

Michael Roesslein:

Hey, everyone. I am waiting for Michael to get in. He had to wait for me. So if you can just comment in the chat that you can see or hear me, for now, that would be super helpful. There we go. So everybody can see us in here. They know to put the Q&A in the Q&A. You can have as much chat as you want over there, I'll keep an eye on it, but please try to keep the questions in the Q&A.

We're going to talk about a few things general about enzymes, we're going to talk a little bit more specific about the formula, Fibrenza, and then we can answer some questions towards the end. This is part of the product spotlight series that we're doing on all the products in our shop to make sure that you guys are as educated as possible to make the best decisions around what might be good for you and what to incorporate into your own routine.

So, why enzymes? I just want to share a minute about my own experience. I got into functional medicine, natural health about 12 years ago, and systemic enzymes are something I found out about early, mostly nattokinase and serrapeptase. I was doing a lot of hard training. I had a lifetime of chronic back pain and a couple other little nagging injuries from high school and college, and I took them for that, for chronic pain, for exercise recovery. But I was taking four products and a handful of pills. Because I'd learn about one and I would want to take that one, so I'd get that one, and then I'd learn about another one, I wanted to take that one, so I'd get that one, and then I had a shelf of enzymes and I was taking 15, 20 pills a day, and it worked pretty well. It was great.

Then I found out about a couple other more all-in-one type formulas. I was taking Vitalzym for a little while. I was still taking a lot of those, and it's extremely expensive. Then I was taking Wobenzym. I was taking even more of those, and that was also expensive. Systemic enzymes are not a cheap supplement, and so when I'm taking 10 to 12 capsules a day, or tablets of the Wobenzym, that adds up and it becomes expensive. It's a lot of pills to take, and that's when Kiran ... Everybody here knows Kiran from our microbiome series and the megaspore things and that stuff. He attended a trade show, and I don't know if he met you.

Michael Kramarczyk:

Mm-hmm (affirmative).

Michael Roesslein:

He met you personally?

Michael Kramarczyk:

Yeah.

Michael Roesslein:

Yeah. And he heard me talking about enzymes, said, "Hey, I just met these guys and they have a product and it's great." He was actually involved in bringing one of the original enzyme ... I don't know if it was nattokinase. I don't remember. But 20-plus years ago, he brought over some ingredient product imports from Japan and was one of the first enzyme products, really, to go on the market. So he ended up knowing a ton about enzymes, so I'm sure you guys had an interesting chat.

Michael Kramarczyk:

Our booths were right next to each other.

Michael Roesslein:

Oh, perfect location.

Michael Kramarczyk:

We just sat there talking the whole time.

Michael Roesslein:

Yeah, yeah. He can nerd out on that stuff, for sure. And so he said, "Hey, try this stuff, it's all the things" ... Because at the time I was taking Wobenzym, but then I was also taking at least one or two supplemental because their formula didn't include them. He said, "It's everything that you're taking. Try it out." I tried it out. I ended up getting the same results. I would take four to six a day, so two or three in the morning and two or three at night, instead of six each time, and ended up taking way less capsules, way less things to buy, and the results are really similar, and so I just stuck with it. This, I think, was the second product we ever put in our shop. So that's the long of the short.

I'll let you get into benefits of enzymes and things because I just had a bad back and I was looking for anything that could help with my recovery so that I didn't hurt for five days after I did anything. It worked out well. Kiran came on and we did some discussion around each specific enzyme in the formula, and I sent those videos out to everybody over the last few days, so check your email, and we have a breakdown from him. Then, today, I thought we could start out a little bit about ... I think our audience might be a little more familiar with digestive enzymes.

Michael Kramarczyk:

That's typical.

Michael Roesslein:

Just kind of a gut health type audience as a whole. It's where a lot of the people come from, is gut-healing areas. So can you explain a little bit of the difference? What's the difference between a digestive enzyme and a system or proteolytic enzyme?

Michael Kramarczyk:

Yeah, certainly. Yeah, systemic enzymes do tend to be primarily proteolytic enzymes or made up of primarily proteolytic enzymes. A digestive enzyme, quite simply, you take it with food, it releases in the stomach, and is intended to basically give the entire digestive process a headstart, whereas systemic enzymes are taken away from food, they are protected in some manner. Most companies rely on some type of an enteric coating to protect them. They're protected in some manner, you take them away from food, they get through the stomach, into the intestine, release there, and with that, they get absorbed into the bloodstream and bring with them an entirely different set of benefits.

Our biggest success stories are with chronic pain, inflammation, arthritis, scar tissue. That's both internal scar tissue, post-operative stuff, adhesions, as well as external scar tissue. Fibromyalgia is another big one. We have a lot of women that use them for uterine fibroids, fibrocystic breasts, endometriosis. There's a whole host of different cardiovascular benefits that come with them as well.

Michael Roesslein:

That's quite a bit. The list is about as long as benefits as I've seen about any supplement that I've ever looked at as far as wide range of potential uses.

Michael Kramarczyk:

Well, at the end of the day, when you think about what enzymes are, at the end of the day, they are biocatalysts and they're responsible for 80 ... Well, the last count, it changes almost annually. But the last count was about 8300 different chemical reactions within the body that absolutely could not happen without enzymes.

Michael Roesslein:

That we know of, 8300?

Michael Kramarczyk:

That we know of, yes.

Michael Roesslein:

So, yeah, they just make other things happen.

Michael Kramarczyk:

Exactly.

Michael Roesslein:

It's like keys in locks.

Michael Kramarczyk:

That's exactly it.

Michael Roesslein:

And there are some heavy-hitters amongst systemic enzymes that have a lot of research behind them that have been used for a long time, and some people might be familiar with a few of them. Those are all in the formula for Fibrenza. I guess-

Michael Kramarczyk:

It is by far the most comprehensive formula out there.

Michael Roesslein:

Yeah, it's not even really that close, from anything that I've seen personally. The other ones I mentioned have four or five, maybe six, enzymes in them, and I think yours has 11 or 12 last I checked.

