

How to Make a Living (& A Life) As a Functional Medicine Expert

Dr. Kent Holtorf interviewing
Regan Archibald, LAc, Dipl OM



Dr. Kent Holtorf:

Hello, it's Dr. Kent Holtorf with another episode of the Peptide Summit 2.0, and today we'll be talking to Regan Archibald. Pretty amazing guy, functional medicine practitioner and entrepreneur. So we're talking about really, how to not only practice great functional medicine, but also how to make money and enjoy doing it. So thank you Regan, you're become one of my heroes, and you have so many skills that I basically suck at. So I really appreciate it.

Regan Archibald:

[crosstalk 00:00:45] oh, you're awesome. Well I don't know about that, but I really am honored to be here and you've been a hero of mine for years. And actually one of the first times we met was at one of my Go Wellness events, when we looked at the material that one of the presenters was teaching on peptides. And you said, "Hey, that's my material." and I said, "Well, I'm kicking that speaker off, and you teach it." And I just really appreciate your leadership in that moment. I said, "This guy's a real... He's just a gem, he's a leader in our community." And so I really thank you for putting on this Peptide Summit.

Dr. Kent Holtorf:

Oh, thank you. Yeah, it was interesting. I'm like, "Wait a minute, these are my slides. And at least take some effort to change something."

Regan Archibald:

Right.

Dr. Kent Holtorf:

I remember you called and you said, "I suggest you don't come in."

Regan Archibald:

Yeah, he's never been back since then. That was just something where you got to draw the line, right? And so it was perfect. And then you just inspired everybody, and we just realized we did not know all the things that you taught about peptides. And it's still to this day, you're just a leader in the field, and it's been incredible to learn [crosstalk 00:01:59]

Dr. Kent Holtorf:

Oh thank you, that's very kind of you. It was like a [inaudible 00:02:01]. Everything is like a [inaudible 00:02:04]. But yeah, so about Regan, he graduated with a Master of Science and Traditional Chinese Medicine at Medical College of Hawaii. Not a bad place to be.

Regan Archibald:

No.

Dr. Kent Holtorf:

And went on to create an award-winning clinic, the East West Health in 2004. He is founding member of the Anodyne Pain and Wellness Solutions, and is on the clinical advisory board there. He enjoys working with his six clinical locations throughout Utah. I didn't know you had that many clinics.

Regan Archibald:

[inaudible 00:02:36].

Dr. Kent Holtorf:

And managing all those clinics, which is one of his skills that... We had nine franchises, 22 centers, it is tough. It is hard. [inaudible 00:02:51], excuse me, Utah, Hawaii, and New Mexico. His teams have successfully integrated traditional Eastern medicine and peptide therapy with

regenerative [inaudible 00:03:01] functional medicine. He's also founder of the GO Wellness, which is a training and mentorship program which I'm very impressed with, for some of the most transformative doctors in the health care field. He loves mentoring, learning from, and coaching health care entrepreneurs. He was the first ever American certified in Seitai Shinpo.

Regan Archibald:

Seitai. Seitai [crosstalk 00:03:29] close, it was close.

Dr. Kent Holtorf:

Oh man, I listened to it on Google I don't know how many times. I screwed it up. A system of acupuncture that balances the immune system, everything is immune system, and realigns spinal imbalances. He has also done several advanced postgraduate training in functional medicine, he knows so much about so much. And I know your education is just huge beyond this with peptide therapy, regenerative medicine. And he is really able to see the big picture and tell you how to implement it into your practice, which I think is the big thing. Is that as doctors we go to these lectures, and these conferences, and it's theoretical, they're going to say this [inaudible 00:04:25]. "Okay, that's great I know about it, but how the hell do I do it?"

Regan Archibald:

Right.

Dr. Kent Holtorf:

And I think that is the biggest hurdle for so many doctors, and he will show you how to do it. And he's very cool to work with, by the way. He's also done advanced training, postgraduate training in functional medicine, [inaudible 00:04:50] we talked about that. The rest [inaudible 00:04:51] career, he's been a prolific writer, speaker, teacher, instructor. He's inspired thousands of health care providers [inaudible 00:04:59] about creating new health care for the future. And we'll talk about that, where are we headed? I'm a little worried about what the heck is going on, compounding pharmacies, is there going to be anything left? So a lot of things, and telemedicine, and who knows.

Regan Archibald:

[inaudible 00:05:20].

Dr. Kent Holtorf:

This country is changing, and medicine is changing. Whether for better or worse, well, we'll ask the expert. He's the author of seven books, I have seven books 90% completed, I can never complete them. And has created 18 training programs, and I have yeah, about 18 training programs 80% done. To help practitioners transform their clinic results and revitalize [inaudible 00:05:51] purpose. Including The Peptide Advantage, which we'll be offering with this summit, and The Healthcare Entrepreneur and Functional Medicine training, and it's just well worth it.

Dr. Kent Holtorf:

It's just myself, it's just so many doctors are just scrambling, and it gives you [inaudible 00:06:17] feel of control. And things are so much smoother, and you don't have all those constant things that are not important but, oh, need to get done. And you can focus on what you do well, and basically your stupid human [inaudible 00:06:36]. Where it's like, "Hey, I do this really well. I can focus on that, I don't have to deal with the stuff that I don't like to do." And he'll show you how to do that. He shares his knowledge on podcasts, Your Healthy Self and Go Wellness Radio. His purpose is to make peptides and collaborative medicine, which I think more and more is key. Where I think everyone was on an island before, and I think we've learned that we need to stick together. It's not competitors, it's more collaborators.

Regan Archibald:

[inaudible 00:07:09].

Dr. Kent Holtorf:

And I think that's such a better way to look at things. Mainstream medicine is going to hell, basically. And so basically [inaudible 00:07:21] forging leadership in the health care field, and the pain and chronic illness. Everyone is sick, everyone is fricking sick now. You go to a party and I can't tell you how many people always come up and go, "Oh my God, I'm so sick. My doctor says this." And then you say, "Well, how about this?" "Well, my doctor says I don't have that." "Well, okay, how is that working for you?"

Regan Archibald:

Right, mm-hmm (affirmative).

Dr. Kent Holtorf:

And the health care system is broken, and it's a totally separate system. So he'll show you how to treat patients, and do it where you actually won't lose your mind. And patients will be happier, you'll be happier. You'll have more actually free time, and not kill yourself, and practice better medicine. And he and his team have weekly live practice accelerator coaching calls that can be [inaudible 00:08:19] at gowellness.com/pac. I'm in the small bus group, we're very dysfunctional, I have to wear a helmet, and he tries to teach me.

Regan Archibald:

That was great. Well, thanks for the introduction.

Dr. Kent Holtorf:

So I'm very resistant to change.

Regan Archibald:
We'll get you there.

Dr. Kent Holtorf:

No, sounds good. But no, I'm a big fan, and I think that what you do is so missing in medical education. We always think about, "Doctors are terrible business people, terrible investors." I keep saying, "Wait, do I buy high and sell low? Or do I..." and I get confused. But how to really, it's interesting, and value your services. And I've learned that I always go, "Oh my gosh." through the years, like, "I don't know, I think I [inaudible 00:09:27] have to raise my prices." Then I'm like, "Wait, I'm getting more patients. Wait a minute, I raise it again and I'm getting more patients." And then if we can just offer some decent customer service we'll probably get more patients. And I know that we'd lost some upper-end patients because we weren't expensive enough. They said, "Oh, he can't be good if he's only charging that." You know?

Regan Archibald:

[inaudible 00:09:50].

Dr. Kent Holtorf:

And packages are huge, and that's been a struggle for us. So we're going to bring Regan in, and I said, "We need the full service muscle package." where he's going to transform everything.

