Why Two People Eat the Same Meal and Get Opposite Results Transcript

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Introduction to Beyond the Scale and Dr. Piper Gibson

How empowering is it to realize that you're not broken, that your body just needs personalized attention, right? I think it is the catalyst for so much change for.

So many people, because I thing in society right now, people are so disheartened. They just. Don't understand that when we start to look at it personalized, when you start connect the dots, it's not just your blood work, not your genetics, your stool pathogen test.

When we connect it all, they have this huge aha moment and they're like, oh my gosh, all I have to do is make these changes and my life will improve this much.

Welcome to Beyond the Scale, where real health gets deeper than just the numbers. I'm Dr. Darren Dubiak. And I am Alexandra Dubyak, and we are not only partners in life, but also passionate partners and integrative care.

Blending faith, family, functional wellness, And a little life with our dogs. Because true healing happens beyond the scale. Hello everyone and welcome to another episode of Beyond the Scale.

So today I'm very excited. I have a very, very interesting guest and brilliant guest nonetheless, Dr. Piper Gibson. Thank you for being here today. So Dr.

Piper-Gibson is an expert in functional genetics and personalized wellness. So she's been in the genetic world for over eight years. And today we're going to dive into the AimPrint.

The Aimprint is body by Aim360's genetic test where we test over 121 SNPs looking at metabolic function, inflammatory functionality. I love it because it's a personalized genetic tests that helps us practitioners, right?

How Genetics Led to Personalized Wellness

I mean, you've used genetic testing, Piper, with your clients for how many years? Over eight years at this point. Yeah. So, and you know, I love Pipper's insight because, when I say expert, this young lady is definitely the expert.

I have taken multiple tutorial classes with her and again, i'm honored that you said yes to our podcast today. Thank you for joining us. Excuse me, excuse me.

You're welcome. See, I'm so excited. I am interrupting. So, again, we talk about beyond the scale because life is more than just a number, right? So what led you into genetics and personalized wellness?

You know, my own family, My son was diagnosed with a chronic illness over 14 years ago, who's diagnosed a tick disorder. And when the conventional approach failed us, we were told to just ignore his symptoms, I started down the rabbit hole of research.

I went back to school to relearn everything I thought I knew about health and wellness to help my son. Genetics gave us a blueprint instead of guessing.

We could finally explain why he was struggling with so many things. And so it was a huge game changer for me. Once I had earned my PhD and started working, I became so incredibly passionate about the genetics because it changed his life.

It completely changed my lifelong anxiety. And I just saw the power of being able to use your genes as a blueprint. I love it. You know, it amazes me too, because so many people feel like they're doing the right thing and everything

is right, but they are still not getting results.

And genetics can just tell us much more than a disease process. Would you agree with that? Absolutely. So with going with genetics and by the way, everyone, I use this analogy because Piper told me I could, and I got it from her, you know, body by aim, we have built our company and our practice on getting all these biomarkers done over 65, 80 biomarks in some cases, because it gives us the practitioners, so I have an idea of who we're working with.

And you made a great point to me a long time ago is that your blood work is, that day, just then and now. But all of a sudden, this genetic thing comes up, right?

And it's a lot different animal. So tell me a little bit about, with your experience, how you tell your patients that your genetic testing is so different than just lab work, please.

Right, so one, we have to look at the fact that genetics is not following just generic advice. It's not like, oh, you know, eat low carb, low fat. it's really looking at, well, what are your genetics telling us?

Why Genetic Testing Differs from Standard Lab Work

And your body may not respond the same way as someone else's. Diets, workout supplements, they're not personalized. And it's not that it is a lack of effort on people's part.

It's really just a mismatch of what's going on. You may be like, hey, you should be following this low-carb diet, but based on your genes, it really is not optimal.

And when we're looking at blood work, just like you said, It is like bobbing for apples. And so I like to say that you have this big vat of water and apples.

And when we're testing blood, we are really looking at what's in that apple at that moment in time, or in the water at the moment and time. We're not necessarily looking what is in apple, what in cell.

