does with his patients.

And we are, of course, going to talk a lot about the the terrain, if you will, that one might introduce peptides into and how that affects how they work.

So thank you, doctor Rob, for taking the time to be here today. It's my pleasure. We were just talking before we came on and I'm stoked to be here. You do great work.

You're without question the centerpiece for peptides. Keep going and doing a great job. Thanks for having me. Well, thank you so well. And it's an it's a very auspicious day today. Right.

Today we're recording well recording late for this summit. But today is the second day of the FDA hearings in Washington. So on the on the right, on the small molecules that we're talking about.

And it'll be really interesting to see what comes of that. There seem to be some very interesting developments on the fly. So let's cross our fingers and hope for the best.

Yeah. All right I agree with you. Yeah. So okay. So let's start where at the top or the bottom or whatever we want to call mitochondria. If we want to call them at the top of the heap or the bottom of where we need to begin.

So you often describe mitochondria as the engine of healing, which is a really great way to refer to this little organelle. Can you just share with the audience how mitochondrial function influences the effect, the effectiveness of peptide therapy and clinical practice?

And talk to us a little bit about this engine of healing concept. Absolutely. The mitochondria, the powerhouse of the cell, everybody knows that. But let's take it and move the yardstick a little bit.

Number one ATP production efficient mitochondria decreases the release of reactive oxygen species.

Mitochondria as the Engine of Healing

Number two mitochondria has a function that aids in immune health. Wow. And the big thing is it's a signaler. So once you realize that whatever you put in the body goes to all your mitochondria, because your mitochondria signals, you realize that mitochondria are a vital organ.

Now, when we look at mitochondria and peptides, I'm a big believer. Peptides allow for the healing process to stimulate a car and the direct signalers.

But to train, as you said before, is critical. If we have an anti-inflammatory terrain, we have a meal you that's conducive to healing. Things are just going to work better, if you will, like I used to say on the block.

So for me, every regenerative process requires energy and mitochondria is provided. Yeah, that makes sense. Whether we're repairing tendons, regenerating muscle, reducing neuroinflammation, inflammation, or supporting cognitive function.

ATP is the currency that powers all these processes. Peptides can activate repair pathways. But if the mitochondria dysfunctional the body's response may diminished.

And that's really the crux of what we want to talk about. So for me that's why I always assess factors that impair mitochondrial function including oxidative stress, chronic inflammation, nutritional deficiencies, poor sleep and metabolic healing.

A healthy mitochondria means better healing. Yeah. So let's get a bit more granular on on some of those foundational pillars, if you will, when you talk about nutrition.

And, you know, I don't know that there's a more contentious, everybody agrees that we need good quality sleep, we need enough sleep, blah, blah, blah.

Everybody agrees on that. When it comes to nutrition, people will fight to the death on their concepts, so they will. You put a vegan and a carnivore in a room and lock the door, and I don't know who's coming out alive, honestly, because it's death.

The death. So. Right. So maybe let's. And without going too deeply into nutrition, just maybe sharing your your your philosophy on especially when in a world where we're asking the body to do healing of tissues, what are the guidelines you provide your patients on nutrition?

Well, I'll give you the corporate answer. I like to individualize and personalize for people's goals and genetic markers. And that sounds good. But the big key to a diet and diet is not a jailhouse term.

Diet means something that you eat and lets you know really get that straight. I'm a big believer in an anti-inflammatory diet. Now what do I mean? Number one remove food sensitivities.

I believe that food sensitivities are one of the biggest reasons for chronic hidden inflammation, because most people don't test for them. And secondly, their Iggy based.

And in that IG that means it takes 72 hours from the time of ingestion for Symptomology to come out. So how is a practitioner? Would I know what somebody three days ago is causing inflammation?

How would they know really? That concept is exemplar of the need of testing and not guessing. But I know you want me to put a pin in that because it shouldn't be all about food sensitivities.

I would suggest, number one thing for Americans and or North Americans decrease the consumption of ultra processed food. 57% of the calories we consume come from ultra processed foods.