Regan Archibald:

[crosstalk 00:10:08]

Dr. Kent Holtorf:

But again, thank you for being on and taking the time, I know you're a busy
guy. Regan Archibald:

You got it, really good to be here. And you mentioned something in the intro that I think is really important, which is the collaborative medicine approach. I don't think what we're talking about today, it's not alternative medicine. Obviously it's not mainstream medicine, it's not complementary, it's kind of a backhanded insult. What we need to do as health care entrepreneurs, is we need to start standing up and actually... We have all these movements going on, Black Lives Matter and all these other things. I'm like, "Well, actually I've found that there is discrimination in health care."

Dr. Kent Holtorf:

[crosstalk 00:10:49]

Regan Archibald:

And if you have an opposing opinion you'll get censored these days, or if you have a different degree, or a different license. I tell people, "I'm no respecter of credentials, everybody has got something to bring to the table." And that's where my goal is to make collaborative medicine mainstream medicine, and to actually give people a portal, and an opportunity to transform their health.

Otherwise we're all going to be stuck. It's not just the pandemic right now, there's going to be multiple, and there's other diseases that need to be addressed. And so today hopefully I can share with some of your listeners, if they go back and say, "What's the biggest challenge in your practice?" I hope that I can open up a portal. So that by the end of this conversation

they'll start to have much more clarity on how to build out a practice that can actually free more people from chronic disease. And free them so that they can enjoy their life again, and not feel like they're under the thumb of mainstream medicine.

Dr. Kent Holtorf:

Yeah, and I think it's a couple things. I mean one, so many people are sick

now. Regan Archibald:

[crosstalk 00:11:52]

Dr. Kent Holtorf:

And it's people are getting sicker, and the health care model is terrible. And doctors are miserable, patients are getting just terrible care. It's like [inaudible 00:12:05] family practice they don't do anything. They say, "Okay, go to the cardiologist, go to the neurologist, go to the gastroenterologist." People aren't bringing all this together, and this is what the, whatever you want to call it. I hate that, when people say, "What do you do?" I don't know what to tell them, I say, "I'm a quack." And they go, "Whoa, why do you say [inaudible 00:12:23]?" Is that I really think if you take two months you can be a better specialist than the care people are getting from their specialist.

Dr. Kent Holtorf:

Okay, unless it's a brain surgeon, or surgery, or something that. But they're doing the same thing for 20 years. And they don't change, they don't read medical literature. In fact [inaudible 00:12:49] medicine show that doctors are practicing 10 [inaudible 00:12:53] 20 years behind with [inaudible 00:12:54] the medical literature. It takes on average 17 years for a proven new concept to be accepted into mainstream medicine, unless it's a new drug and you have a sales team. And it's interesting. So it's [inaudible 00:13:09] alternative, no, I just think we're better medicine. You know?

Regan Archibald:

Yeah, it's actually [inaudible 00:13:16] we take a scientific approach. We say, "Okay, this works,

that doesn't. This works, that doesn't." [inaudible 00:13:22] we have hypothesis, and we put together theories, and we collaborate as a group, and we put together a treatment strategy for patients. And then that really gives us the runway to help solve chronic diseases. And that's what I see where doctors struggle the most, is they try to incorporate peptides for example.

Regan Archibald:

When you spoke at my event a couple years ago, maybe it's three years ago. Everybody had like, "Whoa. BPC-157, Thymosin Beta 4, Epitalon, what's this guy talking about?" And now, fast forward, I'd say the biggest challenge that doctors have is taking these new models of medicine. And I think peptides are the future that will revolutionize medicine if we can keep on this trajectory. I mean, I know we have some regulatory boards that we have to [inaudible 00:14:12]. But what I see is doctors struggle because they want to use a peptide like they use a drug. "Okay, you've got all the symptoms, so we've classified that. Oh, it looks you've got Crohn's disease, and you've got leaky gut, let's give you some BPC-157." Instead of like, "Let's actually get people on a year-long program where they're using peptides to optimize their health. And we're not thinking of peptides to reverse disease."

Regan Archibald:

Yes, peptides will reverse disease, but when you can start thinking outside of that small, narrow box of diagnosis, treatment, then you start opening your eyes to a whole nother world that can exist. And then when you put a program together, that can free doctors up where they have enough time to work with patients versus, "Let's try Thymosin alpha 1 for a couple of months, and then we're going to rerun your blood labs and see what your lymphocytes look like." Yeah, I

Dr. Kent Holtorf:

That's interesting, and it's also changing the patient's expectations [inaudible 00:15:13] what's really needed.

Regan Archibald:

There we go.

Dr. Kent Holtorf:

It's, "Yeah, you don't need this treatment for one month." "Oh, I didn't notice anything." Okay, stop it. You know?

Regan Archibald:

Right, yeah.

Dr. Kent Holtorf:

Where it's, "You need to stick with it and be a partner in health." You

know? Regan Archibald:

Yeah. Yeah, and that's the brilliant thing about it. Is when you, in your programs, I'm going to ask everyone to look at what you're offering your patients right now. And if you're offering them a fee-per-service model, you are stuck in the Dark Ages of conventional medicine. If you say, "Hey, how much is my office visit? You got to pay me every time you come to see me. Now you owe me for the peptide, now you owe me for the herbs that I put you on. Now you owe me for this lab that I ran you on heavy metals." What you want to do is you want to take all those services, and create a whole unique process that you take your patient through. They will love it, you're going to get better results. You're going to feel more freed up, because you will now have some runway.

Regan Archibald:

If you're going on a long flight, you're going to have a big old plane. And if you don't have a long runway, if you're having a fee-per-service model, that's where doctors bury themselves. They get burned out, they're always selling their patients on the next thing. Their patients expect a quick fix, and we're practicing this functional, this new type of medicine. But so many of us have taken the same mindset into this new medicine that we carried with us from the old version of medicine. So the new version is memberships, it's putting programs together, it's having a plan that patients will stick to.

Dr. Kent Holtorf:

And I read a study where it's actually patients, or really people in general. They are more stressed about making a decision than after making a decision, even if it's the bad decision.

Regan Archibald:

Right.

Dr. Kent Holtorf:

And I think about, so we send the patient to the front desk and we'll have 10 things, or who knows how many. They got to say, "Do I want this? Do I... Do I want to come back? I don't know if I can afford this every month. [inaudible 00:17:20] month." And they got to just decide every time, and that's so stressful. They just go, "I can't do it." And then they talk to their husband, [inaudible 00:17:28] go, "[inaudible 00:17:28], you spent what?" Instead of they made a decision, "Look, I am going to commit to a year." They're more compliant, they're happier, the outcomes are better. The doctor is happier that he doesn't have to talk about prices every visit and sound like a used car salesman. And it's a win, win, win. You know?

Regan Archibald:

Yeah. It's a fun way to practice, and so I think each one of you can look at the way that your business is operating right now. And the crazy thing we forget is we get held hostage by our own policies, by our own ideas. And so what I'd encourage everyone to do is break free and make a decision today. Because I think it was Teddy Roosevelt, he said, "The best decision you can make is the right one. The second best decision you can make is the wrong one. The worst decision you can make is no decision."

Dr. Kent Holtorf:

I like that, I like that.

Regan Archibald:

So, you're right. And so if we all just decide, "Hey, let's practice medicine. Let's elevate the standard of care a little more. Let's be The Ritz-Carlton, let's be The Four Seasons. We don't need any more Motel 6s around, I can tell you that does not get the results. And [crosstalk 00:18:45]-

Dr. Kent Holtorf:

There's a lot of Motel 6s and yeah, that's standard medicine. And if you break an arm or something it's good, but if you have any complex illness, oh forget it.