So when you can take these biomarkers with the blood and match them to what the genetics are saying, you're going to get a better picture to give people a direction of what they should be doing.

No, absolutely. And again, like I always say to my patients, Piper, more data, More help, the better results, right? 100%. That's what it comes down to.

What genetic patterns do you see that affect weight loss resistance, cravings and energy and hormones? Like, what are the patterns I would ask you that you'd see?

Yeah, I mean, when we're looking at the genetic pattern, we want to look at, of course, blood sugar regulation. So why some people might crash or some might store fat easily.

Looking at things like dopamine and reward pathways, so cravings, emotional eating, detox pathways. How well you're detoxifying in general is going to be incredibly important.

Also looking at those inflammatory genes. So why would someone be more inflamed all the time? Or someone gets sick or exposed to a germ or a pathogen or toxin, and they are just more aggressive in their inflammatory response.

Or maybe they stay inflame longer. For example, something like COVID, they just stay in flame longer, We also want to look at that stress response. Are you just going to be able to keep chugging along or are you going burn out faster than most people?

So when we're looking at things like weight, craving and mood, there are patterns that we can look for. No, and especially with Body by Aim, we'll say very weight loss focused company, right?

And hormone focused companies. And we will get into a couple of the specific test guys we do, just a few of them. But one of these is the sensitivity to a GLP drug, I mean just that one test alone is worth everything on the Aimprint because it's going to let me know, hey, what is the propensity of how well someone's gonna do on this, right?

And I would have known that any other way besides doing the aimprint. I was asked the other day, this isn't your mom and pop gene test, Right? This isn' going tell me what ancestry or where I'm from.

OK, even though those things are great, it leads me to this question in your estimation. Why is the imprint so different than other online genetic test companies that some celebrities pushing or some huge bloggers pushing?

What's the difference? That's what I want my viewers to know. Right, so you're looking at genetics plus biomarkers plus interpretation. So most off-the-shelf kind of genetic testing that you are going to get, it's fun, but it is not looking you as a person.

It's not personalized and individualized. And you don't have someone looking and saying, okay, here's your blood work, and here is your genetic test. This is how we put all of this together and really move the needle for you.

Patterns Behind Weight Loss Resistance and Cravings

So really, when we're looking at that imprint, that most important thing is we are taking not just the genes, because genes are a blueprint, labs are actually what's happening right now, and interpretation is what do you do about it?

So without all three, you're really missing pieces. And so what makes that in print magical is that combination. And I love that you took my word personalized because I believe, actually let me ask you, why is personalized medicine the future?

Because obviously people are coming to you and people coming me because what they are doing clearly isn't working. The one size fits all approach not working Two people can eat the same diet and get absolutely opposite results.

I mean, if you think about even living in your same household, what I eat and what my husband eats may be identical on the day, but his body composition, the way he utilizes that food and he does with it, is going to be completely different than what it is for me.

So genetics really lets us tailor everything. to the person and it removes that trial and error. So for example, the GLP-1, you're not shooting in the dark saying, oh my gosh, why didn't this work?

You know in advance, hey, this really probably isn't going to work with you. Let's go a different direction. Mm-hmm. Testing those 121 SNPs gives us practitioners of body by aim such an insight into you, metabolic function and anxiety.

And I love the fact that, like you said, and I want to piggyback on this Piper, having the biomarkers, right? A subjective understanding, meaning you telling me what's happening with you and this other piece, this genetic component.

I mean, if that's not a triad of amazing results and information to treat someone, I don't know what it is. Agreed? I agree 100%. Who should get genetic testing?

You know, someone asked me, well, if I'm here, Dr. Dubiak, but I have four brothers and sisters, aren't all of our genes going to be the same? So please answer that loud and clear to everybody.

One is everybody, I think everybody should have genetic testing because it is an incredible roadmap from birth to, you know, i don't care if you're 80 years old i think it gives you such a good blueprint and roadmap to direct what you are doing.

But no, You are actually closest in genetics to your siblings. However, When you're looking at the genes you get from mom and dad, if you got one gene for mom, and one for dad.