Michael Kramarczyk:

Well, the thing is, though, that is very deliberate and it isn't intended to be, "Oh, let's just throw everything but the kitchen sink in it." The concept is actually very, very simple. You mentioned a couple of products earlier. Wobenzym, fine formula, it's been around for 55 years. Of course, it's a decent product. You don't stick around that long if you're making garbage. But their concept is based around

animal-derived enzymes, which can be very good enzymes. They have other enzymes in there, but their primary active ingredients in their blend are pancreatin, trypsin, chymotrypsin. Again, animal-based enzymes, very good enzymes, and they work really well for a lot of people. Then, in the other camp, you have your plant-based enzyme products. You mentioned Vitalzym earlier. That's going to absolutely qualify for that. Their primary active ingredient in the higher-end formulas in the plant-based camp are going to be [inaudible 00:08:39] serrapeptase as their key active ingredient. And serrapeptase is a tremendous enzyme, and it works really well for a lot of people, too.

But with so many practitioners that I worked with over 16 years of being with enzymes, and I've heard it 100 times or more, is they'll recommend one type of product or another to this person or that person, and some people do respond really well, but some people don't respond at all. The reason for that is real simple. We all have different metabolisms, different blood types, certainly different pH ranges, which is going to have a huge impact on how well a person's going to assimilate and utilize an animal-based enzyme over a plant one and vice versa. That is really where Fibrenza shines because it is the only one that's taken the most potent enzymes available from both sources and combined it. So it takes that hit or miss benefit out of the equation because there's something for every metabolism, every blood type, every pH range to respond to.

It makes it far more reliable, so much so that it is also the only guaranteed systemic enzyme in the market. Everybody guarantees freshness and potency and that's great, and we do, too, but we guarantee benefit. We guarantee end user benefit, and a lot of the benefits that you get from systemic enzymes in general, they're subjective benefits in a lot of cases. Do I feel better, or don't I? Well, after eight and a half plus years of being on the market, our return rate is less than half of one percent.

Michael Roesslein:

That's my general means of measuring benefit. I don't run labs every six weeks or do any of that type of stuff. Wow, less than half of one percent, that's very solid. Let us know, too. If you send it back to us, we'll send it back to them.

Michael Kramarczyk:

We got it.

Michael Roesslein:

I haven't gotten any back in the four years that we've been selling product, but it's out there, so that's the offer. You mentioned earlier about, I think, proteins in the blood or a ... I don't want to use the word scavenger, but I guess that would be the right word.

Michael Kramarczyk:

That's kind of what it does.

Michael Roesslein:

Some of them looking for proteins in the blood. So I have-

Michael Kramarczyk:

It's throughout the whole body, actually.

Michael Roesslein:

Well, in the body, yeah. I have hemochromatosis, which is a condition that involves excess ferritin or excess iron. It's thicker blood viscosity. It causes a lot of oxidative issues, a lot of damage to liver, kidneys, heart, increased risk of stroke, increased risk of heart attacks, increased risk of a bunch of other things. It's actually not that uncommon in men. But I have done a lot of work to lower it, and I've only got it about halfway down. Unfortunately, the conventional way to treat it is regular phlebotomy or donating blood, and I have a completely irrational and ridiculous fear of needles, despite having a lot of tattoos. I'm terrified of syringes and blood draws and things, and I pass out, and it's ugly. So that's pretty much the worst possible way. That's the worst condition I could have, is something that requires regular blood draws.

So I've been trying to find ways to manage it and to reduce the damage. I can't say that my five to 10 years of taking enzymes has anything to do with it, but I recently ran a huge battery of tests because I just turned 40 and I wanted to kick the tires. The doctor told me that it's rare to see as good of test across the board as mine with the ferritin as high as it was with no damage. I had ultrasound done on liver, kidneys, everything, and I tested all kinds of inflammatory markers, ALT, AST, for liver and heart damage or anything like that, and everything was perfect across the board. So the bad news is my ferritin is still elevated. The good news is there's no damage. The enzymes are the one continuous thing I've done that whole time. So that is anecdotal and subjective, like you said, but that's another reason why I take them.

So you work with a lot of doctors, a lot of practitioners, direct clients of theirs, and patients of theirs. What is the demographic or demographics where you see the most use of this or most popularity, most return customers, best feedback?

Michael Kramarczyk:

Best demographic would be tough.

Michael Roesslein:

You can name a few, or who's the prime candidates for-

Michael Kramarczyk:

Well, honestly, systemic enzymes, I thoroughly believe-

Michael Roesslein:

Anybody over 40?

Michael Kramarczyk:

Actually, I would say anybody over 30.

Michael Roesslein:

30.

Michael Kramarczyk:

The reason why I would say that is because when we're born, we are born with a massive supply of enzymes already inherent within us. Throughout our childhood, our body is not shy about tapping into that supply and uses the enzymes by the truckload, and that's why when we're five and 10 and 15 years

old, we can be running around, we trip, we fall, we hurt ourselves, and all we did was get right back up and keep doing whatever it was that hurt us in the first place. But you might notice when we're 40 or 50 or 60, it just isn't quite the same way. The entire difference is enzymes, and that's because of some big changes that take place in our life, and one of them happens usually in our late 20s, like 28, 29, 30 years old.

At that point, our aging process starts kicking into high gear, but also, too, our bodies take inventory. Our bodies say, "Hey, if we keep using these enzymes at the rate that we did for our youth, we're not going to have any left when we get to 40 or 50 or 60." So instead of using them by the truckload, it starts using them by the spoonful, and that's why when we get older, especially 30 and older, scars become more visible, pain is more debilitating, recovery times take longer. It's all because of enzymes. And so when you supplement with a systemic enzyme, even at a low dose, just to keep those levels up a little, and low dose with ours, as you pointed out, low dose with ours is one capsule twice a day.