Regan Archibald:

Right. Yeah, and where's all the spending in our country? I mean, we're in this \$17 trillion infrastructure with health care, it's insane. So it's like, "Well, let's figure out where that money is

going." Well, it's going to treat chronic disease, but we're using acute care to treat a chronic condition. And then I see too many doctors bringing that same model. They want to practice some holistic medicine, they believe in it, but they try to bring that same mindset into a brand new version of medicine. But really, the beautiful thing about it is you don't have to. You can actually create the rules, you can actually formulate your programs however you want. So the way

we formulate ours is we put in all the peptides. So we put in phase one, phase two, phase three, there's an allowance for each phase. We have an herb and supplement bank, because I'm a Chinese herbalist, so I love using the herbs with the peptides and finding

Dr. Kent Holtorf:

Oh yeah, they're very synergistic.

Regan Archibald:

Very synergistic, it's gorgeous. I mean, you can use something like cordyceps, for example. And cordyceps is, it activates the AMPK pathway, similar to MOTS-c, right? So you can see all these ways that you maximize that. Oh, there you go. Nice. Yeah, I mean I think we forget that there are some of these ancient therapies that go so well with the modern medicine. But I do see that if we don't take our patients through, and if you don't give them a clear roadmap, they're going to be confused. And a confused patient, they go into decision-making fatigue, because their brain [crosstalk 00:20:36]

Dr. Kent Holtorf:

That's our biggest problem is, and because we'll go through the peptides, and it's like, "ABC equals XYZ, da, da, da." It's like Greek, right?

Regan Archibald:

[inaudible 00:20:48]

Dr. Kent Holtorf:

I'm like, "Well, what's the problem?" But, yeah, it's totally true. I just want to also mention about degrees and things. And I agree that degree doesn't matter, it's what you do after.

Regan Archibald:

Very [inaudible 00:21:05].

Dr. Kent Holtorf:

And it's people continually learn. I mean we have patients that are so fricking intelligent, they know more than every doctor they go to, right? And have no degree. And then you have the super specialist that's still practicing the same damn thing, won't read a journal article. And just a quick story, so I wrote a article on HPA axis dysfunction and chronic fatigue syndrome, published it. And I gave to a patient, and he was feeling so much better, he goes, "I'm going to show my endocrinologist." And it wasn't out yet, and he gives it to the endocrinologist and he goes, "Oh, I read this. This is a terrible paper." He goes, "No you haven't, it isn't out yet." And he threw it in the trash, he goes, "I don't need to read it."

Regan Archibald:

Wow, yeah.

Dr. Kent Holtorf:

Yeah, I mean that's typical.

Regan Archibald:

Yeah, and so as you know in the community that I've created with Go Wellness, all we're looking for is open-minded doctors. We're always intellectually seeking, no one's got all the answers. But I think if we take the right mindset with this thing, and have the right context around health care, we can be part of the solutions. Because it's, I believe Abraham Lincoln, and I've also heard Peter Diamandis say this but, "The best way to predict your future is to create it yourself." And so every day I ask myself, "Okay-"

Dr. Kent Holtorf:

[crosstalk 00:22:30] lotto tickets aren't going to do it for me? [inaudible 00:22:34] when I find I'm like, "I'm sick of this." I buy more lotto tickets.

Regan Archibald:

Yeah, "Here's your key to success, just scratch it. Scratch [inaudible 00:22:42], keep your fingers crossed and hopefully it goes well."

Dr. Kent Holtorf:

[inaudible 00:22:46]

Regan Archibald:

That's what a lot of us are doing with our health, and unfortunately we do that with our practices too. So, we are like you, we see the worst of the worst. We have patients who've been to all the specialists, and they come and they say, "Wow, in the 45 minutes I spent with you, you shared with me more things than my specialist has in the last 10 years I've been working with them. What is this?" And it doesn't take any special skills, it doesn't require you to go back to school for another 10 years. You don't have to go and do a bunch of crazy training. All it takes is an open mind and actually looking at things from a patient's perspective.

Regan Archibald:

And so when a patient, when they come into your unique community, they realize there's something different going on, and they can feel it. And then when you have a novel medicine that's easy to explain. I've never found anything that is as transformative as peptide therapy, because of the way that it works with the body, it's a bypass. I've thrown patients on herbs, and done all the functional medicine. Heavy metal chelation, the NAD IVs, I mean everything. And then at the end of the day we're like, "We're still not getting them there." And then we put them on a peptide program and boom, within months.

Regan Archibald:

I just talked to one of my diabetic patients, well formerly diabetic. And we took her through a six month peptide program, she'd already been through a 12 month functional medicine program. We got her hemoglobin A1c down, she's still on the same amount of medication, but she got it manageable. Then I said, "That's not good enough. Managing a disease is not a win for me, it's not the result." We put her on our peptide program, and she literally got off insulin. She's no longer insulin dependent, she's on metformin. She was wasting away, so she's been able to put

on five pounds of muscle, she's got her fitness back, the brain fog is cleared up. She doesn't have the emotional drops, and that would not have been possible if we didn't put her on a process.

Dr. Kent Holtorf:

So total life changing.

Regan Archibald:

[crosstalk 00:24:48]

Dr. Kent Holtorf:

And it's interesting [inaudible 00:24:49], with BPC-157 it's very homeostatic. If you have low blood pressure it raises it, if you're high it lowers it. [inaudible 00:24:59] or if you're hypercoagulable it's less, if you can't coagulate it goes up. And yeah, it's like smart meds type thing, and so safe. You can take 1000 times a dose, try that with Tylenol or water even, you're dead.

Regan Archibald:

Right.

Dr. Kent Holtorf:

[crosstalk 00:25:20]

Regan Archibald:

Yeah, the lethal dose on peptides it's like, man I don't [crosstalk 00:25:23]-

Dr. Kent Holtorf:

They can't find it.

Regan Archibald:

It just doesn't exist. And you can go and buy vitamin C, and you can kill yourself from

dehydration from vitamin C much quicker than you could ever injure yourself or your [crosstalk 00:25:35]-

Dr. Kent Holtorf:

Yeah, and that's probably one of the safest things around.

Regan Archibald:

Exactly.

Dr. Kent Holtorf:

[crosstalk 00:25:38] so what do you see in 2021, or what were the challenges in 2020 versus 2021 that you see, the big differences?

Regan Archibald:

I think the biggest thing that hopefully all of us got out of 2020 is we were able to have five years of progress occur in a matter of six months. We put [inaudible 00:26:02] practice that I've always half-assed done virtual care. And what I found in 2020 is I said, "Holy smokes, people are now willing to push a button. They're willing to watch a seminar." So we decreased our marketing expenses by 90% and increased our results, we doubled our results. So that's pretty phenomenal. When everyone else was retreating, I've never worked so hard in my life as I did in 2020. But it was the biggest learning experience for me, because I realized that number one I had to get my team confident. And so we did stem cell IVs, we did Thymosin alpha 1. We have unlimited amounts of herbal supplies so everyone felt safe, so that we didn't shut down. We said, "We're going to help the community here."

Dr. Kent Holtorf:

Oh, but you certainly can't say it. You can't say, "Hey, this is going to help."

Regan Archibald:

[crosstalk 00:26:55]

Dr. Kent Holtorf:

Yeah, we put up a article on vitamin C, vitamin D, zinc, flavonoid, for COVID with 22 references. 24 hours later FTC, "False, fake news." Like, "What?" take it down.

Regan Archibald:

[crosstalk 00:27:17] I've gotten two letters this year as well.