The consumption of those foods are deleterious to one's overall health. Decreased sugar the average American consumes 140 pounds of sugar per year. It's simply too much.

Yeah, when you add gluten at 136 pounds. And for me, everybody's gluten and dairy free. There is no conversation. That is my without question tenant. No doubt about it.

It's a given. Just like a formula. Yeah. I mean, it's just not even yogurt. Not even yogurt. Coconut yogurt. You met or did you mean like the Dannon yogurt?

Where are we going? No, I'm talking about good quality yogurt. I'm talking about, you know, I mean, good quality, plain, grass fed milk. Organic, as organic as you can get.

Yogurt. I'm talking about the real stuff. Not the not the sugar Sunday thing that passes that they're passing is yogurt to make you feel better. Yeah, my preference would still be a coconut type yogurt.

You can get a healthy one. However, I am living in a realistic world if I can get them to follow everything. And that's the one little stretch I'm in.

Because again, compliance is really hard. You know, it's amazing that I'll give people a gluten free and dairy free

list of foods. It's four pages. There's a plethora of foods to choose from.

And they look at me and they'll say, I can't have this. There's nothing left to eat. There's nothing that I took away from you making you go gluten free and dairy free, that you can't get in a substitute.

Nutrition, Food Sensitivities, and Anti-Inflammatory Diet

And especially in the gluten free, they all taste very, very similar. Big cheese. I admit, the vegan cheese just doesn't bother. Yeah. I mean, honestly, to me the vegan cheese almost falls under the hyper processed food.

It's just processed food like you go by go for its processed food. It's not turkey processed food, but it's it's a processed food. And I think, I mean, I in my humble opinion, being a vegetarian is difficult because it takes a bit more effort, because you have to cook more, because you have to eat.

You have to be much more mindful about the foods that you're eating to make sure that your body is getting everything that it needs. It's not I'm not saying it can't be done, but I'm saying that it takes a bit more work, because if you fall into the convenience food aisle of vegetarian or vegan vegetarian foods, your most case is going to be no further ahead than you would be on a sad diet.

Yeah. Let's talk a little bit about vegan and mitochondria. And most people compare vegan and animal protein. So without question I'm a protein vegan protein plant protein I'm a protein as far superior in branched chain amino acids muscle protein synthesis.

However, the great equalizer is something called lucina branched chain amino acid. You take 3 to 3.5 grams of leucine. It is now equal. So if you have somebody who wants to eat vegan or something that you want to suggest to them, even though it is more difficult, like you said, and the protein is lacking, you now have the great additive, the adjuvant, if you will.

In addition, I think that we need to talk a little bit more about exercise because exercise is the panacea for mitochondria high intensity interval training, high intense training, weight training.

You and I both need to wait train because we're both over 30 years old. You may be more so than me as a female, because women have a tendency to kind of want to do cardio on Monday, and the guys want to bench press and do biceps on Monday.

We all need muscle is without question in endocrine organ. Muscle is actually quite anti-inflammatory and muscle is medicine. Now, as we like to speak about, Gabrielle Line did a great job.

She said. Muscle is an endocrine organ. I believe muscle is the currency of longevity, without question. Yeah, it's also muscle like those those workouts build mitochondria ultimately.

So want to you want to increase your mitochondrial density. Do a nice good workout. High intensity interval training is going to get the job done. I think the last thing, the one thing I want to go back to on the vegan diet is I just want people to understand, because people will be sitting there screaming at the computers, you can so get protein on a diet and you absolutely can't.

Not saying you can't. There's there's vegan bodybuilders out there who look amazing. So all we're saying is you have to be more mindful and you have to pay attention.

And to your point, Doctor Silverman, supplement with leucine. You might need to supplement with creatine. You might need to supplement with certain bees.

So just be mindful that you can't. There's going to be callings. Another one. There's going to be things you're going to need to get in other ways. Now to get back to what you were just saying about exercise, I, I would stand up and chair, but then my chair would roll away and I would, you know, it would take me a while to get back to my chair.