So when you keep those levels up, when you do have a time of need with scar tissue or an operation or an injury or even a tough workout where your muscles are just totally fatigued, you up your dose to something more therapeutic, like two or three capsules per dose, nothing's going to settle in on you. I ride mountain bikes. I ride it a lot. I really, really stink at it. I am horrible at it, but I do it all the time. With that, I-

Michael Roesslein:

That's a rough one.

Michael Kramarczyk:

I'm prone to taking the occasional spill. I'm very, very rarely held down for much more than a couple days from the worst of falls. Even if I sleep wrong and I wake up with a sore back or a kink in my neck or a runny nose, I'll just up my dose. Instead of taking the one that I normally take, I'll take two or three and-

Michael Roesslein:

I never go above three. I've had a couple acute injuries over the last few years, and I think then I took three or four twice a day for a week or something. But I almost never go over two. I do two in the morning, two at night, and that's probably higher than I need to but-

Michael Kramarczyk:

It's very typical. Four capsules, there's no toxicity to them. You can take a whole bottle if you want, and it's certainly not going to hurt you. But because of our potency and also our delivery system, which is just remarkable, because of those two things, though, real-world dosing, two or three per dose is going to be sufficient for most folks. Once in a while, three, four, five times a year, I'll talk to somebody that needs to go to four capsules per dose before they start really having that breakthrough moment. [inaudible 00:17:03].

Michael Roesslein:

Sorry, I'm reading through some of the questions. All right. Thanks for that. How long have you guys been making the product?

Michael Kramarczyk:

A little over eight years, almost nine years.

Michael Roesslein:

Eight years, nine years, okay. Best practices, we just told about how you take them and I take them, is one twice a day. Now, they need to be away from food, right? That's what-

Michael Kramarczyk:

Definitely empty stomach. Otherwise, [crosstalk 00:17:31] take it.

Michael Roesslein:

Otherwise, they'll become digestive enzymes.

Michael Kramarczyk:

Yeah.

Michael Roesslein:

Because they'll break down the proteins and the fats, too, because there's lipase in your product, too, right?

Michael Kramarczyk:

Yeah. The lipase is in there, actually, not for its activity in reducing inflammation, but lipase is in there because it, let's just say, acts as a ... There's two or three enzymes in there that lipase is a real motivator for. It's boosting that activity. That's the purpose of it, really. Yeah.

Michael Roesslein:

Weird, I got muted. Okay. Well, I didn't know that, but if you took it with food, it would break down the fat.

Michael Kramarczyk:

Oh yeah. If you take it with food, it'll be a phenomenal digestive enzyme.

Michael Roesslein:

Yeah, yeah.

Michael Kramarczyk:

There's just [crosstalk 00:18:16] options out there.

Michael Roesslein:

It's a little more robust than you need for a digestive enzyme. You could just stick with the proteases and the lipase and amylase. So away from food. One twice a day is probably the maintenance, I would guess, and then-

Michael Kramarczyk:

A good just wellness, maintenance dose. But if you are looking for something a bit more therapeutic or you have ... The rule of thumb with most of the practitioners we work with is mild to moderate conditions tend to be two capsules twice a day on an empty stomach. Your more moderate to severe, more chronic conditions, tend to be three capsules twice a day on an empty stomach. And that is, again, real low dosing, not just a good testimonial we heard once. That does apply to the mix.

Michael Roesslein:

You've got a couple enzymes in there that aren't in the other products.

Michael Kramarczyk:

They're not in any other formula.

Michael Roesslein:

The superoxide dismutase I haven't seen in the other products I was taking and the seaprose. Am I pronouncing that right?

Michael Kramarczyk:

Yeah, seaprose, that one's real special. We're really, really proud of that one. Like I said earlier, a lot of your higher-end blends, they'll go up to maybe a serrapeptase as their primary active ingredient, and we have that, too. But seaprose is real special. It's the king of the hill when it comes to-

Michael Roesslein:

That's what got Kiran really excited.

Michael Kramarczyk:

Yeah, there's even studies that have been done that compare serrapeptase side-by-side with seaprose, with the end result essentially being, "Well, serrapeptase is almost as good." So seaprose the big kid on the block as far as that's concerned. It's super potent, super clean, extremely consistent. We've got the best sourcing on it. It brings a lot to the table as far as keeping our dose ... I would say that and our delivery system are really, really key for keeping our dosing as low as it is.

Michael Roesslein:

Yeah, because every enzyme product, I ended up taking handfuls of them. Then the superoxide dismutase I've not seen in other ... I don't know. I don't think so. But can you speak on that one at all?

Michael Kramarczyk:

Well, it is a proteolytic enzyme. It is a very active enzyme. But we wanted that in there not only because of that but also it is a tremendous antioxidant, and that goes a long way, too. That was the big motivator for including that one.

Michael Roesslein:

Antioxidant capability?

Michael Kramarczyk:

Yeah, and, plus, the sourcing on it is great, too, because the hard part about SOD is the fact that when taken orally, there aren't very many sources that actually remain viable, and this one's from melon, which is the only one that is truly viable when taken orally.

Michael Roesslein:

And then you've mentioned serrapeptase a couple times and I mentioned nattokinase. Those are the two big heavy-hitters that I know of in the industry that are usually the headliner ingredient in most formulas or the most used standalone, I would guess. Yes, you can get nattokinase from food if you want to eat-

Michael Kramarczyk:

There's other options.

Michael Roesslein:

Yeah. Natto is ... I heard a story about it that it was first originally used in Asia. They fed it to horses because they noticed it made their war horses healthier and faster and stronger and things. Then the warriors started eating it. I don't know how true any of that is, but you got to be pretty brave. I can eat and drink things that don't taste awesome. I have a pretty high tolerance for that, and natto is up there on the list of things I'd like to never put in my mouth again.

Michael Kramarczyk:

Yeah, [crosstalk 00:22:20]-

Michael Roesslein:

So is it derived from that?