Dr. Kent Holtorf:

[crosstalk 00:27:20]

Regan Archibald:

But I am working with the health department here in Utah, and I'm saying, "Look, we have a large subset of the population who does not believe in vaccines, whether it's religious reasons or for other reasons. But our goal is to keep the community safe." So I've been in these roundtable discussions and they are now considering vitamin D testing, so you could do a rapid vitamin D test for five bucks.

Dr. Kent Holtorf:

It's like, "Oh my God, so [inaudible 00:27:48]. They're like [crosstalk 00:27:49]

hospitals. Regan Archibald:

Yeah, vitamin D. [inaudible 00:27:52].

Dr. Kent Holtorf:

It's like even the study, people on a ventilator, they gave them vitamin D, 5% mortality. Didn't give it, 50%. "Oh, I don't know if we should give that." Are you kidding me?

Regan Archibald:

Right. Well, the study out of Spain was the most compelling, where it was, I think it was like 300 plus patients. And they all were tested for vitamin D, they had below 30, most of them were in the teens in their vitamin D levels. Half the group, about 150 got vitamin D IVs. Within five days they

were all discharged from the hospital, minus about two of them. And then the other half stayed in the ICU, some of them died, they ended up on ventilators. I mean it was just like, is there some common sense? And that's what I'm trying to bring to the table, not just to health care [crosstalk 00:28:37]

Dr. Kent Holtorf:

Is it common sense or corruption?

Regan Archibald:

Yeah, and I can't speak on the corruption side, because I mean we'd just be throwing mud, and I wouldn't know if it's factual or not. But I can tell you that the common sense is absolutely lacking. I grew up on a farm in Idaho, we played in the mud, the crap. We were exposed to all kinds of crazy bacteria, viruses every single day, that's what we need. Now our whole trajectory is, "Let's spray anything we possibly can, and let's aerosol it out. Let's put masks over our face, let's not have any social interaction." It's just yeah, we're in a pandemic and this virus has some teeth, but I think it's probably some of the ways that we set up our health before the coronavirus ever hit that has actually been the reason why we're in this pandemic.

Dr. Kent Holtorf:

Yeah. I have a little stronger opinions on it, which I'll leave for personal conversation. Regan Archibald:

We don't want this taken down, so [crosstalk 00:29:45]

Dr. Kent Holtorf:

That's it. Wait, there's some black helicopters coming. In your 17 year career, what's surprised you the most? What's been the epiphany moment?

Regan Archibald:

I think one of the defining moments that I had is as an acupuncturist and a Chinese medical practitioner, I always worked with the neurologists and medical doctors. And I started integrating and hiring them early in my career, but the big epiphany that I had, is I remember coming home

and my kids were already in bed. My daughter was three and my son was one. My wife at the time hated me, she just was like, "All you think about is work."

Dr. Kent Holtorf:

[inaudible 00:30:34] like, "Whoa."

Regan Archibald:

Yeah, I mean well, it was true. And I don't blame her, because I was working literally, I was with patients, I was treating 200 patients a week by myself. I had an administrative person, and I had just a big responsibility, I had a six month wait list. I was really good as a practitioner, I really know how to connect with people. And I know it's a unique ability that I've got, but I couldn't balance my personal life.

Dr. Kent Holtorf:

Yeah, so it's a passion, which is good, but also you need balance.

Regan Archibald:

You need balance, and I'm fire.

Dr. Kent Holtorf:

I'm like, "What's that?" Yeah.

Regan Archibald:

Yeah. On the five elements I'm 40% fire, so I burn things up, and I burned myself up. It took a divorce and this breaking moment where I realized, "I need to start doing things differently." And so it was that night when I just started sobbing, I just had the realization that, "What are you doing with your life?" Because I could only help so many people. And I just said, "If I can just help one more person, then I'll be successful. If I just help one more person, then I'll be fulfilling my destiny." And I just had that wake-up call. And so I had a divorce, and I made the decision that night that, "I'm going to do my life different." And so I had the gifts where I could rewrite my whole future, "The best way to predict your future is to create it yourself." I created

Dr. Kent Holtorf:

[inaudible 00:32:07], so you kind of woke up and just felt like, "Okay, this is a new

beginning." Regan Archibald:

That's it, yeah. I had no other choice, I said, "I do not want to live this way." I have an amazing wife right now, I don't want to repeat the mistakes of the past. And so I made it my mission, I said, "I'm going to free myself. I'm going to build a practice that can run with or without me being there, so I can still fulfill my purpose and my destiny. But it's not going to be a Regan show anymore, it's not going to be about me, because I realize there is a lot of ego in that." And so I said, "I had to step back." and it was really painful. Because my Japanese teacher, I ended up leaving the fold of the Seitai Shinpo world. Which I was the leader there, I was the first American certified in that. I went through a whole religions break, and I just restarted my life, and it changed everything for me. This was 11 years ago. So the biggest

Dr. Kent Holtorf:

[crosstalk 00:33:06] if you can let go, right?

Regan Archibald:

That's the hardest thing in life, right?

Dr. Kent Holtorf:

Yeah.

Regan Archibald:

The beautiful thing is when you free yourself up from the past, so I just freed myself up. I said, "Hey Regan, the former version of myself did things a certain way and it got me a certain result. And I don't that result, so I'm going to do things differently." And so I just [crosstalk 00:33:28]-

Dr. Kent Holtorf:

But George Costanza did the opposite.

Regan Archibald:

You could do the opposite too, yeah.

Dr. Kent Holtorf:

[crosstalk 00:33:33]

Regan Archibald:

Yes, but I wanted to create a bigger future, but I wanted more freedom at the end of the day. Dr. Kent Holtorf:

Nice.

Regan Archibald:

That was what I was able to cultivate.

Dr. Kent Holtorf:

How did you from there make that happen? So you said, "Okay, I want to change." but who's your mentor, how do you go about it?

Regan Archibald:

Yeah, well and that's the thing is I took every single training program I could. I hired all the best of the best in the world. I would max out my credit cards, I didn't care what it would cost. I remember being on the phone of one of the sales reps, I said, "I need the coach, I need the mentorship." And [inaudible 00:34:12] was my first mentor in the group, and it was literally I was like, "Oh, we maxed out that card. Let me get this card." then I got a third card. But I took everything that I was taught by my mentors and I implemented. I was a very good student, I

said, "The only way I can free myself up is if I learn to put as much passion into my business as I do my patients, and then it's going to be a win-win." And so that's what I did, and I

Dr. Kent Holtorf:

You know what? I'm just thinking. That's so profound, because I think what changed my life, I was sick and this got me into this alternative which I would never have done. I went to every conference, had no money [inaudible 00:34:53] just, "I can't afford it, but okay I just... Whatever. [inaudible 00:34:58] I got a blank check, here you go, whatever." And no money in the bank account, but just went to every damn conference around the world. And it was the best thing ever, and I think anyone who invests in themselves, it's such a great investment.

Regan Archibald:

Man. Kent, would you say there's any other thing that you'd rather invest in than your improvement as a human being? [crosstalk 00:35:26]

Dr. Kent Holtorf:

No, and if you could look at my investment history, I could retire if I didn't invest in other people. Regan Archibald:

[crosstalk 00:35:33]

Dr. Kent Holtorf:

I'm serious.

Regan Archibald:

Yeah, no, I know what you're saying, yes.

Dr. Kent Holtorf:

It's basically yeah, a joke. But no, I mean, it is my investment skills are so bad. But no, investing in yourself, it just always pays off.

Regan Archibald:

It's crazy, isn't it?

Dr. Kent Holtorf:

Yeah. And the more you do, the more you get back.