So yes, 100%. But lets you know to to go back to our topic at hand, and this is where I think peptides are also really interesting, because I think that one of the things that's really interesting, and particularly when we're talking about a BPC 157 is I'm sure you've seen this in your practice, is sometimes a BPC 157 can give people a little bit of encouragement even before they've executed all those changes.

Do you find that like it? It can kind of move. It will it won't get the whole job done in a disaster, you know, when your diet is not on point and lifestyle and that kind of stuff, but it can help people feel a little bit better in the beginning so that they have more energy to to do the work.

Do you have you found that in clinical practice? Yes. You know, I like to refer to BPC 157 as a Swiss Army Knife of healing because it provides a swath of health promoting properties.

Now that when you look at the gut to mitochondria axis, because mitochondria comes from the gut, BPC has a lot of positive effects on the gut because potential benefits are supporting intestinal barrier integrity and angiogenesis and tissue repair.

It's known to reduce gastrointestinal inflammation in a lot of preclinical models. It actually has been studied in a boatload of animal models of inflammatory bowel disease, gastric ulcers, and intestinal injury.

In addition, it may accelerate healing of the GI mucosa. And in my office. I've seen some great results. And in my colleagues, especially in different things like IBS, IBD, gut tendon, brain orientation.

BPC is the peptide of choice as far as I'm concerned. So really to tie it up in a nice type bow, good gut health, good mitochondria because there's a gut to mitochondria axis.

So people will say Rob what did you get that from. Mitochondria comes from bacteria in your gut and communicates with your gut. So again remember mitochondria signaling organ.

The gut is the epicenter of your health. 80% of immune cells are in your gut. It's where your macro and micronutrients are absorbed. What have you done for your guts lately?

Do you have the guts to be healthy? Well guess what, BPC is sort of a bridge from both of those concepts. Yeah. Talk to us a little bit about KP in the gut, because I think BPC kind of gets all the attention right.

It's the it's almost like the favorite child and CFPB sometimes is bringing up the rear going full. Wait what about me. Me too. Yeah well I agree with you.

CFPB doesn't get enough play. BPC gets all the play and it's warranted. BPC is great for the gut, but it's good for like I said, musculoskeletal I'm a chiropractor.

Brain injuries, concussion long Covid, things like that. Whereas a CFPB is specific to the gut because it has a potential anti-inflammatory activity. But it's known to reduce cytokine production.

Cytokines. No one knew the heck a cytokine was before Covid. Now everybody knows what a cytokine is. They're typically inflammatory. There's 17 of them and 13 out of the 17 are pro-inflammatory.

It could shown also to help improve epithelial barrier function i.e. leaky gut. And it's truly generated a lot of interest for inflammatory bowel disease and intestinal inflammation.

So you don't have to have leaky gut to have a damaged gut. You can have inflammation at the gut level in the way you are changing your gut milieu into pro-inflammatory, which is quite detrimental in a downstream health effect.

Yeah. Okay. So what are we? You know, it's been quite the last couple of few months, I would say, on social media with some very loud voices denying that, that these peptides have any benefit to human health.

And I, you know, I wonder if somebody's paying them because it seems to be a fairly it's a very hard headed, blinders on point of view when you consider the number of clinicians who've been and these are the people bringing evidence in front of the FDA right now, right?

I don't know if you've submitted case studies, but they've been inviting physicians and clinicians who've been using these in practice to send in as much data as possible, because in the absence of that clinical trial, double blind study that everybody's always looking for clinical evidence is is what we have.

And you can't like you just can't discount it. And how do you think how why what do we say to these guys to get them to kind of give their heads a shake a little bit, because they rightly do say animal research does not often, very often just doesn't translate to, to humans.

Exercise, Muscle, and Mitochondrial Health

Correct. And they're right. And what is it like 5%, 10% of animal studies? It's very small. But over and over again, like I'm not a clinician per se. I've managed some very large communities and I've just seen too much to say.

