

Using Peptides to Help Master Love, Sex & Intimacy

Dr. Kent Holtorf interviewing
Dr. Nick Delgado,
PHD, ABAHP, CHT



Kent Holtorf ([00:00:02](#)):

Hi, it's Dr. Kent Holtorf with another episode of the peptide summit. Today we'll be interviewing Dr. Nick Delgado, which I promise should be one of the funnest interviews as well as educational. The title today is Sex, Sex, and More Sex, Feel Young Forever. So we should have some fun and, again, but still getting down to some serious science. Dr. Nick is going to tell us how to live long, have great sex forever, and actually have just great quality of life. So a little bit about Nick. He's an expert in anti-aging peptides, lifestyle medicine, and the immune system for over 43 years, which is amazing. He looks amazing. He's trained doctors in blood hematology, which he taught me, which is pretty amazing. Lipid metabolism, peak performance. I want to hold this against him, but he is a USC graduate in Loma Linda University, major contributing author to the encyclopedia of clinical anti-aging medicine and regenerative biomedical technologies, is a medical correspondent to 26,000 physicians and scientists for the American Academy of Anti-aging Medicine, which is A4M. He's a personal health coach for Tony Robbins of Mastery University, wow, for several years. He is a strength endurance world record holder, pretty amazing. Now in his late 60s—really?—guiding Aleve and with elite athletes and the UFC, NFL, golfers, as well as corporate wellness at TRW Aerospace, increased productivity and quality of life. I'd like to talk to him a little about that, like kind of the basically similarities between a CEO and a professional athlete. It is getting so scientific now because the difference between making it, we're having morning track power versus, you know? Make the big leagues is minute. The Delgado Protocol for Health has been awarded several honors certificate of congressional recognition as best health product, and that's been around. I know a lot of people have benefited from that. Ed Royce member of Congress, 40th district. Newest brand built for the immune system and achieve hormonal balance is at docnutrients.com. He's got a number of books out and I'm a little disturbed that one was basically asked to be changed by Amazon because it mentioned COVID, which is scary. But it's on Amazon called Blood Doesn't Lie. He had changed the title because he tells the truth, so it's a little scary. Author of Simply Healthy, plant-based cookbook. Then, my favorite, Mastering Love, Sex and Intimacy. I understood the sex part, the love and intimacy part, I don't know, it just kind of threw me there.

Nick Delgado ([00:03:48](#)):

[Laughing]

Kent Holtorf ([00:03:48](#)):

But—and then Acne Be Gone for Good. He's just kind of a master in just many different areas. Last was Sanjay Bansal

Nick Delgado ([00:05:06](#)):

I think it begins with communication, you know? One of the things that—

Kent Holtorf ([00:05:09](#)):

Ah, you lost me already.

Nick Delgado ([00:05:11](#)):

[Laughing] Well, men don't often talk to each other about the subject of sex, and if they do, it's just kind of a cursory discussion. Women tend to get into a lot of detail. Oftentimes this is a fact that we know, and I cited it in my book Mastering Love, Sex, and Intimacy, and that is that 95% of men feel that they are good lovers. In fact, great lovers.

Kent Holtorf ([00:05:34](#)):

I know I'm not though.

Nick Delgado ([00:05:35](#)):

Well, 85% of women say that they haven't ever achieved an orgasm with their significant other, their partner. So I find it hard to believe that they're great lovers if they don't know how to please their woman. So more than 36 years ago, I started this project to write this book literally. I wrote several other books before I released this book on Valentine's day, and partly because I felt like I questioned my own theories. I said, "This can't be, can people literally be having that much challenges in the bedroom?" After going through all the literature and the science and presenting several talks, I was convinced that this topic needed to be addressed, and in great detail.

Kent Holtorf ([00:06:20](#)):

Let me ask, my sense is that the guys who say they're so great are probably not, and the same thing with kind of—people pretend they have the best marriage ever, they never fight, they never—you know? Are just basically more concerned about perception than true happiness and great communication and marriage and all that.

Nick Delgado ([00:06:45](#)):

Well, there was a scientific American video that came out on YouTube this last year. It was interesting because they went through the science and the literature about Freud and how he believed that on his death bed that he had made a serious mistake. He said he does not understand women.

Kent Holtorf ([00:07:05](#)):

[Laughing]

Nick Delgado ([00:07:05](#)):

He basically had purported a lot of information, Freudian type concepts, and the biggest problem was when Kinsey report came out, Alfred Kinsey, the famous sex researcher at Indiana University, he actually went through the literature and they commissioned 4 gynecologists to examine 900 women with a probe to probe the sensitive areas of the female. They found there was—

Kent Holtorf ([00:07:34](#)):

weekend.

Nick Delgado ([00:07:37](#)):

[Laughing] Right, it was a fun weekend. They found that there was zero of pleasure nerves in the vagina. So every man who's been led to believe that all the comments about being able to maintain that erection, lasts for more than the average 4 minutes—which by the way, men enter a woman in 4 minutes is the net average that they sustained.

Kent Holtorf ([00:07:59](#)):

Really!?

Nick Delgado ([00:07:59](#)):

Yes. But here's the surprising shock, and that is that no matter how long you last, it's very unlikely that you're going to please that woman, because anatomically the male organ will not bend to reach up to the G spot, which is the end of the clitoris. Of course the clitoris is at the top of the entrance to the vagina and it's really not—

Kent Holtorf ([00:08:24](#)):

Where's that thing? I think it's mythical.

Nick Delgado ([00:08:26](#)):

Well, it's the little man in the boat. It's at the top.

Kent Holtorf ([00:08:30](#)):

[Laughing] I don't know if I can—I can never find it.

Nick Delgado ([00:08:33](#)):

Right. Then some women will complain that they have overly sensitive clitoris during times of the month. So many men do not know how to touch the clitoris or approach the erogenous zones. There's 12 erogenous zones in women, and there's 3 different types of climaxes a woman can achieve. A clitoral orgasm, a G-spot orgasm, and also a cervical orgasm. Very few people talk about cervical orgasm. It's difficult to reach, but I can describe it if you prompt me to talk about it. But, you know, when we talk about—

Kent Holtorf ([00:09:10](#)):

Alright, can you tell us what it is?

Nick Delgado ([00:09:13](#)):

Actually, it's deep enough in that—I read a book that was printed out of Germany and it was titled fisting. I'm like, "What's this about it?" It's in a sex shop, right? Essentially you put enough lubrication on the hand to have the woman relax her muscles enough and trust you enough, and remember a whole baby's head could come—

Kent Holtorf ([00:09:37](#)):

Trust is huge, right?

Nick Delgado ([00:09:37](#)):

What's that?

Kent Holtorf ([00:09:37](#)):

Trust is a big part of the whole thing.

Nick Delgado ([00:09:39](#)):

Huge. Absolutely huge. Communication, trust, and being able to sincerely direct a man where the woman's erogenous zones are. It's been shown statistically that young women are better at guiding a man's head if he's doing oral sex to the areas that she gets the most pleasure, they're more likely to be outspoken. As women get a little older, they've either been rebuffed so many times by men saying that, "You don't know what you want." How can a woman tell—[Laughing]—how can a guy be insensitive enough to not hear that you're not touching or feeling, getting her to the pleasure point.

Kent Holtorf ([00:10:19](#)):

Don't a lot of women expect a guy to know?

Nick Delgado ([00:10:23](#)):

Yes.

Kent Holtorf ([00:10:24](#)):

So they don't say anything and—

Nick Delgado ([00:10:25](#)):

True.

Kent Holtorf ([00:10:26](#)):

We don't know.

Nick Delgado ([00:10:28](#)):

Yeah, if you don't know, good luck. And 80% of guys don't know.

Kent Holtorf ([00:10:34](#)):

But they think they know.

Nick Delgado ([00:10:35](#)):

They think they know.

Kent Holtorf ([00:10:37](#)):

Yeah.

Nick Delgado ([00:10:37](#)):

And here in lies the problem.

Kent Holtorf ([00:10:39](#)):

Yeah. So just back to the cervical—I thought it was more painful if you hit the cervix and that, but you're saying it doesn't have to be, I guess?

Nick Delgado ([00:10:51](#)):

Correct. So obviously a woman should be lubricated enough. She should be excited enough. Hopefully she's already achieved a clitoral orgasm through oral sex or a vibrator, which by the way, I'm a big advocate. Although John Gray, my good friend who endorsed my book, Mastering Love, Sex, and Intimacy is not an advocate of using a vibrator in the bedroom.

Kent Holtorf ([00:11:12](#)):

Oh, really?

Nick Delgado ([00:11:12](#)):

I think it's appropriate and necessary, particularly for a doctor who comes home late at night, he's been working hard, under a lot of stress, and maybe doesn't have the energy to go down on his lady.

Kent Holtorf ([00:11:23](#)):

I'm lazy man!

Nick Delgado ([00:11:23](#)):

Exactly, so it may be that he has her get on all fours, hold the vibrator underneath on her clitoris, where she likes it, and he enters her from behind. So he's getting his pleasure and she's getting her pleasure and simultaneously they can reach orgasm. So if you're following me—

Kent Holtorf ([00:11:41](#)):

Don't you find this though with men? A lot of men are like—basically I don't think they're comfortable enough and like, "I should be good enough. I'm not going to use a vibrator, shouldn't have to use a vibrator. I'm good enough." I don't think that's true. I think it's like—it enhances a couple. It's not like, "Oh, I don't want you. I got a vibrator." Which may happen sometimes—but it's good for couples, right?