Regan Archibald:

Right.

Dr. Kent Holtorf:

And it's amazing, I think of through the years I've had so many lessons. A lot of them are very expensive lessons, but I can tell someone else, I can tell you what not to do. You know?

Regan Archibald:

Yeah.

Dr. Kent Holtorf:

But it's worth it.

Regan Archibald:

And that's how we progress. And so once I became successful and I realized, "Oh wow, I have a practice." I remember in 2013, eight years ago, I went on a trip to Ireland. And I was gone for almost two weeks, and I said, "Don't contact me, you guys got it." And I came back and to see how my experiment worked out, and they performed better with me gone. And that's when I realized, "Okay, there's some magic here, and I got to start sharing this with other people." So that's part of what I do, I'm more interested in the science and the medicine, I love that. But I'm really fascinated with finding better ways to deliver and administer health care as a team
[crosstalk 00:37:00]

Dr. Kent Holtorf:

Yeah, and because you can only treat so many people. How many people can you treat yourself? Regan Archibald:

Exactly, yeah.

Dr. Kent Holtorf:

But you're showing doctors how to treat patients, and be happy, and be able to do it. You should go on the site Sermo, I don't know if you've ever heard that.

Regan Archibald:

Never heard of it.

Dr. Kent Holtorf:

You want to [crosstalk 00:37:19] the most miserable doctors in the world. There's a whole thing on they're all feel stuck, but they all think there's no way out, right?

Regan Archibald:

Yeah.

Dr. Kent Holtorf:

And so I used to post and say, "Well, you got to learn something really well, and get out of the insurance." "Oh, that's impossible." It's like my brother who's, I call him anti Tony Robbins. No matter what it is, he'll give you a thousand reasons why he can't do it. You know?

Regan Archibald:

[inaudible 00:37:49].

Dr. Kent Holtorf:
And the misery is palpable in medicine.

Regan Archibald:

Yeah. Well, and I think it's just in our society right now. I mean, our brains are hardwired 17 times more likely to listen to negativity than positivity. And so I really, I work on my brain every day. I listen to isochronic beats, binaural beats, I try to be very sensitive to what's going on in my brain. Because I realize whether I it or not, my thoughts are impacting everything in my life.

Dr. Kent Holtorf:

Oh, totally.

Regan Archibald:

Whether it comes out of my mouth or not, and I've seen that in so many cases. And I know some of you guys are probably like, "Oh Regan, come on." but it actually, if you just try it, just for a week. I have this little exercise, I call it the mindset morning. And the mindset morning is just where you wake up, first five minutes of the day you breathe, you just clear your head. Timer goes off, second five minutes of the day you're writing down your goals, your affirmations. "What am I going to do today, who am I going to serve?" And then the third five minutes you just visualize that, and you just visualize what you want to feel like at the end of your day.

Regan Archibald:

Because emotions are powerful. I think we forget, especially as men. We think, "Oh, I don't need to face my emotions." but that's the most powerful part of you running a business. Is can you use your emotions to push the whole thing forward? Can you actually use your emotions to attract the right clients in, the right patients? Can you use your emotions to free yourself up so that you've [crosstalk 00:39:24]

Dr. Kent Holtorf:

[crosstalk 00:39:24] the energy [inaudible 00:39:25] attract or, you know?

Regan Archibald:

That's it.

Dr. Kent Holtorf:

And when I was sick and just feeling bad, it's like I didn't know I did this. My girlfriend said, "The last three years you have woken up and just cussed. Like just, 'Fuck, fuck.'" And I'm like, "I have been?" You know?

Regan Archibald:

I know.

Dr. Kent Holtorf:

That's not a good way to wake up, it's sets the tone of the day.

Regan Archibald:

But I mean, if you look at everything you've accomplished, Dr. Holtorf, I mean so few people have accomplished what you have. And did you ever imagine you'd have done all that you've done in your profession if you look back 10, 20 years ago?

Dr. Kent Holtorf:

Well, I was voted to basically over-under lifespan about 24, so it's all gravy now. But I wouldn't live the way I felt, and that was it. And you think you want all this money, and do this, and just wait until you get a chronic illness. And you go from doctor to doctor, and I'm a physician [inaudible 00:40:32] that don't believe them, are sarcastic. And doctors can be so mean, and again, there's exceptions, but as a whole I think the most unempathetic people. I guess, sorry we're talking about... Cut this out. No, but this is the group of doctors that actually care.

Regan Archibald:

Right.

Dr. Kent Holtorf:

You know?

Regan Archibald:

Yeah.

Dr. Kent Holtorf:

And we're the ones that are criticized as, "Oh, we're not evidence based, we da, da, da." We're the ones staying up till 4:00 in the morning reading the journals, trying to help the sickest of the sick.

Because they take the easy road out and don't believe in that illness, because they don't want to be a bad person. It's easier to say, "We don't believe it." And the less a doctor knows the more adamant they're right. So the doctors on this forum, I congratulate you. My thoughts and prayers go out to you for watching this, because you want to help your patients. Where the standard physicians, one I don't blame, because they can't do it anyways. Their group, their hospital won't let them do it, so why learn it?

Regan Archibald:

[inaudible 00:41:43]

Dr. Kent Holtorf:

But with a different model it's so nice. You can be a doctor, and go read studies, and then use that. "Wow, I just learned this, I can use that. Oh my God, my patient has this." You know?

Regan Archibald:

Yeah.

Dr. Kent Holtorf:

Yet try that in a big hospital group, you can't do that.

Regan Archibald:

Mm-mm (negative), no, your hands are tied. And so one of the beautiful things, I mean I'm really excited about our program. And giving people the tools so that they can at least start getting some of these peptide programs implemented. I think that's going to change it. Imagine if we could take our program and put it into hospital systems. And we just said, "Okay, here." One of my patients sits on the board of one of the major hospitals here. And he keeps saying, "Regan, I want to get you in, and I want to put your business model in the hospital." So I'm trying to get inside the system so we can transform it, the whole thing.

Dr. Kent Holtorf:

Well, interesting story, I'll try to be quick. But we had 22 centers [inaudible 00:42:48] centers, and that was sold. And then we had nine franchises, but our first franchise was bought by a hospital that was an hour north of Kansas City.

Regan Archibald:

Wow.

Dr. Kent Holtorf:

And this one guy told me, he goes, "They will never let you in there." I'm like, "No, they're totally up for it." They tried to do an antiaging clinic for 10 years, it wasn't working. So we go in, we tell them what the numbers are. They're like, "Yeah, right. Yeah, right. Whatever, just come in." And so we basically had set up the program, and I guess the other doctors got so freaked out. The endocrinologist got 15 calls the first week of, "What's reverse T3." and he goes, "[inaudible 00:43:28]." And all these doctors were just saying, "Oh, they don't practice evidence based medicine, and they're barbaric." And so they call me and, "You got to fly out and show that you're evidence based." I'm like, "Oh, I would love to do that." Which was the wrong way to go.

Regan Archibald:

[inaudible 00:43:48]

Dr. Kent Holtorf:

So I showed that we are evidence based and actually they are not, which really made them

even madder. And so within two minutes a rheumatologist, who was the head of all the specialties, stands up, goes, "I'm not listening to this bullshit." and walks out.

Regan Archibald:

Wow.

Dr. Kent Holtorf:

Oh yeah, then they OB is holding up the Obstetric Society guidelines. I'm like, "Hey, what level of evidence is that? Okay, you have first double-blind placebo-controlled studies and meta-analysis as the highest levels. And then you get down to [inaudible 00:44:31] controlled, and then you have basically anecdotal cases. What's below that is societal guidelines, because [inaudible 00:44:42] shown to be 20 years behind. They're shown to be biased, they're shown to not change. So you're arguing with that, and I just showed you 20 studies that what I'm saying is [inaudible 00:44:53]." So... And they go, "You got to go talk to the CEO, he's so pissed."