You cannot chalk this up to placebo. You can't chalk up healing of stress fractures or healing of nonunion joint fractures that just were on the verge of getting surgery.

And then 6 or 8 weeks later, after judicious use of peptides, that nonunion joint fracture all of a sudden is healed. Like, you cannot just put that up to placebo.

I agree, I think that if I can use the term functional medicine, functional nutrition, Worley, and sometimes the establishment is a little more conservative in their late.

So there should be some bridge in the timing. And it's great in human studies. However, we're seeing it in human studies. It's just not published in clinical trials.

I believe that the peptides are great. Like I said, adjunct adjuvant. So I don't use them solely. I use them in conjunction with other things, you know, pro-Soviet mediators and Magufuli fatty acids, vitamin D3, some of the more common things, methylated multivitamin, cosign, etc..

So for me, I think that sometimes we need to take science and bridge it to Monday morning application. But sometimes science in a test tube doesn't relate to human beings.

Yeah, and I agree with the mild studies. I think you do them with the mice. You start there and then you put them in humans. But the people that you're in touch with are doing them and are seeing them.

I don't think they benefit from lying because I can tell you this as a practicing doc, if people don't get better, I'm out of business. Yeah, yeah. No for sure.

And and what I'm hearing over and over again from clinicians who I've interviewed for this summit and for my podcast, is that what they found was peptides is that it's not like I mean, look, there was a time when people didn't use peptides and people still got better.

It's not like it's the only way to go. But what they're finding is that it it speeds things up that you get better, faster results with the peptides than without the peptides.

And in your case, and in your case, you're using oral versions. You're not you're not using any of the injectables. We should say that. Right? Like you're right.

The peptides in in your clinical practice that you're using are the oral versions of the BBC 157 CFPB. And then you mentioned the TB frag, which we'll get to in a moment.

But and again you're going to have a chorus of people saying oh oral peptides don't do anything for musculoskeletal injuries. And I'm like, oh, but they do.

They may not be as as fast or as effective, like as the injectable, which is a whole other set of problems, but they most definitely have an impact. And maybe, you know, you're a chiropractor.

This is that's your bread and butter is bones, tendons and ligaments. If I could break my practice up into three pillars it would be musculoskeletal. It would be got to brain axis and it would be neurodegenerative disease.

So just talking from the musculoskeletal approach to start it, as you said, speeds up because it works in conjunction with the gut. It works in conjunction with the mitochondria.

So if you think once again about mitochondria, they aren't just powerhouses. They're communicators. A lot of emerging research shows mitochondria can function extracellular, acting as signaling hubs that influence inflammation, immune response, and tissue repair.

If that's true, mitochondria health isn't just cellular, it's systemic. And it's a SignalR works in conjunction with BPC. So I'm all about the mitochondria.

I think 2.0 is mitochondria and sell health.

BPC-157, Gut Health, and Recovery

And I think we're on the precipice of making that next step that big giant steps really small step. But it sounds like a giant step because, you know, we got to get a lot of people and push to wait up.

And it's important. It's trying. Yeah, it's kind of important to BPC. The peptides and everything are a great choice. You know I never really understood the adverse to it.

So you mentioned creatine. So we'll use that as an example. I wrote my thesis in chiropractic school 27 years ago on creatine. And here we are now treating as the hot supplement.

So one, since I brought it up let me give a few factoids on it. Number one, the first five grams of creating that you consume go to your greedy muscles.

If you want to get any kind of brain or bang for the buck for the brain, you need another five grams. And if you get that, that's great. If you have a neurodegenerative disease, you need to take 11 to 20g per day.

Some people dose high. I dose up to 20. We could talk about that. Do not take creatine with a hot aqueous solution. Do not take creatine with caffeine because it breaks up the molecules.

Creatine has a positive effect on immune health. It has a great effect on energy, muscle performance, muscle recovery taken with water. Great stuff. The reason I bring up creatine was I can't believe you're writing a thesis on creatine talking about creating a terrorist tendons, a terrorist tissues.