Nick Delgado ([00:12:10](#)):

It's great. And men are very insecure and they are for good reason because women have—essentially they are insatiable based on humanity and genetics and the origin of man and woman. They needed to be insatiable to the point where in primitive times, actually we see this in gorillas and monkeys and so forth. Several males will line up when a female monkey is in heat and 10 of them will make love to her and the one that ejaculates the most is the alpha male and will usually impregnate her, but usually they are insatiable. Women are insatiable.

Kent Holtorf ([00:12:44](#)):

Multiple—and some can have babies from multiple fathers.

Nick Delgado ([00:12:48](#)):

Yeah.

Kent Holtorf ([00:12:49](#)):

But I've also heard is that the female body, or ovary, will accept certain sperm, but certain sperm also have all these like defense mechanisms, they'll kill the other one. So it's like a battle in there.

Nick Delgado ([00:13:07](#)):

Exactly, exactly. So, I think that men became intimidated because women do have a profound sexual power, and generally, obviously they have the right to decide who enters them or not. So what's quite disarming—

Kent Holtorf ([00:13:23](#)):

Nick Delgado ([00:13:25](#)):

Yeah, and what's—and they have a checklist. It takes 20 minutes at least for a woman to be aroused and brought around through auditory, through compliments, through innuendo, through fantasy, and women love fantasy books. They love romantic novels, right? There's a reason, because a lot's going on in their mind.

Kent Holtorf ([00:13:45](#)):

So why don't—in general, women basically take those fantasy books—I guess it's like 9 1/2 Weeks—not 9 1/2 Weeks—50 shades of gray.

Nick Delgado ([00:13:58](#)):

Right.

Kent Holtorf ([00:13:58](#)):

Which, Oh my God, it became so huge, right?

Nick Delgado ([00:14:02](#)):

Exactly.

Kent Holtorf ([00:14:02](#)):

It's like, Oh my God, they're living out the fantasy.

Nick Delgado ([00:14:06](#)):

Yup.

Kent Holtorf ([00:14:06](#)):

But I mean, they love this stuff, but I think they're scared to mention it.

Nick Delgado ([00:14:11](#)):

Yeah.

Kent Holtorf ([00:14:13](#)):

Like they're always—"I'm gonna look bad. I'm gonna look like a slut." Or whatever it may be, you know?

Nick Delgado ([00:14:19](#)):

Yeah. Again, it really gets down to being able to communicate. The way we are now, because a woman, when she hears the truth, her subconscious mind opens up and she is more likely to be receptive and open to allowing the stimulation. Because I say that there is a bell curve when it comes to orgasm for women, 20% of them will orgasm within the first 20 minutes, 50% by 30 minutes, and almost 90% by one hour.

Kent Holtorf ([00:14:53](#)):

You just said the average is 4 minutes.

Nick Delgado ([00:14:57](#)):

Well, yes. But see, it should not all be in intercourse. Intercourse is not the main course. There was a great book written and I applaud it. It was titled She Comes First and it was basically the premise that through oral sex or a vibrator or watching the woman masturbate herself to see how she likes it. But all of those techniques should be utilized leading up to the man entering her at the end of the hour because the woman should have 1, 2, 3, or 4 orgasms, and then at that point she'll be receptive to you.

Kent Holtorf ([00:15:36](#)):

Intercourse is the dessert.

Nick Delgado ([00:15:38](#)):

Yes, yes. For the man ultimately, and the woman feels cozy and loved—

Kent Holtorf ([00:15:44](#)):

Can you watch ESPN during this?

Nick Delgado ([00:15:47](#)):

Some of them do, but I think that would be a problem because we do need to be more present. I've seen some couples—or I should say I've known of couples who are on their phone while they're having sex.

Kent Holtorf ([00:15:58](#)):

But no, because this is serious.

Nick Delgado ([00:16:00](#)):

Yes.

Kent Holtorf ([00:16:00](#)):

Because I think so many marriages are sexless.

Nick Delgado ([00:16:07](#)):

Yes.

Kent Holtorf ([00:16:07](#)):

Right? I think way more like—they're married for so many years and they don't say it, but they don't have sex. They—something's missing and it's this huge communication gap where, what you're just saying, how many couples does the woman basically say, "Okay, do this", or have just an hour of foreplay and then have intercourse? My sense is that guy goes, "Oh, we went out, we're drinking, let's have intercourse. Okay. Good night."

Nick Delgado ([00:16:46](#)):

Exactly.

Kent Holtorf ([00:16:46](#)):

Yeah.

Nick Delgado ([00:16:47](#)):

Exactly. Then he rolls over because when oxytocin releases during orgasm, it's an estrogen-like molecule and the man has this tendency to want to fall asleep. Where a woman, when she has orgasm, she wants to talk because she's used to estrogen and it gets her very talkative and excited.

Kent Holtorf ([00:17:02](#)):

That's when you put the elbow out.

Nick Delgado ([00:17:05](#)):

Exactly. [Laughing]

Kent Holtorf ([00:17:06](#)):

[Laughing] I'm joking all the time but it is serious stuff.

Nick Delgado ([00:17:10](#)):

No it's okay, jokes are fun.

Kent Holtorf ([00:17:11](#)):

Yeah. This is serious stuff because I think you can save some marriages and make some much more satisfying marriages. Because it's a big part, you know?

Nick Delgado ([00:17:22](#)):

Yeah.

Kent Holtorf ([00:17:23](#)):

And it's both sides. I think the guy is closed-minded, like "I'm good enough. I'm the man." And the woman doesn't want to say anything, what she really wants because it's gonna hurt his ego. Like, "Hey, let me warm up first." But it'd be great if the guy warms her up, right?

Nick Delgado ([00:17:42](#)):

Yes. You'd be surprised that when a woman has given license to enjoy fantasy, it doesn't have to have—and by the way, the standard fantasy for men is always, "Oh, honey, I want to bring another woman in." Well, wait a minute. Are you so intimidated that the thought might cross your mind that maybe she might want another hot man? And would that fantasy excite her more so? In my polling of women, I find that to be the case. So—

Kent Holtorf ([00:18:14](#)):

I think you're right.

Nick Delgado ([00:18:15](#)):

At the same time, it's intimidating for men because men feel insecure. They go, "Oh, well, what if he's a better lover than me?" Well, maybe you can learn from the other guy. [Laughing] I mean—and by the way, it's fantasy. You know, I'm not advocating that people run out and learn how to become a swinger and all these things, because there are a percentage of people who are comfortable with that, but you can fantasize and actually bring that romantic novel into her mind by using certain chosen words as you test them out. It's like bantering back and forth with innuendo. You find out you don't want to use the word, "She's a B", because it may be a turnoff. It's a hurtful word to a woman, but you might say, "Hey, you're so beautiful. You have sexy lips, your beautiful eyes." And give true compliments. Don't make fake compliments. There's always something, a reason, you're with this woman. So search out and she'll know that you're sincere and she'll detect it from your voice, your tonality. So always include the love languages and include visual, auditory, kinesthetic, and acts of service. Women appreciate this, and men do too! So it's a 2 way street and where your woman might be telling you and she's saying, "Please talk to me." When she's using predicates, like, "I want to hear what you have to say about this." She's a very auditory woman and you need to address that during your lovemaking. If she's saying, "I want a gift, I want to go out on the town, please dress up." Then she's probably visual. She's very into the look. So you shouldn't show up all grubby and from the yard with dirt on your hands or

mechanic, you need to clean up and present yourself as such so she feels attracted like that first date. That first date you probably did everything and then you forgot about it as you went along.

Kent Holtorf ([00:19:59](#)):

That's interesting. I think too, one problem though is—so often a fantasy into reality doesn't turn out well, because it's never—

Nick Delgado ([00:20:08](#)):

Oftentimes it doesn't.

Kent Holtorf ([00:20:09](#)):

Like, it's fantasy. So it sounds like you're saying—

Nick Delgado ([00:20:12](#)):

Mainly because the men are intimidated.

Nick Delgado ([00:20:14](#)):

—is to make the fantasy basically with you two, with the couple.

Nick Delgado ([00:20:21](#)):

Yeah. I think it's important to bring forth the word unconditional love and to understand that there are 6 human needs as well. There's the need for security, consistency—you've got a roof over your house, you've got food, but also in lovemaking, that security becomes boredom. So the second need besides certainty is uncertainty, variety, change up, not just change positions of how you're making love because changing positions is only good for the guy. The woman is literally feeling nothing unless in some rare percentages, a woman, almost like a gymnast, can put her legs up over her head and angled. I've observed in the literature, you could hit that G-spot at the right angle, it is possible, but it's a very small percentage, like less than 5%, let's put it at that. So some women will argue, "Yes, I can get a vaginal orgasm." Well, you're really penetrating in a position that's hitting the G-spot.

Kent Holtorf ([00:21:21](#)):

So what do you do about that?