Michael Kramarczyk:

It is derived from that, but ours is a little bit special in that aspect, too. Soy is a buzzword, if you will. There's some people that are absolutely pro-soy, and then there's a pretty large camp of people that are absolutely anti-soy. That's primarily due to the hormonal impacts that it can have. There's a lot of estrogen, phytoestrogens, I should say, in soy. That's the nice thing about our nattokinase, specifically. Our fermentation and extraction process actually leaves all soy lignans and isoflavones behind, so it is just straight, pure, raw enzyme with no hormonal impact at all. That's a big plus. That's a big plus.

Michael Roesslein:

I am just looking through my notes to see if there are any other specific ingredients I wanted to ask about, but I don't ... Bromelain comes from pineapple cores, and that's another pretty commonly-used enzyme. I didn't-

Michael Kramarczyk:

Common in both systemic and digestive enzymes, actually.

Michael Roesslein:

Yeah, that's often found in both. Unfortunately, it's not the pineapple fruit that you eat. It's in the core. I learned that. There's a tiny bit in the actual pineapple, but if you wanted to get a bunch of that ... Because everyone's like, "Oh, I'll just eat a few pieces of pineapple with my meal," and I'm like, "Great, that's awesome. You can do that because it's delicious. And you'd have to eat the core, which is interesting." I grill pineapple sometimes, and with the slices, you can eat the middle. If it's grilled, it softens it up a little bit, just a little tip. But, in general, we do not have the anatomy for chewing on that. Let me see. I think that was all the specific ... The papaya, how do you pronounce that?

Michael Kramarczyk:

Papain.

Michael Roesslein:

Papain. That's another one that's commonly used for digestive enzyme.

Michael Kramarczyk:

Exactly.

Michael Roesslein:

So there's a few in here, like protease is just general protein enzyme, the papain, the bromelain. There's peptidase, there's ... Amylase is a carbohydrate breaking down enzyme. Lipase breaks down fat. Now, those are more digestive enzyme type enzymes. If you take this, and we think empty stomach ... Empty stomach means you haven't eaten in an hour or two and there's not food sloshing around in your stomach. Our intestines are never empty, and so what is the rationale or reasoning for having the ones that are more digestive enzyme type enzymes in this product, which is a systemic enzyme? Is there a specific rationale or reasoning for that?

Michael Kramarczyk:

Just, again, it's all about when taken systemically ... Or when taken in a digestive manner with food and then released in your stomach, the enzymes don't really have any brains. There's no smarts to them at all. They just glom on to whatever they attach to and try to break it down if they can. With systemic enzymes, when they're absorbed into your blood or taken in a systemic manner ... Any enzyme, I should say, when taken in a systemic manner, they get into your blood and the instant that happens, they still don't know anything, but it's your body that gives them their brains. There's certain pathways that certain enzymes are able to be absorbed through and things like that. In some cases, one enzyme might even rely on another to maybe, or not maybe, but to grab it, I should say, or pull it into another path or to be active with it. Because that's the thing, there is a synergy, plain and simple, a synergy that enzymes rely on each other for as far as how they interact.

Like, nattokinase is a really great example. Nattokinase plays with other enzymes very, very well. You have straight nattokinase products. You can take a straight nattokinase, and it's going to bring you some cardiovascular benefit, for sure. It's going to bring you some blood-cleansing and artery-cleansing. It's going to help reduce vascular inflammation. It's going to do all of those things. But it's capable of doing a whole lot more when it's working in concert with other enzymes. The neat thing, specifically, about nattokinase, like I said, it plays very well with others. It almost acts like a steering wheel and guides some of the focus that serrapeptase adds over to its cardiovascular function. It guides some of the focus of bromelain and some of the focus of papain over to the cardiovascular function. That's where the

blood-cleansing, the artery-cleansing, the vascular inflammation, the blood pressure modulation, all of those things all take place. Again, nattokinase is a huge instigator for it, but it's not doing it alone, and it's capable of doing a whole lot more with the other enzymes around it than it is by itself, if that makes sense.

Michael Roesslein:

That makes sense. Yeah. So it's more about the synergy and the recipe interaction with each other in the way that then they would all optimize each other's function versus what's this one doing or what's this one doing or what's this one doing.

Michael Kramarczyk:

Exactly.

Michael Roesslein:

Interesting, yeah. I'm trying to see. I'm almost out of my questions. We have some from the audience that I would like to get to. Are there any contraindications for enzymes?

Michael Kramarczyk:

None, really. There's no side effects, contraindications, or interactions really with anything. If there was any [inaudible 00:28:09] that were going to appear after that, it might be in the case of real high-end blood thinners. If you're taking a baby aspirin, for example, there's no problem. Frankly, I have yet to hear of one single problem that even involves even the biggest of blood thinners, like Coumadin and warfarin. Yeah. In 16 years, I still have not heard one single documented issue with that. That being said, though, as far as a CYA for ACB formulas, I would just say if you are on any of the real big ones, then you may want to talk to your practitioner, primary care physician, before starting them, well, frankly any supplement on a systemic [inaudible 00:28:59].

Michael Roesslein:

Perfect. Yeah, Coumadin, warfarin, talk to your doctor. I say that about any supplement with Coumadin and warfarin just because those are the most aggressive medications regarding interactions and anything, and I always try to be as careful as possible. I haven't worked with individual clients in a few years, but I had clients with Coumadin, who are on Coumadin, and that was a rude awakening to me about how interactive certain medications can actually get.

Michael Kramarczyk:

[inaudible 00:29:28].

Michael Roesslein:

That was the trickiest one to work around.

Michael Kramarczyk:

Yeah, but it's important to point out, too, one of the neater things about systemic enzymes is they don't do anything arbitrarily. Like I mentioned, they target proteins in the body. They are specifically targeting proteins that don't belong in the body, so they're not going to just go in there and start wiping out all the fibrin in your blood. You need some fibrin in your blood. It's just most people have more than they

need. It's going to get rid of the excess. Like scar tissue, it eats up and devours excess scar tissue, but it's never going to eat up so much scar tissue that it's going to reopen the wound. That's because your body ... It's like I said earlier. The enzymes don't know anything. It's your body that gives them their brains, and they [crosstalk 00:30:18]-

Michael Roesslein:

It's giving the body more tools and more workers to direct.