So mom has two genes, dad has to genes and you've got 1 in 1. That may not match for your brothers and your sisters. And so I look at a ton of siblings because I work so heavily in pediatrics.

Why AimPrint Is More Personalized Than Other Tests

And it's really, really interesting to see the big differences and the different responses that these individuals may get based on their genetics. So yes, even though we have brother and sister, we can say, oh, hey, sister.

GLP1s are going to work for you. But based your brother's genes, they're just not going be as effective. And brother needs to do something else. Yeah, and, you know, in bringing in genetics, I think, just like you said, we don't work so much in the pediatric world, but siblings, mom and daughter are just sisters or brothers coming into my clinic.

It's amazing how they'll say, well, he was always skinny as a kid and I'm the fat guy and we grew up in this same household. And I tell them, Now we know why.

Like, this is really, really neat stuff. You know, with the Aimprint, it's just not getting data. And you know this, Piper. It's a direction on how to live the rest of your life, right?

And I have had patients who are 60 to 70 years old want this done. I've had clients who were 20. It's not too late and it really isn't too. Do you agree with that?

I agree 100% because I think, and I can tell you this, that I see this in my own mother who does have her own genetic testing. Yes, we do have some really significant differences, but it gives her direction.

She has been this binge-dieter, low-carb, 800-calorie-dieter her entire life and has just obliterated her metabolism. And when we look at the genetic piece, it's estimated that about 70% of your weight, obesity, propensity can come from genetics, but you have this other percentage that really is coming from our environment, diet, and lifestyle.

So if we can redirect that 40%, it is going to be very impactful on this 70%, over here on the genes. So you would agree that the Aimprint can explain failed diets, fatigue, and stubborn weight loss, correct?

Absolutely. And what you're going to find is when you do this test, whether you are a practitioner or whether are you a patient getting this tests done, is, when, you get your results and you start to look at them, it's eye-opening.

It's that aha moment. You're like, oh my gosh, that makes so much sense. Right. You know, I have mine. I'll answer it after you. What do you think from the genetic test responses or test results?

What surprises your clients the most and your patients the I think the fact that I can look at their results and clearly see things before I actually meet with them.

So then when we sit down to meet them and say things like, you just lay in bed at night and you have a really hard time falling asleep. And they were like how do you know that?

And I'm like it is in your genetics. Yeah. You know, so many things about like oh, your kid gets sick and they spike a fever and their sick for like three weeks.

How do know? I like because we can't look this genetic predisposition. You know, for the cost of the test guys, and we'll go over that at the end, it is such an incredible test to have done that I don't ever want to say that would supersede blood work, right?

Because you have to know your present state. But I mean, For goodness sake, let me ask it a better way for people that are nervous. right? Oh, I don't want to know if I'm going to get this or I''m not gonna know.

And I tell people, "I'm not testing for cancer genetics. I am not testin." So if someone was on the fence about getting testing, how do you explain it to your clients?

I explain it and I say to them, we do not test the oh my gosh, I'm gonna die genes, which is the colon cancer.

Who Should Get Genetic Testing and Why It Matters

That would be a great way of saying it. Yeah, like we're not looking at that. We are looking your genes to give you a roadmap to get you optimal health.

You don't just get in your car and be like, oh, just gonna drive to Austin, Texas, without getting out some kind of Google Maps or old Rand McNally, however it is that you travel.

But you are going to have clear direction, and that is what a genetic test gives you. Clear direction. And then, so good example is my son's genetic tests is like 10 years old at this point, but we still pull it out.

He just became a firefighter. Okay, son, you're around all of these toxic chemicals. What do we need to know about your detox genes? So no matter how much direction we have, then you're saying that those genes will never change.

Is that correct? Those genes are going to be pretty static. I mean, there is some research that yes, some environmental factors may change your genetics.

Most of what we're looking at have been genetic changes that happened hundreds, thousands of years ago. Now, we should have started with this, but for just simple knowledge, 30 seconds, how many genes do we have in the body?