It does this. It sucks all that stuff. I remember that all those assets, tendons how? No, that's what they said 25 years ago. I know, but why would they say such a thing?

Because the athletes were taking steroids which has a tendon tearing fat. So but they were blame it on the creatine because that was before the idea of that you could take steroids in TRT legally and appropriately and all that other stuff.

I know that's a rabbit hole. We won't jump in there. No. So we won't go there. And that creatine is BPC is kind of like the creatine of our era. Now. People were very negative to to it and look at all the positive research.

So you have an option. I always have this slide that when I lecture I look at it it's called the window of opportunity. How many people do you want to help while you're waiting that somebody else says it's okay?

Yeah, yeah, yeah for sure. Not on the question list, but talk to me about how you feel about the safety of using oral BPC. 157 I mean, obviously you feel they're safe, but again, this is another big argument.

People get very concerned about the NGO genic properties of BPC. 157 and I think to some degree, 1 or 2 of the TB four frags maybe, maybe drive angiogenesis again.

So angiogenesis being guys, the, the, the the creation of new blood vessels. And that is in many part in many ways VPCs superpower. When you're trying to heal something like a tendon or a ligament that doesn't get good blood flow.

And now it maybe might encourage improved blood flow by through angiogenesis. But of course, the minute you talk about angiogenesis, people think tumors.

They think tumors do that too. And so, you know, it becomes this kind of this snowball effect. So maybe give us your your opinion on this because I don't know that there's any research that's ever showed it.

But again, you know, well let's just say if it did create angiogenesis, that's really not a bad thing because angiogenesis actually is a process that we want.

If we had a brain injury like post-concussion. Yeah. Because you would want to be able to rewire your brain not just neurologically, but also with new blood flow or contralateral blood flow.

So I don't know if it's a bad thing, but I think you really get to a really good point about safety. And I think that's a question in supplements, because drugs come under the FDA and you feel the way you do about that.

But there's such a wide variety of quality of supplements. I think that's where the concern is. So when we look at that and, you know, we can go on a website and get an option of 400 different supplement companies where I'm only comfortable with 40.

If you're talking about those 40, I'm not concerned about the safety because they're showing me where they get the ingredients. They're showing me before and after they're showing me NPY and all those other needed things.

So again, it's kind of like I'm Jewish. It's if it's Glock, kosher, kosher, I eat it. If not, we pass on it. All right. Got it. So for so for the peptides at this stage of the game you you definitely feel that based on the evidence that we have and what you've seen to date to date and what you've seen clinically.

Right. I mean, how long have you been using oral peptides in your practice? About four years. So just to let you know, I don't own any peptide company.

I've got no affiliation code with the peptide company. I take them myself. I've given them to my wife, who I actually love and want to spend the rest of my life with, so don't think you know, no commentary there.

TB-4 Frag and the Wolverine Stack

And I share it with my friends, my family, and my patients. I wouldn't do that if I wasn't comfortable and confident in utilization of a good quality company providing me with peptides.

Yeah. Love it. All right. Let's talk about TB. The TB for frag a little bit. So TB for thymus. And beta four is a 43 amino acid peptide. So it's on the larger side of peptides.

But what's interesting about it has all these it's almost like arms right. And each arm is a it's a functional unit if you will. So what a lot what the manufacturers or scientists figured out, researchers figured out is if we cleave those

arms off of the main peptides, we're now left with a fragment that has its own activity.

And because they're so small, the understanding is that those small fragments can be used orally and won't get digested by the your peptide enzymes, if you will, your protein enzymes in the gut.

And so they can therefore be absorbed and and have benefits. So do you want to talk a little bit about the TV4 frags and where you've seen them being helpful in practice.

So for me some of the potential benefits tissue repair. So that's not just gut repair, it is tissue repair. So a lot of musculoskeletal injuries and the like wound healing.