Michael Kramarczyk:

Exactly, and it comes down to how the body tags proteins. There's only two ways. It's either an endogenous protein and it needs to be there or an exogenous protein, meaning it doesn't need to be there. Your body will only disperse the enzymes to go after and break down those proteins that are tagged as exogenous, the ones that don't belong. It's why it'll eat up a fibroid, but it's certainly not going to eat up the uterus that fibroid is in. They're both made up of a protein-based matter, but one belongs and one doesn't, and your body knows that.

Michael Roesslein:

That's smart. Every once in a while, I come across things and learn things like that it amazes me that it's able to do what it does. I don't know what some of the words are in some of these questions, but I'm going to ask for a couple clarifications. All right. I will start getting into some of these. Can you take the enzymes with other supplements that are recommended away from food, same as thyroid meds? I personally take them with a lot of supplements that are taken away from food. The only thing I would question is if one of those supplements was an amino acid maybe because it might eat the amino acid.

Michael Kramarczyk:

Aminos or certainly proteins. If you're supplementing with protein powders and things like that-

Michael Roesslein:

Yeah, no, protein powder I consider a meal, so I guess we should be clear on that. With supplements, the only thing I would think would be amino acid supplements because it might eat them. But I take it with a bunch of ... I take a lot of things when I first wake up and right before I go to bed. I don't know about the thyroid meds.

Michael Kramarczyk:

No, no interaction at all.

Michael Roesslein:

Okay. Yeah. I wouldn't think so. So it should be fine. Answer-

Michael Kramarczyk:

I mean zero, for sure.

Michael Roesslein:

Zero, okay. For sure. Will enzymes have anything to do with yeast or candida?

Michael Kramarczyk:

Absolutely.

Michael Roesslein:

And/or a damaged gut due to celiac disease. I don't know if the enzymes would actually repair a gut, but they do reduce systemic inflammation and can clear out a bunch of debris and scary things and gunk and things you don't want in there.

Michael Kramarczyk:

[crosstalk 00:32:28]. If you do have candida and stuff, there's the yeast and then there's those pustules that are actually releasing that yeast. It's going to break down those pustules, and then anything else that you're taking to help address the yeast itself can go into full gear and clean the problem up a whole lot more rapidly.

Michael Roesslein:

Yeah. Because if something's going in there, if you're taking some kill products, like there's the MegaMycoBalance that Kiran makes that's propolis and undecylenic acid. It's pretty strong for yeast. When you kill things, it makes junk and a lot of debris and damage and that sort of thing, so I think this would be really helpful as an add-in to clean up and get rid of that debris.

Michael Kramarczyk:

Exactly.

Michael Roesslein:

And the damaged gut is not a pretty picture, either. That's a lot of debris and a lot of junk and a lot of scarring and things like that. So I would think in those type of situations, it would be useful.

Michael Kramarczyk:

Well, yeah. It's great for leaky gut. It's great for IBS. It's great for Crohn's. There's a lot of places where you could put-

Michael Roesslein:

Crohn's was the first place I ever learned about them. I had a Crohn's client who came to me already taking them and then taught me about them, about enzymes, 10 years ago. Then I started to research them from there. What does it mean if somebody has diarrhea from taking proteolytic enzymes? Is that too much in one sitting possibly? Do you have any sort of titration or-

Michael Kramarczyk:

No.

Michael Roesslein:

... titrating up or any sort of detox reactions or anything very often?

Michael Kramarczyk:

Detox, it does happen once in a while. We actually used to track it. I'm trying to remember. I think it was one out of 12 or one out of 14. It wasn't really that many. One out of 12, one out of 14 people would go through some type of a detox. When that did happen, it usually presented as, I'd say, mild to maybe perhaps moderate flu-like symptoms. I'd say three to five days and that would be over with. Certainly, if you lower the dose and you weren't ramping the dosing up more gradually, that can lower that down, reduce the effects of that. Upping your water intake can certainly have a huge impact on that.

Michael Roesslein:

Yeah. "My son and I ate natto in Japan, and it's very good." You can have it. That's all for you. Do you just dose based on body weight at all, or is it just pretty standard for adults?

Michael Kramarczyk:

No. It's pretty standard. We've had children. We have numerous veterinarians that give it to dogs, cats.

Michael Roesslein:

Interesting.

Michael Kramarczyk:

I have one person that gives it to birds. I have a-

Michael Roesslein:

How do you get a bird to eat it?

Michael Kramarczyk:

Just they put it in the dropper in the water.

Michael Roesslein:

Oh, in the water?

Michael Kramarczyk:

Yeah, they put it in their water, and whatever bird seed or whatever that they normally would put in there, they don't give that to them. They'll just put it in the dropper, and then later on the day they'll do their feeding or whatever.

Michael Roesslein:

Interesting. Okay for pregnancy, I'm guessing?

Michael Kramarczyk:

With that, I would just ... Let me say this. Pregnancy is a very, very personal decision. I know some women that wouldn't even take vitamin C while they were pregnant.

Michael Roesslein:

Yeah. So talk to your doctor.

Michael Kramarczyk:

So that is a very personal decision. There really is no issue at all, none, zero, zilch. In fact, the abundance of enzymes that you're taking can even translate back into the child and even boost what they're having or what they're born with. So, yes, there's no harm at all. But, again, that is an extremely personal decision.

Michael Roesslein:

All right. Have you-

Michael Kramarczyk:

I'll put it this way. My own wife with both of our kids, she was on systemic enzymes the entire time.

Michael Roesslein:

Okay. Have you heard of a condition called Von Willebrand's?

Michael Kramarczyk:

Mm.

Michael Roesslein:

Okay. It's a bleeding disorder in which the blood doesn't clot well.

Michael Kramarczyk:

Okay.

Michael Roesslein:

V-O-N W-I-L-L-E-B-R-A-N-D-S. Von Willebrand's. It's not something I've ever heard of before, so I didn't know if you had.