Dr. Kent Holtorf:

And so I go up to him, I'm like, "Okay, I'm going to get beat up here." And he goes, "Listen, my wife has been sick for 15 years going to all these specialists and hasn't been better at all. Two visits at your clinic, dramatically better. I will take care of these doctors, don't worry." I'm like, "You won't." I go, "I guarantee it." And they had an emergency staff meeting, and by that time I had flown out. Or actually, I went to this satellite clinic, it was a pediatric clinic, and the doctor was open to it. Like, "Oh, this is cool." Then all of a sudden the nurse says, "Oh, you got [inaudible 00:45:34] emergency call, quick." [inaudible 00:45:35] like, "What?" And it was the OB saying, "Don't talk to him, don't listen."

Regan Archibald:

Wow, conspiring. That's crazy.

Dr. Kent Holtorf:

Yeah. And then so I fly out and then I call, and I go, "How did it go?" and he said, "Well, it was like Frankenstein movie with the pitchforks and torches. And they just said, 'They have to leave!' and it was a threat."

Regan Archibald:

[inaudible 00:46:02]

Dr. Kent Holtorf:

[inaudible 00:46:02], "Oh, they think they're better than us." "Wait, you were just saying we don't practice evidence based medicine, now you're saying, oh, we think we're better than you." You know?

Regan Archibald:

Right, yeah.

Dr. Kent Holtorf:

And I talked to the guy, he goes, "I told you, I grew up there, they won't let you in." But it's interesting.

Regan Archibald:

[crosstalk 00:46:21] it takes a lot of courage. I mean that says a lot about you to stick up for yourself, because you could have said, "Okay, well let me just do things your way and that'll be easier and make things nice." But I think it stands to reason that the more of us that do that, that actually stand up for this medicine, and talk about it. Because there is discrimination that's going on, no matter what you want to call it. But we literally need a movement, and we literally all need to start standing up and saying, "If we really believe in evidence based medicine, I can guarantee you we've got not only evidence based medicine, but we've got the results to show it with millions of patients."

Dr. Kent Holtorf:

Yeah, the problem is Big Pharma owns the world.

Regan Archibald:

They certainly own the political scene [crosstalk 00:47:08] that, but yeah, we've got some things. I think this, once again, requires all of us to be our very best version of ourselves. Because we can

make a big impact, even if it's not on the CNN. We have an underground movement that's going that's very powerful, and so I'm optimistic.

Dr. Kent Holtorf:

[crosstalk 00:47:28] and I worry it's patient driven. And because, yeah, the media doesn't give it any credibility, but the patients see the results.

Regan Archibald:

Yeah, [crosstalk 00:47:43]

Dr. Kent Holtorf:

And that's different. So how do you use peptides in your programs?

Regan Archibald:

So typically what we'll do, and I was mentioning this a little bit earlier, but yeah we will put together different phases of care. And based on what we're treating we'll have specific peptides to get a patient on the right track. We'll have a supplement and herb bank, we use acupuncture, and then we have vitamin IVs, vitamin sticks. They have health coaching, so we have a whole health coaching series that they go through. And then they get some type of, whether it's trigger point injections, acupuncture, regenerative medicine services if they have some musculoskeletal conditions. Those are all part of the plan.

Regan Archibald:

So we package all the services they need, and we bundle it together. And so a patient has one decision to make, "Do you want to get the best?" We'll give them a two options, "Here's our basic, and here's our comprehensive. Which one looks best to you?" And the majority of patients will say, "I want the comprehensive plan, I want to do whatever it's going to take to get me better." So that's what our programs include, and then I run what we call our weekly health accelerator course, and so every week I take patients through challenges. So I've got a group of thousands of people who we get together, and I do live coaching, and then at the end of [crosstalk 00:49:09]-
Dr. Kent Holtorf:

Thousands?

Regan Archibald:

Thousands. So I give them a weekly challenge, so this week it's no sugar, and so everybody is getting off sugar. We had a push-up challenge the other week, "Let's see if we can increase-"

Dr. Kent Holtorf:

Oh, I'd lose all that. I'm, "Do as I say, not as I do." I eat Skittles for

breakfast. Regan Archibald:

Well yeah, nothing wrong with a few Skittles, I mean

Dr. Kent Holtorf:

And I'm so dedicated and passionate about exercise. Just no matter what, every four months for eight minutes, rain or shine.

Regan Archibald:

I'm proud of you. Man, if we could double that and do it every two months [crosstalk

00:49:50] Dr. Kent Holtorf:

I don't want to overtrain. I've seen people overtrain.

Regan Archibald:

I mean, you do not want to raise your inflammatory markers, [crosstalk

00:49:57] Dr. Kent Holtorf:

That's it, so I'm safe on that.

Regan Archibald:

Yeah, but I find if I get the community engagement and accountability,
that's

Dr. Kent Holtorf:

Do you have a thousand people on the call?

Regan Archibald:

No, not at the same time. But we have a group of about, actually we have, I don't know how many, it's 15,000 that are engaged in some form or another. Reading our blog, they're engaged in the content and participating. And then on our calls, I'm not sure how many we have on our calls, but the number is growing every week. But what I learned

Dr. Kent Holtorf:

[crosstalk 00:50:31] just because so this is like a... Oh, I didn't mean to cut you off, go ahead. Regan Archibald:

No, no, keep going.

Dr. Kent Holtorf:

So from doctors listening, okay, how do you keep those people engaged? How much work is it to do a blog, do a call, do a webinar? What do you need to do?

Regan Archibald:

And that's where it is not as much work as you think if you have the right teamwork. So I'm great, I love creating content, and I love thinking of the challenges. And I reach out to team members, and health coaches, and where is our patient struggling? And then I reach out to the marketing team, "What are people most interested in?" "Oh, they're interested in fasting now, or the ketogenic diet." or whatever it is, so I put challenges based around those topics. And then I use my weekly podcast, and my weekly podcast becomes my blog, and my weekly podcast also starts relating to my challenge.

Dr. Kent Holtorf:

Good.

Regan Archibald:

And so there's multiple channels, it becomes our social media posts throughout the week. And then it becomes my post when I'm tagging about, "I'm doing my push-up challenge." And one of my PAs, and our physical therapist, and me doing this push-up competition, who could do the most push-ups in [crosstalk 00:51:49]

Dr. Kent Holtorf:

Awesome.

Regan Archibald:

So if you can get engagement in your community, and if you can actually show, because one of our core values is we walk the talk. And so if you can show your patients you actually do these things, I'm doing peptides all the time and I'm showing my patients injecting myself. And they're like, "I want what Regan's doing." And so they say, "Well cool, I want to get on board with this." I mean, it's those those little things that make a big difference.

Dr. Kent Holtorf:

Nice, nice. I have the problem of perfection is the enemy of good enough. And so the marketing team, they'll write something, and they won't send it to me anymore. Because then I make it into a 12 page white paper, you know?

Regan Archibald:

Nice.

Dr. Kent Holtorf:

So we have to have, it's also a talk, it's like 200 slides. I'm paralyzed, I don't want to eliminate any slides, so I [inaudible 00:52:38] other people do it. You know?