Nick Delgado ([00:21:24](#)):

To achieve that? It's very unlikely. So just assume you're not gonna hit that. So what you do is you lay her back with her legs back and when you push your finger in, you push your finger up to your knuckles as far as you can reach, and you rub on top of a soft area and you rub kind of a—she'll almost feel like she's gotta pee. Say, "Okay, honey, go up and go use the restroom." She'll find she doesn't need to use the restroom and if she relaxes enough that continual rubbing of that, what we call the G spot, which is the end of the clitoris actually denotes into a nice fulfilling orgasm that lasts longer than a clitoral orgasm.

Kent Holtorf ([00:22:04](#)):

Interesting. I mentioned that it seems like where fantasy to reality doesn't work, you mentioned it's because of insecurities, right?

Nick Delgado ([00:22:15](#)):

Yes.

Kent Holtorf ([00:22:15](#)):

You're saying more of the guy insecurity than it is—

Nick Delgado ([00:22:20](#)):

Definitely. Some women get jealous, but generally speaking—you know, they'll get jealous if a hot woman comes in as your fantasy. You have a threesome or whatever and you're talking to her about a hot girl coming in and she's thinking, "Dude, I'm turned off by what you're saying." [Laughing] You know? Change the dialogue.

Kent Holtorf ([00:22:36](#)):

Yeah. You're just paying attention to that one—yeah, the other person. But if another guy is in the room—

Nick Delgado ([00:22:42](#)):

Or in your mind is in the room.

Kent Holtorf ([00:22:46](#)):

It's—yeah. I don't know, I'm trying to think of what that—is it really because I'm intimidated or I don't—man, I don't know. If something like—let's just say, she's like, "Oh my God, that's what I want." "Okay, I'll think about it." You know? But I don't know. [Laughing]

Nick Delgado ([00:23:07](#)):

[Laughing]

Kent Holtorf ([00:23:07](#)):

Yeah, exactly.

Nick Delgado ([00:23:08](#)):

I already got you thinking, that's good!

Kent Holtorf ([00:23:10](#)):

Yeah. Wait, what type of guy is this? Is he good looking? [Laughing]

Nick Delgado ([00:23:15](#)):

[Laughing]

Kent Holtorf ([00:23:15](#)):

Yeah. That's really interesting because I think it's a huge problem that no one talks about.

Nick Delgado ([00:23:21](#)):

No one does. I would go further. This is where peptides and Trimix and we use Amore. I mean, some guys use Viagra Levitra. This is where human growth hormone and PT-141, you get to be an artist to know how to time. You want to time it so that she's reached this full pleasure.

Kent Holtorf ([00:23:44](#)):

Just to let the listeners know, we'll go back and explain all these things.

Nick Delgado ([00:23:47](#)):

Yeah. So, you want to get it to where you've figured out how to bring her at the most aroused state where she—and here's a common mistake by the way, guys will enter a woman with intercourse and she's—or no, let me start over. They'll start doing oral sex, she's getting literally, truly excited, but she hasn't peaked and gone up and over, but there's only one way to know if a woman's orgasmed or not and no one ever talks about this in the literature either. And if you want, and prompt me, I'll tell you the only way you can determine this. But the reality is that she'll just about reach climax and then they'll stop doing the stimulation that's about to help her reach

climax, i.e. oral sex or vibrator, and they'll enter her thinking, "Oh, now she's really ready. Now she's gonna come." Well, you just shut off all of her stimulation. Now she went from a 90, approaching 100 for orgasm, and she went to 0 and you've entered her. Now all her pleasure is done and you just got done excited and everything because she was excited. Now it's all over! Thank you, wham, bam, thank you Ma'am. It's done.

Kent Holtorf ([00:24:51](#)):

Yeah.

Nick Delgado ([00:24:52](#)):

It's a big turn off for women and a woman would rather buy chocolate or go shopping than have sex with their significant other because they know that's what the outcome's always going to be.

Kent Holtorf ([00:25:02](#)):

It's like—yeah, how do I get out of that? But it goes back to though communication, saying, "Look, this ain't working for me. This is what I want."

Nick Delgado ([00:25:13](#)):

Exactly. And I gotta thank my first wife. She—5 years after I was with her, and I thought I was a stud and I'll be very personal, I was making love to her 3 to 6 times a day. I'd get hard, I'd last as long as you can imagine. I read the book—

Kent Holtorf ([00:25:26](#)):

Wait, did you work?

Nick Delgado ([00:25:26](#)):

Well, listen. Yeah, but The Joy of Sex, I read that book and it was talking about different angles and positions and staying hard and that was the way to do it. They totally ignored Alfred Kinsey's original work that I referred to in the beginning that women have no nerve endings in their vagina. Really my wife at that time just said, "God, I'm just worn out."

Kent Holtorf ([00:25:49](#)):

Are you kidding me? Yeah.

Nick Delgado ([00:25:50](#)):

Yeah. She said, "I'm worn out. I mean, literally, I'm worn. I can't maintain lubrication this whole time and it starts to hurt after a while." She finally told me after 5 years, "You're a lousy lover." And I'm like, "Oh!—"

Kent Holtorf ([00:26:03](#)):

[Laughing]

Nick Delgado ([00:26:03](#)):

You know? Right, and it hit hard because I thought I was doing everything possible to be a great lover.

Kent Holtorf ([00:26:09](#)):

Yeah. Like someone said, "Oh yeah, that's so bad." But could you have said it earlier maybe? You know?

Nick Delgado ([00:26:14](#)):

Exactly. I felt bad. I felt humiliated. I felt embarrassed. I felt betrayed, but you know what? It was my own insecurity, my own issue. And I now take responsibility. I read books then, I—like I'm a good medical researcher, as you know. So I delve deep, I read books by females pleasing other women. I read every book you could imagine. I have a bookshelf behind me, it's like extensive on all topics you can imagine. I read probably a book every other day and I also listen to podcast books on a Kindle. But the point is, when I wrote—

Kent Holtorf ([00:26:49](#)):

It's amazing you have time for that, I gotta ask you how you do it. But, yeah.

Nick Delgado ([00:26:51](#)):

I'm pretty good with time management. I mean, I have a phenomenal energy level so I follow by the rule get to bed as early as possible, sundown, and sunrise wake up refreshed. But when you're on a date, it's usually—you know, when you're in normal dating world, you go on a date towards 7:30 or 8 o'clock at night. So that's the other thing you need to understand peptides and hormones and supplements to really time that as well, because otherwise guys wake up in the morning with an erection. That's when they—from a primitive standpoint were designed to have sex and make love, but it's harder to get that erection hard at night because your hormones are at their lowest at night. So you've gotta—

Kent Holtorf ([00:27:31](#)):

Is it true that—I've been told that women know if they're gonna sleep with a guy within like 5 minutes or something like that?

Nick Delgado ([00:27:40](#)):

I would say that's probably true. You know, if you've ever been to speed dating I think it's 5 or 8 minutes you sit down and within literally 5 to 8 minutes you know whether you want to make love to that person or not. They actually did a study and they separated the people by a glass separator, so they couldn't smell the other person's pheromones.

Kent Holtorf ([00:27:59](#)):

Smells are so powerful.

Nick Delgado ([00:28:00](#)):

Right, but they separate with a glass window and they had them walk in and look at the other person. They said after you see them, write down whatever comes to your mind, and shockingly and surprisingly, some wrote down love at first sight. What they found out—they drew blood and they found out there was this huge rise in PEA, Phenethylamine, which is a hormone that's released by the brain when you see someone you're highly attracted to from a genetic perspective. So when you—so what it didn't say in the study was whether the man and the woman both had love at first sight at the same time when they saw that person.

Kent Holtorf ([00:28:36](#)):

Now with that said, have you found giving PEA makes a difference?

Nick Delgado ([00:28:44](#)):

It's interesting from a perspective of—as a, if you will, a pheromone. You know, it's interesting, in the corporate world they know that if you give a pheromone to a woman to attract another man, it's really the women that give them compliments about their perfumes. So they actually use a trick on women, they use the pheromone that's pertinent to attracting other women.

Kent Holtorf ([00:29:09](#)):

Yeah, women buy great purses for other women.

Nick Delgado ([00:29:12](#)):

Yes, yes.

Kent Holtorf ([00:29:12](#)):

Because men don't know!

Nick Delgado ([00:29:14](#)):

Right. So I found out that basically DHEA is the precursor to most pheromones. As guys get older, and women, our ability to produce pheromones that attract, like in other animals, from miles away. And there truly is an attraction. I mean, I created a cream that is called Testagenin and when you rub it under the scrotum in the perineum area, or just around the neck area where there's a lot of blood vessels, which, as you know, that's the better absorption area. You don't want to rub cream on a fat area. Yeah. So what I found was I literally was corresponding with some female friends of mine who happened to be doctors. I remember one incident where a female doctor was walking around the room, and then she came and sat right next to me. I knew her for years, and she goes, "What are you doing? What are you wearing?" And I go, "Oh—what do you mean?" She goes, "I don't know what it is, but you're the only person I'm attracted to in this whole room and you're doing something aren't you?" And I looked at her, I said, "Yeah, kind of." I said, "I'm using a very potent derivative of a pheromone and you're feeling like you want to jump on my bones, aren't you?" And she said, "Yes!"