Michael Kramarczyk:

I've heard of a variance of that type of condition.

Michael Roesslein:

Okay.

Michael Kramarczyk:

But not that one specifically.

Michael Roesslein:

It says it's a bleeding disorder in which the blood doesn't clot well. With people with clotting conditions like that, where the blood doesn't clot, would they want to talk to whatever practitioner they're working with regarding enzymes?

Michael Kramarczyk:

Certainly.

Michael Roesslein:

Okay.

Michael Kramarczyk:

It is important to point out, too, it's really important, especially with that question. Enzymes, especially nattokinase, a lot of people have this mindset that they are a blood thinner. They really are not a mechanical blood thinner, like a Coumadin or like an aspirin. They aren't mechanically thinning the blood. The only viscosity gain really comes from the active cleansing of the blood, getting that excess fibrin out of there, getting that protein build-up that formed around blood cells broken down and having the blood cells not stuck together and floating more freely from each other. That's going to improve blood flow. The enzymes are going to be a mechanism for those things and those things only. It isn't going to be mechanically thinning the blood, like a lot of other things do.

Michael Roesslein:

Okay. I just answered in the chat, too, for you who was asking that. That makes sense. Can you teach the body to make more enzymes by taking enzymes like you can teach the body to make more stomach acid by taking more HCL? I don't think so. I think production just slowly dwindles over time.

Michael Kramarczyk:

We are born, actually, with a finite supply, and our original design was actually that we were going to live off the land. We wanted an orange, we'd eat that orange, we'd pick it off the tree and we'd eat it right there, and, boom, we got all of that orange's enzymic value. But the fact of the matter is we just don't do that anymore, even when you start talking about organic, even when you start talking about, even to a large extent, farmer's markets. But even with organic, it's very jet-set trendy to be organic. Organic used to mean it was from farm to shelf at the store in, what, a day or three days. Now, it's a week of picking and processing, a week of packaging, a week of shipping, a week on the shelf, and then a week in your pantry. Well, merry Christmas. A month and half later, you're getting your organic food.

Michael Roesslein:

Yeah, your organic cherries from Chile in February, yeah, that were picked four and a half weeks ago.

Michael Kramarczyk:

But the simple fact is that same orange, you eat it right there, yes, you get 100% of its enzymic value. But you cut it in half and set it on your counter for just 60 minutes, one hour, and the enzyme value of that orange is already reduced by 50%.

Michael Roesslein:

Wow, that's wild.

Michael Kramarczyk:

And then on top of that, you have a lot more-

Michael Roesslein:

If it's pasteurized or processed in some way, it's all dead, so then it's all gone.

Michael Kramarczyk:

Oh yeah. That's-

Michael Roesslein:

We steal oranges off our neighbor's tree most mornings. It's pretty nice, one of the perks of living in California. I just go outside, pluck three of them, and make a little orange juice, a little cup, a little shot almost.

Michael Kramarczyk:

I have the same problem with my neighbor with our lemon tree.

Michael Roesslein:

Are you in Arizona?

Michael Kramarczyk:

Yeah.

Michael Roesslein:

Oh. Lemon trees make a lot of lemons, though, unless you're a lemon nut.

Michael Kramarczyk:

Oh, they do, and they know to help themselves, but yeah.

Michael Roesslein:

Overstaying their lemon welcome a little bit. "How can we convince clients that proteolytic enzymes are better than painkillers or prescription anti-inflammatories? I've tried to do this for seniors, but it falls on deaf ears." My answer to that is that there's no side effects and no interactions with their other medications and things. That would be my response. I don't know. You guys, I'm sure, have doctors that work with seniors.

Michael Kramarczyk:

No side effects and it's more gentle on your kidneys, more gentle on your liver, more gentle on your gut.

Michael Roesslein:

Liver damage, kidney damage, gut damage. If you listed off all the things that anti-inflammatories and painkillers do-

Michael Kramarczyk:

Especially in long-term use. If you're relying on them to cope-

Michael Roesslein:

Yeah, it's a long list of really dangerous side effects. I have two friends who each lost a parent to side effects from long-term painkiller and anti-inflammatory NSAID use. And my wife's aunt was on painkillers for a really long time and ended up with perforated bowels and all kinds of problems. So I would use fear, would be my personal approach. I would use personal connections to really tragic stories. But-

Michael Kramarczyk:

Not just that, but there's other benefits, too. It's not just going after the inflammation that's causing that pain. There's a lot of other things that systemic enzymes are doing and capable of doing while they're doing that. Immune system building, blood pressure modulation, there are a million things that enzymes are capable of in addition to the reducing pain part, and that's important to recognize, too. When talking to an end user, it's what else are you trying to accomplish in your health regimen? What you do during your day-to-day, what else are you trying to accomplish outside of reducing this pain? Because this'll help reduce that pain and do it with no side effects, but it's also going to do this and it's also going to do this and it's also going to do this. That might be worth pointing out, too.

Michael Roesslein:

There's no fish in the product, right?

Michael Kramarczyk:

Zero.

Michael Roesslein:

Okay.

Michael Kramarczyk:

No fish, no egg, no talc, no soy.

Michael Roesslein:

Yeah, the list is on the website, and it's like no everything.

Michael Kramarczyk:

Our list of what's not in it is way longer than what is in it.

Michael Roesslein:

Well, you got to make the list. Otherwise, you'll answer the same questions all the time.

Michael Kramarczyk:

Oh yeah.

Michael Roesslein:

How long after taking the enzyme can you eat? I usually wait about an hour.

Michael Kramarczyk:

Yeah, typically, an hour. I'd say about an hour before a meal or two hours after.

Michael Roesslein:

Okay.

Michael Kramarczyk:

As far as when to actually take it. You can take it either-

Michael Roesslein:

Can this improve circulation? Can this improve circulation? What suggested dose? Circulation and cardiovascular benefits, that's probably the number one-

Michael Kramarczyk:

It's one of the-

Michael Roesslein:

... reasons doctors and practitioners use proteolytic enzymes or systemic enzymes.