Regan Archibald:

Yeah, so I've experienced the same exact thing. And so one of my mentors, he said, "Look, the

80% rule is going to be critical." So the 80% rule is where 80% is good enough, and then you have to launch. And then you have other people that fill in the 20%. So I'll have my 80%, I send it to my content manager. She puts her 80% on it, and then we send it to [Kate 00:53:06] for the final version, and then we go, and it makes it so much better. And then if I have a deadline in front of me, I work really well on tight deadlines. And then that's when I show up, I'm a great person when it's fourth quarter or down by 20, I'll show up and we'll win the game. So we just look at each other's capabilities. Having a deadline, and then having a team, and then understanding 80% is good enough has saved my life.

Dr. Kent Holtorf:

That's good. Yeah, I work best two months after the deadline.

Regan Archibald:

[crosstalk 00:53:40]

Dr. Kent Holtorf:

Yeah, that's [inaudible 00:53:41] everyone is always frustrated. And they think it's like, "What is this?" And I don't know, I think it's ADD. And I'm so ADD it's like you just feel it's such a big task, so you wait, wait, wait, wait, wait, and then start it. And I have a lot of psychological issues, like [crosstalk 00:54:02]

Regan Archibald:

Don't we all? Any entrepreneur has got some brain damage, that's for

sure. Dr. Kent Holtorf:

I guess yeah, my mom's five packs a day and Adderall to keep her weight down probably during pregnancy. I could have been like 6'4" full head of hair. Yeah, so any particular peptides you like, or you incorporate biohacking with peptides?

Regan Archibald:

I have a lot of friends in the biohacking world, and I love experimenting on myself. I just think it's fascinating. Right now I'm doing the SandMan, which is a high dose of melatonin.

Dr. Kent Holtorf:

Oh, in what dose?

Regan Archibald:

It's like 500 mgs of melatonin.

Dr. Kent Holtorf:

Nice, nice. You're the man. I would say 200 would be [inaudible 00:54:54],

yeah. Regan Archibald:

And it's suppository, so I mean, it's a direct access. So that's what I'm trying right now with Epitalon and Melanotan II, I'm just resetting my entire circadian rhythms.

Dr. Kent Holtorf:

Yeah, but I think Epitalon is maybe the ultimate antiaging peptide, you

know? Regan Archibald:

Mm-hmm (affirmative). Yeah, absolutely.

Dr. Kent Holtorf:

It increases telomeres, especially combined with a thymosin. Improves people with cardiovascular disease, improves it. Less cancer, increased longevity, decreased morbidity. It's like everyone should be on it.

Regan Archibald:

Right.

Dr. Kent Holtorf:

And it will actually stimulate the hypothalamus-pituitary axis, your hormones go back up. Can result in these rats, or attorneys, to actually that menopausal, start menstruating in children. You know?

Regan Archibald:

Yeah.

Dr. Kent Holtorf:

Not that we want that, we don't want [inaudible 00:55:55] in children. But yeah, it's pretty amazing. And nice thing is they're so safe, you know?

Regan Archibald:

Mm-hmm (affirmative), yeah. Yeah, I've really enjoyed the sleep I've been getting, the dreams, just the whole inflammatory process has just calmed down in my body. Because I had Hashimoto's too, that's why I got into natural medicine. I wanted to do anything but farm work as an adult, and so I said, "Well, I'll be a doctor then. At least I know how to study hard." But I had no answers when I was in my undergrad work in pre-med. So I've always fought that autoimmune condition as well, but with peptides it's made things very easy for me [crosstalk 00:56:39]

Dr. Kent Holtorf:

Yeah, it can get rid of that, we don't even think about it. And I put together a talk that I just gave on just Hashimoto's where [inaudible 00:56:48] patient with huge incidence of basically antipituitary antibodies, antimitochondrial antibodies. And they also have antibodies to [inaudible 00:56:59] type two, which doesn't suppress it, it actually increases it. So the pituitary sees more thyroid, So TSH goes down. So when all these doctors, you have Hashimoto's and they titrate T4 to TSH, they're all underdosed. You know?

Regan Archibald:

Yeah.

Dr. Kent Holtorf:

Yeah, and they found that you fix the antibodies, patients feel... And I'm a lover of T3 and thyroid, actually feel better if you fix their antibodies versus giving them thyroid.

Regan Archibald:

T3, well right, yeah. I mean that's going to allow for the thyroid to function much better if you take the pressure off it.

Dr. Kent Holtorf:

Yeah and you get [inaudible 00:57:40] the cell and all these things, which

yeah. Regan Archibald:

[inaudible 00:57:43]

Dr. Kent Holtorf:

So that's amazing, you've gone through a lot of stuff. It's like the journey, you

know? Regan Archibald:

Oh yeah. I think we've all been on our own personal journey, and that's why we're [crosstalk 00:57:57] we're really

Dr. Kent Holtorf:

Oh yeah, I'm thinking if I was on a straight path, what would I be? I'd be a chief of staff of some hospital, I would have probably killed myself by now.

Regan Archibald:

Right.

Dr. Kent Holtorf:

[crosstalk 00:58:10] yeah. But yeah, so you actually also deal with a lot of people that don't have MDs, can't write scripts. And so are able to use peptides that are supplements now, hopefully that stays too.

Regan Archibald:

Right. Yeah, especially with [inaudible 00:58:31], with Integrative Peptides, I mean that is a game changer. And then one of the things we do for some of the other peptides that are [inaudible 00:58:39] is we help team up some of our doctors with other practitioners out there. So whether they're a chiro, or an acupuncturist, or maybe a health coach who wants to implement some of these things into their practices. We have systems in place and teams in place to help facilitate that.

Dr. Kent Holtorf:

See, that's great. And, hey chiros can market, they get it. And then the doctor comes in, "[inaudible 00:59:06]." You know?

Regan Archibald:

Right.

Dr. Kent Holtorf:

And health coaches, I've always thought about that. And I just think some extra hand holding, and I just think for what we do, we just give people so much stuff and expect them to know it. You know?

Regan Archibald:

Yeah.

Dr. Kent Holtorf:

And they can call and ask questions, but it seems like if we had a health coach, they sit there,

hold their hand, things would just be a lot better, and a lot easier. And tell me, what's your thought on the health coach arena?

Regan Archibald:

I think the biggest way that you can free yourself up is think about the things that you repeat over and over again throughout the course of a day. And then that person, could you create a video and educate that way? And if not, then that's when you need a health coach to simplify things.

Dr. Kent Holtorf:

[crosstalk 01:00:05] personal touch, right?

Regan Archibald:

[crosstalk 01:00:06]

Dr. Kent Holtorf:

It's like, "Hey, how you doing?" It makes such a huge difference.

Regan Archibald:

It's massive, and then it's an accountability partner. I mean, I don't talking to patients like, "Oh, I told you no gluten, no sugar, no corn, no dairy, no peanut." I mean it's like, well, why don't we just have a health coach who loves to talk to people about their habits and their lifestyle? And have the health coach coach them? And then I do

Dr. Kent Holtorf:

Yeah, when you say it, it makes so much sense. I've been agonizing [inaudible

01:00:37]. Regan Archibald:

Right, yeah it's like I figure out [inaudible 01:00:42] what to do and stop doing it. How about we just give everyone a little bit of freedom today? And [inaudible 01:00:47] all know things that are irritating, stop doing it.

Dr. Kent Holtorf:

I'm like, "Do I do it, do I not? Hello."

Regan Archibald:

Right. I guarantee you there's someone on the planet who would love to do the things that you hate doing, that's the-

Dr. Kent Holtorf:

I've found that out, and there's jobs like [inaudible 01:01:03] I could not do that. I couldn't do that repetitive stuff, but people love it. It's comfortable, they have everything lined up, if [inaudible 01:01:14] were to see my office, everything is just stacks, and people just freak. They go crazy [inaudible 01:01:21] just all the paper is everywhere. But other people, "Oh my God, the pen is out of alignment."