Kent Holtorf ([00:30:20](#)):

Give me some of that, unless you've watched the Twilight Zone on the love potion, you know?

Nick Delgado ([00:30:26](#)):

[Laughing] I missed that episode. You gotta tell me.

Kent Holtorf ([00:30:29](#)):

So the guy—this girl, the young girl, he wants her, he loves her, but she doesn't want him. He pays a million dollars for this love potion and it's a dollar—sorry, he pays a dollar for a love potion to this scientist. Then he can't stand it, she's all over, just loves him so much. And he goes, "I can't take it!" Goes back to the scientist and he goes, "Well, how much is the reversal?" A million dollars, you know?

Nick Delgado ([00:30:53](#)):

[Laughing]

Kent Holtorf ([00:30:53](#)):

So you gotta watch out what you ask for, but yeah. That's way off the subject.

Nick Delgado ([00:30:59](#)):

No, that's okay.

Kent Holtorf ([00:30:59](#)):

I think you have a slide deck. Well, why don't we go to that?

Nick Delgado ([00:31:02](#)):

Okay. Let's see here. Do you see—? So when we're talking about immortal peptides, I have a belief, Dr. Kent Holtorf, that the very peptides that lead to better sex and attraction also are the very hormones that are important for longevity.

Kent Holtorf ([00:31:24](#)):

Well doesn't that make sense though, evolutionarily? That the female picks the most virile, toughest male, right? The males fight, whoever wins, so it's health equals sexy.

Nick Delgado ([00:31:39](#)):

Yes, absolutely. Without a doubt. Alpha males—except in today's current society, a lot of alpha males are bashed.

Kent Holtorf ([00:31:47](#)):

Yeah.

Nick Delgado ([00:31:47](#)):

But some of the alpha males don't conduct themselves very well. You know? They're communicating in a way that may be less than smart.

Kent Holtorf ([00:31:55](#)):

A few grunts and—yeah.

Nick Delgado ([00:31:56](#)):

Right, right, right. So, but regardless of the status of Rock—Dwayne Johnson, you think about when his—when you do a YouTube search, he had gynecomastia surgery because he uses so much—shall we say testosterone, it converts into estrogen. I don't know his personal medical file, but—

Kent Holtorf ([00:32:14](#)):

That is dumb, he should know that!

Nick Delgado ([00:32:14](#)):

He should know that, but there also are better elegant aromatase inhibitors, namely DIM. We use a product we call Estroblock that works incredibly well and Livedetox because turmeric, also along with Cyprus and Astragalus

Kent Holtorf ([00:33:04](#)):

It's like all these pesticides and plastics are all estrogenic. That's what—like, yeah, I'll check in men and women like estradiol. checks everything. They're like—it's off the chart. You know, they have fish now that there's no more males. If you look at the reference ranges for testosterone for men each decade, because they take 95% of the people and call them normal, the average testosterone level is dropping, right? I'm sure you've seen it, it's like 25 year olds coming in with a testosterone level of a 90 year old and it's called normal.

Nick Delgado ([00:33:46](#)):

It's really troubling. It could be too, as you mentioned in the water runoff. In the runoff, it turns out that the excretion of feces from pork, cattle, and chickens ends up in the water table and ultimately in the food supply. It turns out, 10 to the 6, there is somewhere between—approaching a million times more estrogen concentration in our environment now than there's ever been. I'm actually working on my next book on estrogen, the male and female toxin, and that book will be coming out in a few months, but—

Kent Holtorf ([00:34:21](#)):

It's huge.

Nick Delgado ([00:34:22](#)):

It's a huge problem, right?

Kent Holtorf ([00:34:24](#)):

Women and, also men, like they're healthier with high testosterone and then increasing estrogen in girls who have breast cancer, they're starting their periods [inaudible] so young now, developing so quickly. It's a problem.

Nick Delgado ([00:34:41](#)):

Correct. In the turn of the century, Japan—the menstrual cycles, it was shown would not start till age 19, 20, or 21. Now it's very typical 12, 13, 14, and the girl is menstruating, right? And then the menstrual cycle lasts longer because of the sustained high hormonal environmental factors. So I'm kind of an advocate of plant-based, oil-free, sugar-free eating, partly because we would reduce our estrogen exposure tremendously, not just in the environmental factors, but even consuming because when you eat an animal, it has estrous cycles. Pork, chicken, and beef, they all have high concentration of estrogens. Estrone sulfate in milk was shown by a Harvard study to be 33 times higher in milk than in say almond milk or coconut milk. So I think we have to learn to detoxify these harmful estrogens—

Kent Holtorf ([00:35:40](#)):

Yeah.

Nick Delgado ([00:35:40](#)):

To be sexy as we age.

Kent Holtorf ([00:35:42](#)):

And there's—you know, it depends on exteroceptors A or B, one stimulates, one—like estriol, which the FDA is trying to ban, basically stops proliferation of breast tissue, where estradiol is about 50 50. Or you look at—people think progestins is progesterone. They're told by their OB, "Oh, the same thing." It got approved because they do the same thing in the uterus and stop [inaudible], but they have the opposite effects in the breast.

Nick Delgado ([00:36:17](#)):

True.

Kent Holtorf ([00:36:17](#)):

Progestins stimulate breast tissue, progesterone is the best way to prevent breast cancer. So if you want to get breast cancer, take progestin, a synthetic Prempro. It's in birth control pills. If you want to prevent, take progesterone, you know?

Nick Delgado ([00:36:35](#)):

You brought up a good point. Birth control pills are synthetic, and I've spoken to a number of OB-GYNs and hormone experts, female physicians as well, and they've stated you could make a birth control that was bio-identical and it'd be safer and healthier, but they don't want to take the liability of a lawsuit if someone gets pregnant.

Kent Holtorf ([00:36:55](#)):

You have to do such high dose, yeah.

Nick Delgado ([00:36:57](#)):

Yeah, but it could be done. But you and I know, all these incredible number of women that are put on birth control pills and ironically these poor women, also many of them are put on—they have acne. I wrote a book, Acne Be Gone for Good, and one of the go-to off-label uses of birth control pills is birth control pills. Imagine the side effects and the risk of stroke and blood clots.

Kent Holtorf ([00:37:22](#)):

Yeah, and you get—exactly. So many people have coagulation defects when—yeah, we do more genetics now. Also anyone with chronic infections, it's just immune aggravation and coagulation. It's bad news, but it's strange, certain things are acceptable. Like you—someone can die from prescription medication, no big deal. If we hurt someone with a supplement or something like, "Oh my God!" It's like, we'll lose our license. So it's interesting. But we'll go ahead and do the slides.

Nick Delgado ([00:38:00](#)):

Yeah. So I think if we're talking about that timing issue, right? Human growth hormone should not be really called growth. I think it should be called human rejuvenation hormone. Arnold Schwarzenegger knew about this and in those days it was legal. It wasn't illegal to take testosterone and growth hormone when you were a bodybuilder because there was no sports regulations and abuse by athletes, if you will. But it clearly fills out the muscle density and I think that even more exciting is these peptides. I think that it's appropriate to consider that you could use both peptides and human growth hormone, but human growth hormone is a little harder to get prescribed. I know recently there's been some new changes, but those laws seem to kind of fluctuate, right? But I think it's okay if your physician finds and we don't have to document it with the kind of test we used to have to document, we can just say, "There's a human growth hormone deficiency."

Kent Holtorf ([00:39:01](#)):

It's the only drug you can't give her off label. But I did a review on growth hormone, there's never been a case of giving growth hormone causing cancer. But it's name—growth—"It's a growth hormone, it's gonna cause cancer." But really it's because performance enhancing, it just got bad, associated with bodybuilders and that stuff, but—

Nick Delgado ([00:39:24](#)):

Right, right. And they use so much that their forehead would get large.

Kent Holtorf ([00:39:28](#)):

I don't know anyone rich enough, except for Barry Bonds.

Nick Delgado ([00:39:33](#)):

[Laughing] Right, right.

Kent Holtorf ([00:39:35](#)):

Yeah.

Nick Delgado ([00:39:35](#)):

Yeah. But I contributed a chapter to Grow Young with HGH, their revised edition that went out as an ebook. I did a lot of research on it. So I'm very comfortable with the use and application, but to physiologic, healthy levels, not to abnormal excessive levels. I sustain my levels between say around 300, 350. I have had readings as high as 500, 600 and I know to back off. I don't need to go that high. When you're a young—a teenager and a young adult and you're at your most youthful level, those are the levels. Just like with testosterone, I use bioidentical pellets, right? It's easy to bring a level up to about say 900 to 1500, which is—my 27 year old son who's also a UFC, that is a jujitsu MMA fighter. He walks around with the level of 1500 to 1800, naturally! You know? Nothing enhanced. So we know—

Kent Holtorf ([00:40:43](#)):

Let me ask you too, because they say, "Okay, it's normal to have lower testosterone." They lower the reference range as you get older, but also older people, they have testosterone resistance. So you can argue that it should be higher, right?

Nick Delgado ([00:40:59](#)):

Right.