Oh, a gazillion. When you are looking at the human genome project, and yes, I know, gazillions is a made-up word. But when we're looking at genetics, what's great about the AimPrint is that we have so many genes in the human genome project that have no research on them.

There is no data. And maybe someday down the line, there will be. But right now, the majority of them don't have any researcher data, so when were looking something like Aimprint, you are using research-backed genetics when you obtain that data so you're able to say, we have this gene, this has a SNP, here's what the research says about it.

So it's not just like, oh, you have the gene. It's like we actually know what impact of a change in that gene is going to look like. So let me stop you.

So you said a gene and then a SNP, right? Which is that single nucleotide. Explain to people again what a snip is. Because I already said we test 121 of them on the imprint.

But what's that SNIP again? It's just a slight change in your computer code. If you have a book and your book says dog, you know what to do with that.

Your body, your genetics knows what do to with dog. So you're going along, okay, oh dog, my body knows what to do with dog. But when we have a snip, there's this little small change and maybe dog gets changed to fog.

And so your body's like, Oh, I know the OG part, but I don't know. The F part. So it's just not going to function as well. You having this. Little small.

Change in your computer code. It's. Just like change, tweaking a letter and you know, from dog to Fog. To Mog. I love it. You know, how empowering is it to realize that you're not broken, that your body just needs personalized attention, right?

I think it is the catalyst for so much change for. So many people, because I thing in society right now, people are so disheartened. They just. Don't understand that when we start to look at it personalized, when you start connect the dots, it's not just your blood work, not your genetics, your stool pathogen test.

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Right. You know, and I agree. And I think more and more, Piper, that as much as and how many people we work with, both you and, I, people want answers.

I mean, they have questions and these things, right? It's an immediate, give me an answer, problem, the computer we're on right now. So I there's so much more ways of getting data that we are educating ourselves.

Right? And I see that like from my people from personalized medicine.

Understanding SNPs, MTHFR, and the Power of a Blueprint

So here, I'll give you an example today. I had a very good friend of mine knows exactly what I do. And he literally reached out today said, Hey man, my wife got diagnosed with a kidney issue and she's been reading about a peptide should she take, which one should you take?

And I'm like, whoa, let's back up. So if you know everything I told you, bud, it's just not one thing to treat one because because we're more or less doing the same thing with mainstream medicine has been doing.

You know, hey, I have a problem. Take this pill. It's what's the whole picture looking like? Hey, what is she eating? Does she what her genetics look like.

What's her current blood markers look? Like what your kidney function like Right? I mean, we say this Piper so much, but I just want to keep saying it on my soapbox lit and screaming off to the mountains.

It's having the whole picture of somebody. You can make every analogy in the book, for crying out loud, you never just take your car and just to have your tire changed.

They're going to look at other things. And it's the same way how people should be looked at. Absolutely. I mean, I could not agree more. And I think that that's why you and I just get along so well is because we really both look at it from that perspective of the bigger picture.

You know, are you not sleeping at night? Are you up all night on your phone? Like what is your sleep wake cycle look like? What does your environment look, like are cleaning your house with bleach every day?

Do you detox? So yes, when we can look all of these multiple factors with all the biomarkers, it makes it a very magical experience. I agree. We talked about, and I agreed with you, personalized medicine is definitely the future of medicine.

Where do you see genetics in this over the next five years as well? Right. One, we're going to continue this not one size fits all approach. You're looking at all of this genome mapping at this point.

There's some really incredible companies coming out that are Basically taking the human genome, taking genes that we know, running a test and then saying, hey, now that you have your genes, we can then take this research from 20 years down the road and send you an email, send a letter in the mail.

Hey, you had this new research on this gene. There's so many ways to look at it. I mean, there's a lot of experimental things right now like CRISPR where they're going to do more gene editing.

Oh, can we change the way your body utilizes cholesterol and lower your cholesterol? Or can get rid of

chromosomal genetic issues like Down syndrome? So there is a lot of exciting stuff in genetics.

And I think that right now the providers like you and I are really sitting on the cutting edge piece where it's going to really explode down the line.