Michael Kramarczyk:

Well, the fibrosis, inflammation, and, yes, cardiovascular and great circulatory benefits.

Michael Roesslein:

Yeah. Suggested dose. I don't like to give personal recommendations to people that are not my clients. Like you said, the maintenance is one to two. A little bit more, acute use is two to three, or therapeutic use is two to three. That's twice a day on an empty stomach. I would go from that. I don't like to give specific answers like that. It's a legal gray area for us on a webinar to answer that kind of question with somebody we know nothing about.

"Do you need more as you age, especially up into the 70 age group?" Yeah. As we've stated, the levels are finite, so the older we get, the less we have, and then the more the body rations them, uses less of them, so there's less enzymatic function in the body, which is actually, if you really look at it, one of the things that is aging. We say aging as if it's a thing. It's actually a whole bunch of processes at the same time taking place, and loss of enzymatic function and volume or ... I don't know the right word to use there. The less enzymes in the body and less enzymes being used would contribute to a lot of what we consider aging.

I know I send these to my mom, who has some sore knee issue pain that the enzymes really help, and just because my parents are around 70, and so this is one of the things that shows up at their door with a little note on it that says, "Take two of these in the morning," and they don't ask questions anymore. They just do, so it's really nice. Took a little bit to get there, but we got there. Mom, if you're listening, thank you.

"So it is taken alone by itself and not combined with other supplements or painkillers." I take it with six different supplements in the morning. Everything that I have to take away from food, I take right when I wake up and then I take right before I go to bed. With painkillers, there's no drug interactions. Hopefully, if you get the right combination of supplements, you don't need the painkillers.

Oh, there's a specific blood thinner ... People on blood thinners, would you just say talk to your doctor? It's for AFib from Lyme disease.

Michael Kramarczyk:

Well, it's actually going to help a lot with Lyme's. But also, too, like I touched on earlier, I would not call it a therapeutic blood thinner because it doesn't mechanically thin the blood. It does improve viscosity but that's through the act of getting a lot of the garbage out.

Michael Roesslein:

Okay. Can you speak on the Lyme? Do you have doctors who use this with Lyme patients?

Michael Kramarczyk:

I have doctors that use it for Lyme's. Actually, going right back to the vets, there's this one lady that I work with-

Michael Roesslein:

I had dogs get Lyme.

Michael Kramarczyk:

I'm sorry?

Michael Roesslein:

Dogs get Lyme, right?

Michael Kramarczyk:

Actually, all she works with is horses.

Michael Roesslein:

Oh, horses. Do horses get Lyme, too?

Michael Kramarczyk:

Yeah. When she came across this, she tried it with her own horse, and now she buys ... Actually, she doesn't even buy the actual bottle. She buys bulk powdered-

Michael Roesslein:

Yeah, how many-

Michael Kramarczyk:

Like five kilos at a time.

Michael Roesslein:

... pills would a horse take?

Michael Kramarczyk:

That's what I'm saying. She does it five kilos at a time she buys.

Michael Roesslein:

Oh. So does she go over your head and get it from your lab, or she gets it through you guys?

Michael Kramarczyk:

No. Well, it's our blend.

Michael Roesslein:

Do you a sell a five kilo bag of it?

Michael Kramarczyk:

We try not to.

Michael Roesslein:

All right, don't get any ideas. My mind is just like, "Cool. Awesome."

Michael Kramarczyk:

We try not to. But, yeah, it's the only way. Capsules are pointless.

Michael Roesslein:

Yeah, a horse needs a lot of capsules, I would guess, like 20 at a time. There's no interactions with medications, so any of the questions that are medications ... If it's a blood thinner and you're really concerned about it or anything like that, talk to your doctor if you're really concerned about it. But this says sleeping medication. There's no interaction with something like that.

Small dog. I would probably just sprinkle ... How would you give it to a dog? Oh, dogs you can kind of force to take capsules. I'm assuming-

Michael Kramarczyk:

I have a vet, too-

Michael Roesslein:

... one would be enough for a dog under 15 pounds.

Michael Kramarczyk:

I have vets that do it a couple different ways. I have some that'll just mix it with water and just shoot it into their mouth. I have some that'll actually mix it into a small, real small, a tablespoon or two of applesauce and let the dog just lap that up. The big goal is to have an empty stomach, like I said. Apples are pretty neutral. Applesauce certainly isn't going to create a bunch of stomach acid. So something that's not acidic, something that's relatively neutral, something that's easily broken down, if not already broken down.

Michael Roesslein:

I'm answering a question in the chat, sorry. "I don't have any daily pain but is this something I could use here and there for any pain I might have? I'm 73." I know you covered some of the other benefits when you talked about how to convince older patients that it's better than taking painkillers. Personally, I would view this as a staple item for people over a certain age. For me, that age is probably lower than what it might be for others to choose. But, for sure, retirees and above.

Michael Kramarczyk:

Most definitely.

Michael Roesslein:

I don't know if you have doctors who work primarily with that age demographic, but you'd be hard-pressed to find something that it wouldn't impact in some way with somebody with that low of enzyme store and enzyme activity, right?

Michael Kramarczyk:

Not just that, but it's such a low dose that they would need two. So if they do have some discomfort or mild discomfort or this occasional ache or whatever, even just taking one capsule twice a day. Even if they just did that, like I said, you maintain with that really low dose, and in times of need, muscle recovery or an injury or pain, just general pain, then you up your dose to something higher. But after you get through that and your days are more manageable, then you can drop back down to that low maintenance dose.

Michael Roesslein:

That makes sense. Cancer. It just says, "Cancer," is the whole question. I have to be really careful with what I say around cancer, so I can't say a lot. I know that really high dose enzymes are used as part of a lot of ... Yeah, I'd definitely say it's okay. The next question came in, "Okay to take with cancer?"

Michael Kramarczyk:

Very okay to take with cancer.