Kent Holtorf ([00:40:59](#)):

It's like saying, "Well, this is normal." Well, so is cancer and heart disease. I have had a number of guys come in, older men, they've got erectile dysfunction. They got that grumpy old man syndrome and their testosterone is like 800 like, "Oh, that's great." Well, let's give a trial—a test trial of testosterone and you bring it up like, "Oh my God, my life has changed."

Nick Delgado ([00:41:21](#)):

Yes.

Kent Holtorf ([00:41:21](#)):

You know?

Nick Delgado ([00:41:23](#)):

Yeah. Abraham Morgentaler who obviously wrote the book Testosterone for Life, he's a Harvard professor and he did a thorough literature search, which the big concern was if you augment someone with testosterone, you're going to cause prostate cancer. He found nowhere in the literature to support that. If anything, Suzuki published in Japan—

Kent Holtorf ([00:41:41](#)):

The opposite.

Nick Delgado ([00:41:41](#)):

High estrogen levels causing an increased risk of prostate cancer in the prostate. So DHT and testosterone nourishes the prostate. Provided—and I'll go further to say, I believe it's still appropriate to do what Dr. Joel Fuhrman talks about, G bombs, which is greens, berries, mushrooms, onions, and nuts and seeds, and the use of beans. So a variety of whole natural foods grown. You'll get actually a higher total testosterone, but you don't have as much free testosterone and that's where we use a product Testosterone Plus because it has the herbs that bind to the sex hormone binding globulin, because in plant-based people they tend to have higher sex hormone binding globulin, but you want to release that free bioavailable testosterone to get that good, harder erection. You also want to maintain better youthful growth hormone levels. So I agree with you, the youthful levels I published in my first book, Grow Young and Slim that's now available as an ebook, I reprinted some of those conversations in my book, Mastery in Love, Sex and Intimacy because to have good sex, your skin, your muscles, your body should look more youthful.

Kent Holtorf ([00:42:57](#)):

You have to feel good about yourself. Do you want to go to your slides?

Nick Delgado ([00:42:58](#)):

Yeah. Can you see them at this point?

Kent Holtorf ([00:43:00](#)):

No, I think, yeah. That's—

Nick Delgado ([00:43:01](#)):

Yeah, I don't know. I flipped through a few slides, but I didn't know they weren't being seen. Yeah. Here, screenshare. Danny, can you take a look at this? Okay, so here in Zoom. I'm trying to show the slides. Okay. Okay. So share screen right here. This one? Okay. Oops. Did that work? It's taking a moment. Give us a second here.

Kent Holtorf ([00:43:45](#)):

So I'm going to stop sharing, okay. We're going to edit this part out.

Nick Delgado ([00:43:50](#)):

Okay, I'll try it one more time. This one right here, right? Share. Okay. Hey, do you see him now?

Kent Holtorf ([00:43:57](#)):

We can see him!

Nick Delgado ([00:43:57](#)):

Perfect.

Kent Holtorf ([00:43:59](#)):

Editors start now.

Nick Delgado ([00:44:03](#)):

So keep in mind the immortal peptides, as we mentioned, those who maintain a healthy sexual ability and interest in sex on early proclivity or that fascination with love making and sex and maintain it throughout their lifetime, tend to live longer. Most centenarians, if you pull them and you find out, there's been research on this, those who reach the age of 100 plus have had a very rich, full sex life. It could be the hormone levels were arguably higher than those who did not sustain their sex life. There's been some evidence of this. In Japan, Okinawa, some of the longest lived people, they have 30% higher testosterone DHA levels than a 70 year old in our culture. So literally their 100 year old is healthier from a testosterone and hormonal perspective than our men in our culture and women age 70. So these hormones are, shall we say, very important. So one of my favorites as a peptide is PT-141. It's a derivative of Melanocytes and the early version would

make you, if you will, if you took as subcutaneous injection in the skin, it was discovered in Australia that it helped people who were very white to prevent from sunburn and it was helpful. Then they were finding out, "Wow, we're getting erections!" [Laughing] They go, "Wow, that's a nice side effect." So they isolated the particular portion of that hormone to this amino acid chain specific to PT-141 is what they named it. It has a nice benefit, almost hitting more of the fantasy part of the brain. It's different than say a man who's experienced Viagra Cialis, or in our case, we use Amore product, which inhibits PD-5, an enzyme that gobbles up nitric oxide. So everyone who now understands the benefit of PT-141, it kind of engages that part of the brain that is accustomed to fantasy. So you have to time it about 4 hours before in my experience. Use 10 to 20 units on the insulin needle, 32 gauge, so it's very—31 gauge, so it's very easy to insert a little bit of the liquid in there and you time it almost about 4 hours—3.5, 4 hours and you notice that when you're engaging with your significant other, that that erection comes up full and hard. You'll just notice your skin gets a little tanner if you use it too often. If you don't mind being a little tanner, it's a good look, you know? During the winter you're tanned!

Kent Holtorf ([00:46:41](#)):

So if it works on the brain, not on the vasculature of the penis, like Viagra. I find it works like, I don't know, close to 100% of the time for men. It just got approved for women at a higher dose.

Nick Delgado ([00:47:01](#)):

Yup.

Kent Holtorf ([00:47:01](#)):

Biggest side effect is nausea, which tends to go away. But it's an interesting molecule. I think it can enhance a lot of people's life in general, you know?

Nick Delgado ([00:47:17](#)):

I think it's amazing and I think it's worth trying it out. Even if you're already using some other augmentation, as I mentioned, if you're using a PD-5 inhibitor and you're also augmenting your testosterone to be its ideal level, and you're helping to clear out the harmful excess estrogens and you also have good human growth hormone levels, IGF-1, all of those things are appropriate and necessary. Then add in PT-141 and you'll feel like a rockstar. You're going to be like, "Okay, now I know what a porn star experiences." If you've talked to porn stars, they use usually Trimix, the injection directly into the male organ. A lot of guys are uncomfortable with that. The idea of injecting their male organ, you know, you can do it. It's easy, a small insulin needle, but it's nice when you can do it this way. It feels a lot more natural.

Kent Holtorf ([00:48:07](#)):

It's not sexy.

Nick Delgado ([00:48:08](#)):

It's not sexy, yeah.

Kent Holtorf ([00:48:08](#)):

I would be careful using it with the—I don't think you want to use it with any Viagra Cialis, like—

Nick Delgado ([00:48:14](#)):

The PT-141?

Kent Holtorf ([00:48:16](#)):

Yeah.

Nick Delgado ([00:48:17](#)):

Okay.

Kent Holtorf ([00:48:17](#)):

Because it works.

Nick Delgado ([00:48:17](#)):

Yes.

Kent Holtorf ([00:48:17](#)):

And you can get a... But it's interesting, like—so the big concern is priapism where erection lasts for over five hours and basically no blood flow. But my sense is is that it allows blood flow, so even if the erection lasts longer, I don't know, I don't want to say for sure that you have the risk of like basically necrosing off your penis, like you can with Viagra where the blood flow is just stuck in there.

Nick Delgado ([00:48:51](#)):

Right.

Kent Holtorf ([00:48:52](#)):

Because I don't think people get pain after even hours, which you would have if you had a Cialis or Viagra erection for 24 hours. So it works very differently, yeah.

Nick Delgado ([00:49:06](#)):

Yes. And I would go further to say that the likelihood of an erection that will not disappear is typically more common to Trimix injected directly into the penis because if you overshoot the dose, you're going to have an erection for 2, 3, 4 hours, or longer, and it's uncomfortable.

Kent Holtorf ([00:49:25](#)):

It just sticks the blood in there.

Nick Delgado ([00:49:27](#)):

Yeah.

Kent Holtorf ([00:49:27](#)):

Yeah. So—

Nick Delgado ([00:49:29](#)):

Yeah. So PT-141 is elegant. It's effective. It's fun. It actually—the orgasmic experience is—if you were to rate it amongst quality of pleasure, it's right up there amongst the top.

Kent Holtorf ([00:49:43](#)):

Let me ask you, with women—I mean, it's available now as a prescription. I don't know how much it is. It's not—it's crazy amount, but you get it compounded. For women, what's your sense in the effectiveness and satisfaction using it for women?

Nick Delgado ([00:50:02](#)):

Keep in mind, women do achieve a clitoral erection and you're still back to square one if a man knows how to stimulate without irritating the clitoris and if he's again comfortable in the bedroom with bringing the appropriate type of vibrator, because there's various degrees of the strength of vibrator, low—usually they have two switches, low or high. So, again, I've noticed that there's a variety. When you pull women, they love the magic wand. There's certain vibrators that work better than others. So in terms of the arousal disorder for women and using PT-141, I think it's a nice addition. It just makes it easier for them to achieve the orgasm, and furthermore, instead of that bell curve of—as I mentioned from up to one hour, you're probably cutting that bell curve to half plus when they do achieve orgasm, it's much more intense.

Kent Holtorf ([00:50:55](#)):

Interesting. Okay.

Nick Delgado ([00:50:57](#)):

Yeah.

Kent Holtorf ([00:50:58](#)):

Hey, we need all the help we can get!