Because now that we have AI, everything's gonna start happening so much faster. I agree, you know, and I hate this because it's so cliche, but I fully believe this is the tip of the iceberg in genetic testing.

I mean, I've seen just implementing this just nine months ago, what it has done for my patients, how far Piper, some of these tests have come. And like you just said, learning different snips on breaking out, hey, can we stop this disease process happening?

It's pretty damn cool. It is very cool! and also the treatment modalities that we can give people after we have some of these things. You know, we talk about nutraceuticals.

Us in a body biome, as you know we do custom IV therapy. And one of the ways why I always use the word custom iv is because it is custom. you're just not getting an iv bag that's filled with B vitamins and vitamin C.

Like how the hell do you even know if you need all that stuff, right? With the genetic testing and having the biomarkers, Our practitioners, our nurses, they know what IV to make for you and they're made in-house.

They're make fresh. It's something I'm so proud of and to now implement AimPrint testing. I mean, to me, it's cool, right? And that's why, you know, I always get so giddy when I talk about the Aimprint.

First off, love the name, Right? I think it is a pretty fascinating tool, but I'm telling you, in a world where people want information and people are just going online and buying test after test, after tests.

I think Piper, from how you treat your clients and patients and us, we really want to make sure that they're getting the proper genetic testing done, right?

I mean, I know there's some celebrities pushing, you have this one MTHFR, it's, like the sexy gene, no one knows what the hell this Mthfr is, but they've heard of it, And you have some of these guys just pushing like one thing.

Personalized Medicine, Future Genetics, and Final Takeaways

I don't get it. So MTHFR is the last gene in a chain of genetics. And it is not the internet would lead you to believe that Mthfr is like the be-all. It's the curse.

It is the worst and I'm like, hold on. When it's one gene, we have some pretty good solutions for it. We know it is going to impact things like detox and neurotransmitters.

But really, like we need to look at other significant genes first because if you start putting in folate to somebody who's really, really inflamed just because they have an MTHFR variant, they're going to feel worse and they are going be like, it wasn't personalized.

We looked at one gene, we didn't look at multiple genes, We did not create a map for you. And that is why you now feel like poo. And I love that you said it, because people will come and say, well, Dr.

Dubik, I have MTHFR. I Have it. And that's like, okay. That's, like oh my gosh. Again, talking about this one test, this gene, but it's not the end of the world.

It's again, looking at every single person as a whole. If someone's feeling frustrated or confused about their health, What would you say to do? Get the gene test, right?

Why wouldn't you? Yeah, I would say absolutely get the Gene test because if you've done every diet on the planet

and you know, you have MTHFR and like 80% of the population has it and You've tried all the things and done all things.

You are missing pieces of your puzzle. And being able to do that testing is going to give you answers. And one of the things that I really love about what you do with AimPrint is just like we were talking about the IVs, there is an IV therapy place on every corner, every city, everywhere.

But it's not personalized. It's random. You don't know if you're actually getting what need to be getting. So when someone does this Aimprint with you and they come to your office, they are getting exactly what they need based on their own individual roadmap.

I love it. I'm so happy that you've helped me learn these processes along the way. Guys, again, I cannot edify this young lady enough. She's absolutely brilliant in the world of nutrigenomics and genes.

she has been a great support mechanism and a support system for us as we go through all of our testing with all our clients throughout the country. Dr.

Gibson, is there any parting words you have today to go over the listeners of Beyond the Scale? Yeah, your DNA is not your destiny. Your DNA, is your blueprint that we can then use to build you a roadmap that will last you the rest of your life.

I love it. Well, listen, I cannot thank you enough for taking the time out of your day today and doing this podcast for all the listeners beyond the scale.

Again, stay tuned, guys, for more episodes on the Aimprint. Dr. Gibson and I are going to go over a couple other things in future episodes that I think that will really, really make some things more interesting for your health.

So again, Dr Gibson, thank so much. You are welcome. Thank you so for having me. It was fun. Thanks for spending time with us on Beyond the Scale. If today's episode helped you see your health differently, like the show, share it and we'll see you next time on beyond the scale.