I have a patient of mine, a friend of mine that just had a go kart accident. So we're going to put him on BPC, KTV and TB for frag, which we like to refer to as the Wolverine stack, or I like to refer to it as the Wolverine Super Stack, if you will.

Having seen Hugh Jackman, he needs a few of his other Marvel characters to rival what the BPC plus does. It has tremendous anti-inflammatory effects, and it may indirectly support intestinal healing.

Is it is effective for BPC 157 at the gut level? No. But again, it supports that and CFPB this works. Wow. As as I said, as a trifecta of healing and health.

So as we spoke about before, there are three peptides that I really utilize a lot BPC 157 TB for frag. And of course CFPB. Nice. Doesn't mean I don't use other ones, but I use these regularly religiously with many of my patients, friends, family and like and like so so we talked a bit about about inflammation situational information.

But what about chronic inflammation. You know, that low grade kind of smoldering fire, if you will, that is present in so many people these days. And then the other thing that we find is this intestinal permeability, which, you know, going back to what you said earlier about people having food sensitivities, very often it's a bit of a chicken or the egg situation, right?

I mean, I remember when I used to work with clients, I got to the point where I would I would just test their zone in levels first, and if those were elevated, I would treat I would I would address the intestinal permeability and then do my food sensitivity testing.

On the other side of that, because I, I had a couple of events where the food sensitivity report came back and it was I was like, actually, you know, you can't actually eat anything.

There's four foods you can eat. Whereas if we did that gut repair first, and this is long before peptides were a thing, I found that we we then were able to give people a little bit more latitude.

So let's talk a little bit about those two things. The chronic the low grade chronic inflammation that intestinal permeability. But let's also relate it back to people's ability to heal tissue like heal even musculoskeletal injuries.

I love it well, as an offshoot, there's a gut to join axis and there's a gut to disk axis. So whatever you do, you got you do to your desk. Whatever you do do you got you do to your joints.

And that's big in my market, my chiropractic and DeMarco people don't realize your body releases cytokines, which are obviously inflammatory. And they can damage the gut.

They damage the joints, they damage the disc. But what really damages the disc is the release of something called MMP matrix. Metallic proteases, a body's own proteolytic enzymes released at the time of injury.

And they eat fibro cartilage that fiber cartilage is IBD, meniscus and the like. 52% of disco surgeries have a bacterial translocation. Where did that come from? That came from your gut.

So, I mean, we could be here for a couple of hours to have this kind of dissertation conversations. Exciting.

Inflammation, Leaky Gut, and Clinical Testing

So when you go somewhere and you have a joint problem, if you believe in root cause or root causes, you need to look at the gut because the gut is the epicenter of your health.

I believe, as Alessio Fasano said, all disease begins in the leaky gut. It's funny that you mentioned Xinjiang, so I missed I mentioned Alessio. Now, some interesting things about the Zainudin that you talked about is zoning does vary during the day because Xinjiang opens up our gut tight junctions.

So Xinjiang is a precursor to a clued in. So if I were to lift my hand up and this is an epithet cell this is an epithelial cell. Together they make a tight junction.

I can't see you. However Zainudin opens and pulls apart. Functionally these tight junctions, including is when they're broken so that tight junction now becomes a loose junction.

The key to the test to see if Zangilan is a factor is ongoing. Antibody. There are very few tests out there so that's just inside. Now you spoke about a lot of food sensitivities in food sensitivity.

I test all my patients for a leaky gut. Chiropractic, functional neurodegenerative. You're getting a leaky gut test if you don't want it to. Leaky gut test. Have a nice day.

Find somebody else. I can help you because you are handcuffing me and I don't want to fight with my hands cuffed, no doubt about it. However, with the idea of food sensitivities, it's not just IG, it's also which is one immune pathway, which is your adaptive pathway.

It's also the innate immune system. And you can test that by testing for a molecule called C3. D I know I'm getting a little head of here. So you want a dual purpose test.

You want to see what food stimulates the most amount of inflammation, which speaks to what you talk about. Because good food is a potential for a health signal of health.