Nick Delgado ([00:50:59](#)):

That's cactus Pete there, he thinks he's got it all handled and figured out and keep in mind when guys think they can just get that big hard erection, it's satisfying to a guy, as you know, when the blood is filled and it's a natural erection and it feels like when you were a teenager, or whatever. But if you think you're going to please your lady with just intercourse, even if you've warmed her up ahead of time if you will, always think of intercourse as the dessert and not the main play, the main course. Always—

Kent Holtorf ([00:51:36](#)):

Right there, telling guys that they're going to go, "What are you talking about?" You know?

Nick Delgado ([00:51:41](#)):

[Laughing] Well, we're talking about allowing—

Kent Holtorf ([00:51:43](#)):

I think it's profound, yeah.

Nick Delgado ([00:51:45](#)):

It's huge. It's huge, right? So, back to that statistic, 95% of men feel that they're great lovers, whereas 85% of women will admit—and it's probably higher percent—that they haven't achieved orgasm during their encounter. There is one way I alluded to, to know if a woman has achieved orgasm and it's not their face gets red, flushed, their nipples get erect, they get vaginal lubrication. All of those are in route to achieving stimulation and pleasure, but a true orgasm, there is only one way to know, and you know what that is?

Kent Holtorf ([00:52:22](#)):

Dude, I'm lost in that whole area. I have no idea.

Nick Delgado ([00:52:25](#)):

[Laughing] Okay. Well, since women have 12 erogenous zones—

Kent Holtorf ([00:52:31](#)):

Which—at some point, just go through those real quick.

Nick Delgado ([00:52:34](#)):

They're mostly more towards the surface. There's different points that I describe in my book, Mastering Love, Sex, and Intimacy, these different pleasure points, but most of them are more surface, not deep in, with the exception of the G-spot and the cervical orgasm.

Kent Holtorf ([00:52:52](#)):

Sounds like a lot of work though.

Nick Delgado ([00:52:55](#)):

Just think of doing around the world stimulation with a vibrator, or your tongue. If you're germaphobic, you're maybe not going to do the tongue. So just take a shower together first, get in a hot tub first, whatever makes it work for you.

Kent Holtorf ([00:53:12](#)):

So flowers and chocolate doesn't do it?

Nick Delgado ([00:53:14](#)):

Yeah. If you want to use a dental dam and you're freaking out about transmission, okay, do it. But the point is that stimulation needs to be correct and appropriate enough to bring that woman up to arousal. If you take your little finger on your other hand and touch the external part—if she's aroused enough, she won't even notice—and you touch it to her anus, when she achieves orgasm, not just the rapid panting, "Uh, uh, uh", the big act, her anal sphincter will be contracting very rapidly.

Kent Holtorf ([00:53:49](#)):

Her what?

Nick Delgado ([00:53:49](#)):

Her anal sphincter will be contracting very rapidly at the peak of orgasm, and she won't be able to fake that because it is an automatic thing.

Kent Holtorf ([00:53:57](#)):

Right, I'm checking.

Nick Delgado ([00:53:59](#)):

You better check.

Kent Holtorf ([00:54:00](#)):

All right, "Stop faking it!"

Nick Delgado ([00:54:02](#)):

No more faking in the bedroom now that women know we're onto them!

Kent Holtorf ([00:54:06](#)):

All right, we know now.

Nick Delgado ([00:54:09](#)):

It's the moment of truth in the bedroom. You'll be surprised that now that women know—and oftentimes I share a copy of my book with, you know—

Kent Holtorf ([00:54:20](#)):

Now you know that we know.

Nick Delgado ([00:54:23](#)):

Then what happens is there's more communication in the bedroom, or prior to the bedroom.

Kent Holtorf ([00:54:29](#)):

That's what's needed, right?

Nick Delgado ([00:54:29](#)):

Yes! Let's cut through the—

Kent Holtorf ([00:54:33](#)):

Yeah, and instead of big egos and worried about what someone's gonna think, like, you want to be happy. You want to be satisfied.

Nick Delgado ([00:54:42](#)):

Love, pleasure, and happiness.

Kent Holtorf ([00:54:42](#)):

Your partner wants to satisfy you.

Nick Delgado ([00:54:46](#)):

Yeah, men truly do.

Kent Holtorf ([00:54:48](#)):

What's the problem?

Nick Delgado ([00:54:48](#)):

Yeah. Men truly do want to satisfy their partners, their female partner, if you will, but women have been conditioned.

Kent Holtorf ([00:54:57](#)):

Yeah, it's societal. Like, "Oh, you can't be—you can't enjoy sex." Right?

Nick Delgado ([00:55:02](#)):

Or—not only that, there's a number of men if they've dated or been prior married, I've interviewed married couples that the woman never achieved orgasm in 10 years, you know? Even up to 20 years. So they kind of hid that and so that's why there are sexless marriages. There's only—if you look at the average encounter of sexual frequency in a marriage, it starts off maybe 5 times a week, then it drops to 1 time a week, then 1 time a month. Then essentially, once in a while they have an encounter and that's not healthy.

Kent Holtorf ([00:55:36](#)):

It was only at birthdays I thought.

Nick Delgado ([00:55:38](#)):

Yeah. It's not healthy. It's not healthy, not for a healthy, emotional relationship that you want to be close and connected and feel intimacy and love. True intimacy and love and connection.

Kent Holtorf ([00:55:48](#)):

No, look, I think it's—the majority of people I know, it's like they don't talk about it, but you kinda know. You know?

Nick Delgado ([00:55:57](#)):

Yeah.

Kent Holtorf ([00:55:57](#)):

Or sleeping in separate bedrooms.

Nick Delgado ([00:56:01](#)):

Yep, yep.

Kent Holtorf ([00:56:01](#)):

It's so common.

Nick Delgado ([00:56:02](#)):

Yeah. So if you can see my slide, Melanotan 2, it does stimulate the melanocytes to produce melanin. It causes a tanned appearance and that's beneficial if you're concerned about being too white and you're going out and the sun's coming up, summer snuck up on us because we've all been in isolation, you know? Sure—although I haven't been isolating, I've been out on the beach every day. So whatever. [Laughing] You know? However you wanna take that.

Kent Holtorf ([00:56:28](#)):

That's where you should be, that's where you're not going to get COVID, it's crazy.

Nick Delgado ([00:56:30](#)):

I'm out there in the ocean.

Kent Holtorf ([00:56:32](#)):

That's a whole other interview.

Nick Delgado ([00:56:33](#)):

Yeah. That's another talk for my book, Blood Doesn't Lie, that's out on Amazon now.

Kent Holtorf ([00:56:40](#)):

I am still freaked out that they **[inaudible]** your book and made you take parts out of it. Amazon!

Nick Delgado ([00:56:46](#)):

Yup. They sure did.

Kent Holtorf ([00:56:48](#)):

[Inaudible] his book.

Nick Delgado ([00:56:48](#)):

Yup.

Kent Holtorf ([00:56:49](#)):

[Inaudible] mention COVID.

Nick Delgado ([00:56:49](#)):

Yeah. So, the Melanotan 2, the thing you need to watch for is oftentimes people of dark skin, sometimes if they use it, they'll get white patches, which is really a problem because they don't want irregular colored skin and even light people can get patches. It could be a cortisol issue. You know when you get these liver patches, as they call them? A lot of times they have adrenal fatigue and you really, as you and I know, cause you guys are great at bioidentical hormones in Torrance, California, incredible work, you're training doctors, you're working with patients. Many of your patients are doctors I know, as I have. I have a lot of clients that are doctors. The point is that you want to intervene with the adrenals first, and adrenals you have to have enough adrenaline to deal—not adrenaline—cortisol, to deal with the chase because women will turn you down. Even your wife or your girlfriend will turn you down. So you've got to have enough cortisol to deal with the word "No". In sales and in your business career and in love pursuit. That's important, that spark of life. Men have to be—if they want a woman, they have to pursue them. Even if they've been in a relationship for a long time, they have to figure out ways and creative ways. So if you don't have

enough cortisol and your adrenals are shot from drinking coffee and being up all night and stressed all day and not getting enough sleep and so forth, then the reality is people walking around with adrenal fatigue are highly susceptible to infectious agents and conditions and issues, which that's another, again, story for Blood Doesn't Lie. But I would say that the adrenal glands are important from lovemaking perspective, because then you can augment testosterone. You can augment growth hormone and thyroid, which are anabolic, whereas cortisol is catabolic. You have to have that balance. If you go and push the anabolics first, and you intervene with testosterone and DHA and thyroid, and then all of a sudden you throw the person into congestion, cold, flu, bronchitis, or chronic fatigue because you've hit it too hard on the adrenal—excuse me—on the anabolic side and you haven't adjusted for the adrenals, right?

Kent Holtorf ([00:58:53](#)):

Yeah, and the thing is they found that when your adrenals aren't working, so your body's pumping out corticotropin releasing hormone, right?

Nick Delgado ([00:59:02](#)):

Yep.

Kent Holtorf ([00:59:02](#)):

That makes ACTH which then stimulates cortisol, is that that CRH, if your adrenals aren't working, it's pumping that out. Huge mast cell stimulator. So all of this inflammation, which we're finding is a problem with even sexual function, every disease of aging, I mean, name it, neurodegenerative disease, auto-immunity, all that stuff. So you're right, exactly right with that.