Regan Archibald:

Right.

Dr. Kent Holtorf:

And they love that, love repetitive stuff. I can't stand it, and it's like every job they want you to show up on time, like, "What? How unreasonable."

Regan Archibald:

Right, we're unemployable [inaudible 01:01:42].

Dr. Kent Holtorf:

That is true. I actually was so disillusioned with standard medicine I opened up a beer company, and had a hangover-free beer. And it went well, it's the funnest industry ever. But I learned that as a doctor, you're not qualified to do anything else. You go to a temp agency they're like, "Oh no, you can't file." I filed MA before MC. Like, "Sorry, file clerk is out." But I think I'm telling too much, I probably have to cut this out. Let's see, yeah, so and talk about virtual utilization.

Regan Archibald:

So one of the transitions we made in 2020, and that we're continually making in 2021, is I still love the brick and mortar, I love people coming in live. But I also learned that there's so much that we can do with technology, where you can really multiply your efforts. And that's where virtual care comes in. So our peptide programs, we work with patients all over the country. And it's beautiful, because they never have to set foot into our clinic. Where in the past it would be, "Hey, do you have a clinic in Texas?" but now it's, "Well, we've got this beautiful platform where you can work with anyone literally anywhere in the country with peptides." Certain states you're going to have different criterias that have to be met, and you've got to... Luckily we've got Integrative Peptides. But there's some amazing things you can do virtually that you couldn't have done prior to 2020.

Dr. Kent Holtorf:

Yeah, and I think it's one of the good things from, this whole pandemic has been a nightmare, but it's opened it up. And I think the horse is out of the barn, that I think it's going to be hard to bring that back where you had to have a license in that state. You know?

Regan Archibald:

Mm-hmm (affirmative), right.

Dr. Kent Holtorf:

And now the only thing is advertising nationally now, it's more expensive, but word of mouth is always key. And yeah, it's actually opened up, which I never thought medicine would open up more [crosstalk 01:04:03]

Regan Archibald:

Yeah, there's been some gifts, there's a big silver lining in all of this. And I think the biggest silver lining I learned is that the people who are the most passionate, the most purpose-driven, we've made huge changes. And the next five years is going to look really good as long as we can all stay together, stay the course. Because we've already been censored, I mean we already know that. But the beautiful thing is that society has said, "Hey, whenever you get some oppression in one area, then this huge energy emerges on the other." I'm here in Utah and we have some of the world's best microbreweries, because there's not been a lot of alcohol consumption in this state.

Dr. Kent Holtorf:

[crosstalk 01:04:44] not allowed to, yeah.

Regan Archibald:

[crosstalk 01:04:46] and so now you've got all these, yeah, it's almost like you got to have this opposing energy. We talked about balance at the beginning of this, and I think it's a beautiful time to put it in at the end. Which is yeah, there's always these emerging energies, and as long as we look at it, we look for the opportunities. When everybody is looking right, we look left, and we're going to find opportunities that we never knew existed. And that's what I found in 2020, it's been a beautiful experience, and in 2021 we're just carrying that with us.

Dr. Kent Holtorf:

I think that's a good point. And that's where, even look at the rich elite, they make their money in recession. Yeah, it's when you buy low and also, yeah [inaudible 01:05:30] there's this basically counter. Because [inaudible 01:05:33] think about squeezing a sausage or something, a part comes out the other side. There's a backlash, thank God. And I hope there's more, because it's getting pretty squeezed right now. So hopefully it would come out the other end better now, that would be great. So just in closing, three action items to implement peptides in your practice.

Regan Archibald:

So action item number one is look at your programs, and in every single one of your programs put in a peptide bank, a peptide allowance. I think that would be probably a great action item.

Dr. Kent Holtorf:

Can you describe that a little more, what you actually mean by that in

detail? Regan Archibald:

Yeah, so think of a phase one. Whatever that patient needs in phase one, whether it's repair and clear. Or you're doing reinoculation, or whatever phase you are, if you're working with autoimmunity, or if you're working with joints. But think about phase one, phase two, and phase three, what does that look like? And think about a proper peptide allowance for each one of

those phases. And then don't sell individual peptides anymore, but sell the entire amount that the patient is going to need. And then put in your functional medicine visits, or office visits, put in your health coaching and whatever other services you do. Put it all into one program, so that would be action item number one.

Dr. Kent Holtorf:

And let me ask you, like you said, with virtually you can't do IVs and things like that. But is that something you potentially add, and do you add supplements to that? Do you add

Regan Archibald:

Yeah, supplement bank is very [crosstalk 01:07:19]

Dr. Kent Holtorf:

And so you basically give an allowance for a certain amount.

Regan Archibald:

That's it, yeah.

Dr. Kent Holtorf:

Now what if you want to give them more or less, what happens?

Regan Archibald:

You just change the number. If you know how to use Excel

Dr. Kent Holtorf:

I mean no, so do you charge them different? Because now they've bought a package, now, "Oh, you're getting charged extra for this." Or let's say they don't get as many that was allotted, do they get a refund?

Regan Archibald:

They get a refund or they get a credit, but most cases you're going to go through it. Yeah, the way we have

Dr. Kent Holtorf:

[crosstalk 01:07:52] carries over, and then...

Regan Archibald:

Yeah. The way we have it structured is that people love the program so much. And then when it comes time to renew, they're more than happy [crosstalk 01:08:01]

Dr. Kent Holtorf:

They're not stressed out about it, yeah.

Regan Archibald:

Not at all. Yeah, so that's action item number one. Action item number two is look at your marketing message, and just clean it up a little bit. Actually start talking in ways that your patients can relate to. And just see if you can't really start using some of that emotional energy that we talked about today, and help them see that there is freedom on the other side when they work with you. I mean, think about what you went through with all the knowledge you have, but with your chronic illness you had to do a lot of searching on your own. And so [crosstalk 01:08:39]

Dr. Kent Holtorf:

Yeah, and I had a huge leg up on these patients, you know?

Regan Archibald:

Right, but it was still a challenge for you.

Dr. Kent Holtorf:

[crosstalk 01:08:45] what they have to go through.

Regan Archibald:

Right. And so speak to that person, so that's challenge number two. And then challenge number three is set bigger goals for this year than you ever imagined. Just set a goal that's scary, and stop taking the easy way out. Your comfort zone is just there to make you feel comfortable,

but it's the worst place you can stay in. So if you're not working on something that's scary, then you probably don't have big enough goals. And so we need you now more than ever to set some big goals, set some big intentions. And really get engaged so that you can build out the health care of the future that we're all trying to work on right now.

Dr. Kent Holtorf:

Awesome. Yeah, if you're not stepping outside your comfort zone I don't think you're growing, right?

Regan Archibald:

It's impossible, the universe will recycle you. You'll have a forced retirement, so stay outside of that thing.

Dr. Kent Holtorf:

Yeah, awesome. You are so wise beyond your years, and it's just a pleasure to work with you and knowing you. And yeah, so we're offering a peptide module as a introductory course, like a little appetizer. And then if you want to get more advanced training, and then that's available as well. So awesome, I love talking to you. I just feel inspired, now I got to go change the world, excuse me, I'll be back.

Regan Archibald:

[crosstalk 01:10:14]

Dr. Kent Holtorf:

So yeah, you got special gifts, and I just love talking to you and hanging with you. So I thank you for taking the time.

Regan Archibald:

Great, and thanks so much for having me. And for all of you, you'll have access to our course. And so Kent and I will see you on the other side, would love to have you in there.



THE
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SUMMIT**

Dr. Kent Holtorf:

Sounds great.