Bad food is a potential for inflammation. So we obviously need to choose wisely. As we said earlier, there's a 72 hour lag between the consumption of food and the rising of inflammation.

You'd have to test for it. So the tests that you can lose use in food sensitivities are one that tests the dual pathway. Now, in the leaky gut test, there's a boatload of things you can test for.

But I would test for most predominantly Candida or Candida pending on where you're from in North America. Daniel in occluded in LPs LPs. Yes. Little pieces of stuff.

Ha. On PC oriented. Don't worry about it. PG rated, no doubt about it. LPs for my Spanish speakers. Diablo the devil. It's an indoor toxin. It's a direct binder.

Let me tell you something. If you have an elevation of LPs, go find a functional doctor and fix the damn thing. Because if you want some neurodegenerative disease, you want some musculoskeletal disease, you want some mitochondria dysfunction.

Allow your LPs to float around. LPs holds gram negative bacteria on the inside of the intestinal wall when it's expressed LPs from the inside of the intestinal wall, this pathogenic bacteria is also floating around, causing a cascade of inflammation.

You're talking about inflammation or sub inflammation. If I had a mantra, it would be to manage and modulate inflammation because most of our patients and you can write this down, most people that are listening, myself

included, are probably pre and flamed.

And that's because of the foods that we eat here in America, the air that we breathe and the soil in which the foods are grown with. So before I get to involved in sweat some more, I'm going to turn it over to you because I know you've got a bunch of stuff you want to share with me.

I know I love that, I mean, I'm I committed to the audience at the beginning of the summit that we were going to keep these tight and packed full of information, and you've already delivered a ton of great information.

Practical Framework for Integrating Peptides

So as we close, if you could give practitioners who are listening to this. So, you know, we have a fairly varied audience that comes to these summits, I think we're going to get you've given beautiful information actually, for the consumer to chew on, as it were.

But if you could give practitioners one practical framework for integrating peptides into a functional medicine model, because obviously, if you're even open to the concept of peptides, you're probably in the functional medicine space.

What would your step by step approach look like to achieve to help them to achieve the best long term clinical results? You know, people ask what I do to get to peptides in, how do I integrate all these supplements or all these hacks?

My wife hates the word hacks. Key takeaways, if you will. And I say you can do this, this and this. The biggest thing is, I believe it or not, a prescription pad.

So you write it down on a piece of paper and make a contract with the patient. Now, as far as the consumer is concerned, I think the biggest problem with consumers is the lack of compliance, because I believe there's a lack of trust.

So find a practitioner that suits your fancy. And one of the biggest takeaways is find a practitioner that listens to you that's willing to individualize it, the willing to take the time.

And you're not a number. You're a person place thing. Things of that nature. If those things occur, the BPC and the science behind it, what I've seen in my office will take you to the next health level for the practitioners.

Remember, here are five big important things. Number one, the biological terrain will determine your peptide success. So obviously peptides function optimally.

When inflammation is controlled, nutrient status is adequate and the body's repair systems are intact. Number two, the gut is the gateway to regeneration.

I think we've talked about that. Number three mitochondria power healing and tissue repair. Remember it's a key signaling. And it's obviously you know if it functions will help you with healthy aging.

Reduce chronic inflammation that will without question enhance clinical outcomes. And by the way an integrative strategy always delivers superior results.

So don't be afraid to ask a friend for some help. And that's why I enjoy talking with you. Because we're part of a coin. We just might be the opposite sides of the coin, meeting in the middle and pulling everybody in with us to have a better, healthy day.

I love that amazing. But I can't think of a better way to close this off. Doctor Silverman, this has been awesome. Thank you. Please tell people where they can find out more about you and your practice and connect with you.

Sure. Piece of cake. Doctor Robert Silverman. Follow me on social media and Facebook. And just remember, I am always yours in health. And remember Jim Roman said, take care of your body.

It is the only place you have to live. Love that. Thank you. Thank you doctor Rob, thanks for having me. Appreciate it. My pleasure.