Nick Delgado ([00:59:29](#)):

Right. So we want to support them with adrenal glandulars with—we use adrenal immune support. There are elegant methyl donors that help to allow the liver to handle a billion chemical reactions per second. There's the lifestyle factors, getting outdoors in the sun to build up natural, healthy cortisol and adrenal function, making sure you reduce toxic levels of say alcohol and other things that can affect the adrenals. But I think when you get back to the sexual perspective, you've gotta remember now, if you have a person with healthy adrenal function and you can augment IGF-1. And this is also a very effective peptide, very potent, and many practitioners are familiar with its application and use, and it has a different benefit than human growth hormone itself. Although you and I know, human growth hormone itself will cause the liver to stimulate the release of additional IGF, but there's many anti-aging doctors in Europe who are using IGF-1 to help rejuvenate nerves and help to build some muscle density. So as we age, we face muscle wasting, right? I don't believe we should eat a lot of excess animal protein to build up muscle density because you'll do the opposite. The animal protein is loaded with estrogen anyway, you're

going to gain body fat. You're going to get the opposite benefit. So IGF-1 is an appropriate intervention from a perspective of anti-aging and sexuality.

Kent Holtorf ([01:00:58](#)):

As opposed to—you know, IGF-1 is approved for children for basically short stature and that. I do have a little concern with it in older individuals, because if you have growth hormone you get IGFBP3 increase, which prevents cancer and that in terms of longterm data—I assume you use the peptide secretagogues to stimulate your own. Probably the most common is CJC Ipamorelin where—and you can't overdose. If you do too much, it just—it doesn't work any better.

Nick Delgado ([01:01:41](#)):

Yeah. So you're right on CJC-1295 Ipamorelin, Sermorelin, the Tesamorelin, and then of course GHR3, GHR6, which are shorter chains, you know? Human growth hormones are 191 amino acid chain. These peptides are shorter chains of essentially amino acids, so the body tends to want to complete the, if you will, the missing chain. So it actually helps the body produce additional human growth hormone, right? So it's a negative, positive feedback loop. As you refer to Somatostatin, as the graph shows, GHRH and pituitary growth hormone. Then that stimulates muscle synthesis, protein and amino acid transport, bone proliferation, and strengthening of the bones, sometimes reduction in adipose, but some people, depending on the mix of peptides, they might get a little too hungry. So we want to choose the one, if they're struggling with obesity, that would not stimulate an excess appetite, but if they do use the one that causes more appetite, just eat more plant-based foods, fruits, vegetables, soup, salads, beans, and that way you're not eating more animal product because animal product is going to cause you to gain weight without a doubt. But the liver, the IGF-1, anabolic effects absolutely true in terms of its ability to bring protein synthesis and neuromodulation, ghrelin. So I'm a big fan of these peptides. I think you're doing a great job with investigating oral deliveries. In the early days I had worked with Dr. Eric Dady of oral deliveries of peptides, so I'm a big fan. We know that insulin can be absorbed nasally, so FDA did approve without having to inject that large amino acid chain. What is insulin? 141 amino acid chain? So the fact that we have these peptides with good delivery systems, they may very well absorb orally as well. Isn't that some of your research?

Kent Holtorf ([01:03:48](#)):

It is very interesting. It's like—they'll have like someone put a peptide out and say, liposomal. Liposomal really makes no difference with the peptide, unfortunately, in general, because it's just they're polar. They're hydrophilic, so they don't get into the tissues, but it's amazing. It's amazing how difficult it is to get a peptide to absorb orally and what's it been? 30 years they've been working on it to get the insulin and these things absorbed, but yeah, we're—basically all the technologies advance that we'll have some very cool things out by the time this airs. So, yeah.

Nick Delgado ([01:04:40](#)):

Beautiful. Yeah. It's good to look at these peptides. Epitalon, it resets the HPA, the hypothalamic pituitary adrenal axis, it has a positive effect in reduction on disease and is purported to lengthen and preserve the length of the telomeres and increase melatonin for better sleep. And of course, sleep is one of the great ways to restore your hormone levels. Absolutely great, testosterone, growth hormone, and so forth.

Kent Holtorf ([01:05:07](#)):

Do you think that Epitalon—to me, it seems like the ultimate anti-aging. You know, it basically stimulates the thymus, which your thymus basically involutes as you get older. It causes that immune system to be abnormal. When you give that with some of the thymic peptides—did a study of 100—I think it's 135 cardiovascular patients with significant cardiovascular disease, followed them for 15 years, the ones who got basically that combination of peptides, they had—basically their cardiovascular effects improved where a placebo got worse, as you would expect. Dramatically less cancer, dramatically less mortality, morbidity, increased quality of life. It's just like—it increases telomeres, which is the—essentially the biological age of your cells. So it seems like the ultimate anti-aging peptide and I—have you ever seen a side effect from it?

Nick Delgado ([01:06:11](#)):

No, and you hit on a point linking the telomeres. Peter Duesberg published studies about cancer, and he found that irregular or short telomeres increase the risk of cancer. So here you have a peptide that potentially can lengthen and preserve these telomeres, which may be the crux—one of the key crux of course—of aging. We do know there's a number of theories about mitochondrial boosting and you and I are always on the cutting edge, looking at this research.

Kent Holtorf ([01:06:42](#)):

Yeah, [inaudible], yeah.

Nick Delgado ([01:06:42](#)):

Right? And using these therapies. I personally do use these therapies and I test and I measure the DNA length of the telomeres in myself and some of my VIP clients. I think we're in an age now where we have to recognize that past generations failed miserably when it came to aging, they just accepted aging as inevitable. I think we're the first generation that looked at it and said, "Wait a minute." If we can function from a sexual perspective, from a physical perspective, from a mental and emotional perspective, and we can reduce the incidents of killer diseases such as cancer, and we've got to do it in a five point process though. We can't just say the peptide, of course, is going to do it all. But in the right conditions of diet, exercise, sleep, lifestyle, medicine

interventions, supplementation, all of it together. Now we might be the first to be able to reach that. It's not just a lofty age of 100 to 120 and above, it's reaching it in class. I mean, I never forgot and I wanted to show a slide—if it didn't show up—was the picture of these older people with very extremely low growth hormone levels, low DHA, all the hormones have hit bottom. That's not healthy. It's not sexy. It's not good. It's not something that we have to accept. When we look at people like Bob Delmonteque, who—I was his personal life coach, and he'd call me each week. You remember him?

Kent Holtorf ([01:08:13](#)):

Bob?

Nick Delgado ([01:08:13](#)):

Yeah, and here's a picture I believe when he was age 84. Picture in the middle of the two ladies in the bathing suit and Kelly to his side there in the silver bathing suit is 74 years old in that picture. Now, Bob Delmonteque was a big advocate of using various types of hormone interventions and weight training and lifestyle management and exercise and the power of the mind. At age 17—you look, he looked better at age 67, then at age 80 than he did when he was younger. Now, what we have to remember is that whatever we learn from individuals that being sexy as we age is a good thing. I'm a grandparent. I have a grandchild, a granddaughter and grandson, and I have 4 boys and a girl and my oldest son is 43 years old and my youngest is 11. I'm single again, so I might end up having another child as I approach 70.

Kent Holtorf ([01:09:13](#)):

[Laughing] Okay. There's the ad, we'll put it up.

Nick Delgado ([01:09:17](#)):

[Laughing] So sexy people do live longer and I'm proud to have—to be the father of wonderful children.

Kent Holtorf ([01:09:24](#)):

It makes sense, right? I mean, you know? Yeah.

Nick Delgado ([01:09:28](#)):

At the very least, I don't think anyone would argue quality of life, right?

Kent Holtorf ([01:09:31](#)):

But you know what drives me crazy? Is that—and it's kind of, I guess, a little accepted now, but **[inaudible]** hormone optimization. So bringing hormones back to optimal, whatever it is. That, "Oh, it's normal to be low testosterone. Normal to be low." Well, it's like saying it's normal to have cancer, you know? The only thing that they adjust to optimal is cholesterol because they can sell a damn drug, which destroys your mitochondria and causes so many problems, you know? Lipitor and these things. Instead of optimal, they say—they take 95% of the people and they say, "Well it's normal." Well, yeah, it's normal to die! Well, okay! It's like—it drives me nuts. Why not be optimal? Or it's like, "Oh, you're normal." I've seen so many doctors, "Well they said my thyroid's normal or my testosterone is normal." They're like 2 points above the lowest limit, like, okay! So only the lowest 2.5, you're in the lowest 3% of the population. You got a D-. "Oh, okay. I'm fine with that." You know?

Nick Delgado ([01:10:40](#)):

It's interesting that growing up I struggled with obesity, having high blood pressure, I had a TIA, a transient ischemic attack, a small stroke, when I was 22 years old.

Kent Holtorf ([01:10:51](#)):

Are you kidding me?!

Nick Delgado ([01:10:51](#)):

True. I was on blood pressure medications and everything was falling apart for me. Fortunately I learned about lifestyle medicine intervention. I went to work with Nathan Pritikin, which revealed in 60 minutes to be a rather profound way to reverse cardiovascular disease. Now we know it also reverses diabetes and it's a good intervention for arthritic issues. Probably 20 chronic diseases could be reversed just through proper whole food, plant-based, oil-free, sugar-free eating, and exercise, and the power of the mind. I use a lot of hypnosis timeline therapy to be consistent and to stay on track. I get quality sleep every night. I have a wonderful sex life. My energy is great and I don't drink coffee. I'm one of those few people, I don't metabolize caffeine well. I do have a product that has some Gorana in it and maybe in a world class competition, I'll take some of that product **[inaudible]** lean and fit and extreme energy. You know, it'll help level the playing field because I'm going against guys 20 and 30 years old, 40 years old that are much genetically endowed.

Kent Holtorf ([01:11:57](#)):

[Laughing]

Nick Delgado ([01:11:57](#)):

And I beat them! But the reality is that for myself, I think that quality of life—when my hormone levels are adjusted to my age and I'm—as I mentioned, I'm past the age of 65. One year I went off everything, every single bioidentical hormone, every herb, I basically—I ate decent. I didn't change my diet too much, but I just wanted to see hormones by themselves. No peptides, nothing. I was doing an experiment. I was getting ready to do a video shoot with Suzanne Somers, with one of the producers, and I wanted to see, you know? By the end of the year, I gotta tell you, I felt like sitting on the couch. I felt like most guys, you know? Couch potato, like no interest in business or life or lovemaking.

Kent Holtorf ([01:12:43](#)):

Grumpy old man syndrome.

Nick Delgado ([01:12:44](#)):

It was terrible. It was terrible. I would never go back to that. To this day, I'm a big advocate of for sure—

Kent Holtorf ([01:12:51](#)):

People go to the doctors and the endocrinologists say, "Oh, you're fine." You know? Just a super quick story, had a patient who was a dog trainer and was on testosterone, feeling great, it was amazing. Then his wife said, "Oh, you're not a man. You need testosterone." He went off of it and he's like, "The dogs don't respect me." [Laughing].

Nick Delgado ([01:13:14](#)):

Wow.

Kent Holtorf ([01:13:14](#)):

It was amazing. He said they won't do what he says. Then he goes back on it and he goes, "I'm back." He goes, "A dog bit me today and I grabbed it and I said that's all you got? And I bit it back!" You know? So he was back, but yeah, it shows.

Nick Delgado ([01:13:31](#)):

It's so true. It's so true. I have a story where I went to Bali, the beautiful Island off the coast of Indonesia and Malaysia, and I was in the rainforest where there was monkeys, and this is a true story. There was an American bodybuilder who was using synthetic injectable testosterone, not bio-identical, he was using everything under the sun at very high dosages. He admitted it, and you know, we were all in the rainforest. There was a couple Asian gentlemen, a couple of guys from Australia, and so forth. As we walked through the rainforest, we got bananas. We were going

to feed the monkeys and the little female and the baby female monkeys, and the baby monkeys come up and get the bananas. Out of nowhere, the bushes started shaking and a big alpha male come running out and he skipped—the big American bodybuilder skipped the other gentlemen that were there and ran right after me, detected me, even though I was at that time in my late 50s, as the alpha male. He chased me as far as he could out of his range where his females were.

Kent Holtorf ([01:14:29](#)):

[Laughing] You were the man to beat!

Nick Delgado ([01:14:29](#)):

I went back 15 years later to a rainforest, clearly there would have been different monkeys there, now in my 60s and the same thing. The monkeys ignored the other guys and chased me. So I say, I don't even need to do a blood test, just sit that monkey next to me. If it gets agitated, you know you've got a good optimum level.

Kent Holtorf ([01:14:51](#)):

It's the monkey test! [Laughing] There you go. Hey, we gotta wrap up. I could talk to you forever, but yeah.

Nick Delgado ([01:14:57](#)):

I think we covered a lot and I appreciate being on your show.

Kent Holtorf ([01:15:00](#)):

It's been great. It wasn't even—I have to tell everyone that I have like tons of questions, we never got to them. It was just too interesting. So, thanks. Yeah, it's been great. This has been an amazing talk. I think hopefully it will really help a lot of people—it helped me, I'm telling you. I learned a lot and you're an amazing person and a great communicator. I'm gonna have to call you in a little—help me out in the bedroom, you know? [Laughing]

Nick Delgado ([01:15:34](#)):

That's why I wrote the book. A lot of guys are suffering in silence.

Kent Holtorf ([01:15:40](#)):

So, where do people get that book?

Nick Delgado ([01:15:41](#)):

They can go to Amazon and please do a review. It's available at amazon.com, just type in Books by Dr. Nick Delgado. Nick Delgado, Mastering Love, Sex and Intimacy. My newest book release is Blood Doesn't Lie. That's a fantastic book to deal with—

Kent Holtorf ([01:15:59](#)):

I want to say, he had to change the damn title because he's telling the truth in that book. So, prolific writer, prolific communicator, just pretty much prolific in bed. [Laughing] Sex God. I don't know, whatever you want to call—but, yeah.

Nick Delgado ([01:16:18](#)):

Yeah, please visit docnutrients.com because we have affiliates for doctors and practitioners who want to get quality products that have been tested—tried and tested over the last 20 years. I think they'll be excited to share them. We have a number of doctors now providing these products for their patients, herbal interventions, natural, that help to augment their hormonal interventions. We've worked out protocols that are very effective and a number of videos and playlists and education. We've even started our own platform beyond YouTube, which we do have an extensive library on YouTube, but our new platform because of—shall I say some things I talk about can't be revealed.

Kent Holtorf ([01:16:57](#)):

It's called the truth.

Nick Delgado ([01:16:59](#)):

Yeah, it's called the truth. So we're excited and I'm here to help people. I know the truth will prevail and that I'm confident about.

Kent Holtorf ([01:17:09](#)):

I don't know, man, I'm—

Nick Delgado ([01:17:09](#)):

Not everyone will get it, but your listeners will.

Kent Holtorf ([01:17:13](#)):

I'm scared. I'm scared.

Nick Delgado ([01:17:14](#)):

I am too, but we're gonna be strong because our hormones are optimized.

Kent Holtorf ([01:17:18](#)):

[Laughing]

Nick Delgado ([01:17:18](#)):

We'll see through this.

Kent Holtorf ([01:17:21](#)):

If we're having great sex, yeah.

Nick Delgado ([01:17:23](#)):

We're gonna be having the time of our life. Maybe those who don't get involved may not get the benefits that we've learned over, what, 4 decades? I know you've been practicing and doing a great job and there's so much to share and you're doing such novel work with your clinic and your group and your products that are becoming available. I'm excited to introduce them to my clients. So, it's a fun time.

Kent Holtorf ([01:17:48](#)):

And likewise too, because I love your stuff because it's not just thrown out there like what everyone else is doing. It's research, just do stuff. It's all very scientific and nothing—you spend the extra money to make sure everything is what it is. And I love your products. You know? I think I got some right here.

Nick Delgado ([01:18:13](#)):

Very cool.

Kent Holtorf ([01:18:13](#)):

Well, thank you. I had a great time and learned a lot and I'll see if I can put it into practice. I don't know. It may take me a little couple of consults with you.

Nick Delgado ([01:18:27](#)):

Yeah.

Kent Holtorf ([01:18:29](#)):

It sounds good. Again, thank you. It was one of the funnest interviews. I think everyone should learn a lot and have a lot to think about, you know? Like, "Hey, how can I make my life better?" I think you've put a pathway together that people can use to improve their sex life, which is a huge part—no matter how much people want to say—of how happy you are.

Nick Delgado ([01:18:57](#)):

Yes, absolutely. You said it quite well. We also have a free book available at nickdelgado.com. If they just scroll there, they'll see Immune Rejuvenation, the book that was banned. They can get a free copy of that. Just leave their name, email, and phone number and we'll shoot them a copy, a PDF, an ebook, and they can compare the new version of Blood Doesn't Lie, which has been written to withstand the test of time. Great information that book that Amazon finally was forced to accept. But the other book, I have it there available to your viewers as well, so they can get that.

Kent Holtorf ([01:19:33](#)):

I'm gonna get them both, I'm gonna look at them. That's awesome.

New Speaker ([01:19:35](#)):

Awesome. Thank you.

Kent Holtorf ([01:19:36](#)):

Well, thank you my friend. I had a great time and learned a lot. I just want to say thank you for agreeing to come on our summit. I'll be calling you. [Laughing]

Nick Delgado ([01:19:50](#)):

Looking forward to it and looking forward to assisting your incredible audience and health professionals who are sincere and interested in taking not only their health to the next level, but helping their clients and their patients to be absolutely at their absolute best. I mean, the time has come, we have the information, the knowledge, and we can work around those issues. You and I have dodged a few bullets. We figured out how to handle the legalities and the issues. We stand together and chart properly and denote those who will benefit and people will do well.

Kent Holtorf ([01:20:25](#)):

All I have to say is keep up the great work.

Nick Delgado ([01:20:29](#)):

Likewise. Thank you so much.

Kent Holtorf ([01:20:31](#)):

Alright my friend. Thank you.

Nick Delgado ([01:20:32](#)):

Bye bye.

Kent Holtorf ([01:20:33](#)):

Bye bye.