Michael Roesslein:

Very okay to take with cancer. What I was going to say is that I know there are integrative doctors treating cancer that incorporate really high-dose enzymes into their treatment protocols. I don't know the treatment protocols. I don't work with cancer. I've never worked with cancer. I don't know the specific enzymes. I remember seeing people show me some protocols, and I was kind of stunned at the dose of the enzymes that they were being given or taking.

Michael Kramarczyk:

Most of those studies are actually based around, you mentioned them earlier, Wobenzym. And, yeah, you're talking a 60-pill dose is not-

Michael Roesslein:

Yeah, yeah, yeah. It was a whole bottle of Wobenzym would last three days when I did the math of it. I was like, "Holy crap, this is going to cost you a lot of money." But, yeah, it was super high-dose enzymes. Someone's asking autoimmune conditions like RA. My wife has multiple autoimmune conditions. The last three years have been a short flare, a slightly longer flare, and a much longer more difficult flare brought on by mold exposure and stress and a whole bunch of other factors, and enzymes have been part of our approach the entire time in getting that under control, part of a much larger approach when it comes to a complex autoimmune condition flare. I won't say that I believe that taking systemic enzymes alone will quell an autoimmune flare or get rid of a condition like RA, but it's definitely something we are personally using. Can you speak on that at all, Michael?

Michael Kramarczyk:

I absolutely can. Systemic enzymes, plain and simple, they are immune system modulators. If your immune system is down, they will amp it up. If your immune system is overactive, like in the case of an autoimmune condition, it'll tone it down. In the case of RA, you're also going to like the anti-inflammatory benefits, so you're not only going to be helping with the actual condition itself but you're also going to be reducing the discomfort, making the days more manageable while you're addressing it. So there is a lot of benefit that comes with that.

I have dentists that ... Dentists are typically some of the first people that spot Sjogren's, and so I have a lot of dentists that actually use it for that. I have a lady in Minnesota that all she does is deal with folks that have MS, and every single one of her patients are taking the Fibrenza. So, yeah, a lot of autoimmune benefits, for sure.

Michael Roesslein:

Is there any testing done on this product for purity or contamination or any of that type of stuff?

Michael Kramarczyk:

All the time. Tons. It's all tested the minute it arrives ... The bulk product that we buy, I should say, the minute it arrives at our manufacturing facility, it gets tested to verify everything that's on the documentation that comes with it. If it doesn't match, it's automatically refused. It's sent back. On top of that, it's tested one more time before it is actually encapsulated, or I should say blended and encapsulated. It is also tested again after the finished product is completely done. We'll grab some random bottles, start tearing capsules apart, and test them again. So, yes, not just tested for consistency, not just tested for potency, but also, yes, we do test for impurities and things like that as well.

Michael Roesslein:

And would you be willing to share with me in an email or something any of that testing or anything? I have somebody who'd like to see any sort of lab or third-party-

Michael Kramarczyk:

I don't have any of that readily available.

Michael Roesslein:

... purity testing.

Michael Kramarczyk:

That's not to say I can't. I'm happy to work on it for you. No problem.

Michael Roesslein:

Okay, cool. Yes, I will get the testing and send it to you. "For those of us trying to minimize the number of capsules we eat, can we just pour the powder straight into our mouth, or would that localize the reaction to our mouth too much?"

Michael Kramarczyk:

It wouldn't. But there are two things that could be hindered dramatically. One is by taking them out of the capsule, you're actually taking away the protection that those enzymes need to get into your intestine. There's a lot of harsh environments on their way down to that intestine, and taking the enzymes out of the capsule, you're basically taking all its protection away. The other downside to that, too, is quite simply the fact that you're going to have raw powder. Protein-

Michael Roesslein:

It's not going to taste good.

Michael Kramarczyk:

You're going to have protein-eating enzymes on tissue in your mouth. That's not going to end well.

Michael Roesslein:

Okay. So don't do that.

Michael Kramarczyk:

And take it with water. But I will say this. Your dosing is probably going to increase then because there will be some die-off, like I said, as it gets down to the small intestine. There will be some die-off of some of the enzymes, so if your dose would normally be two twice a day, maybe you might need to take four twice a day to achieve that same benefit. The capsule is a huge part of why our dosing is so low.

Michael Roesslein:

Gotcha. So, no, don't put ... Yeah, the [inaudible 00:56:25] the seaprose on your mouth would probably not go well if it sits there for a while. Kiran, I don't remember what he said. This was years ago, and whatever he said ... If you go back to the blog post I sent out this week with the clips from Kiran, watch the one about seaprose. I don't remember what he says, but I remember he told me something to demonstrate the potency of it, and I remember being a tiny bit frightened. I don't remember what it was, but it was something about putting it directly on your skin or there's other uses for it or something.

Michael Kramarczyk:

Your skin will turn red. It will-

Michael Roesslein:

Yeah, because it starts eating the protein.

Michael Kramarczyk:

It starts eating the dead tissues on your [inaudible 00:57:01].

Michael Roesslein:

Yeah. I remember just being like, "Wow, that's powerful stuff." Okay. People love the 12 videos. Cool. If you haven't checked those out, do that. It's literally a microbiologist breaking down ingredient by ingredient by ingredient or enzyme by enzyme, what's the research, what's the history, interesting factoids because he's a microbiology nerd and loves it. I use that word endearingly for anyone out there. We say it to each other. Kiran calls himself that. But it's a great resource. And he has nothing to do with the company. I just was like, "Hey, dude, you want to come on and make videos about enzymes?" He's like, "Yes, I love enzymes." So we did and there they are, so go watch those, too. They're great.

I think we're good here. Just to be sure. Cool. I think that's it. We are going to do ... Let me grab the links. For the last four and a half years or however long it's been, we've only carried the 240-count Fibrenza frankly because that's the one I take. That's the one I use because I take four a day, usually, so then the smaller bottle would only last me two weeks, and so I just didn't bother with it. But we got the 60-count bottle available now, which is a lot lower price, a lot more accessible to just give it a try. So I put that there in the chat. We have the 60-count, which is a couple weeks to a month depending on the dose, and then I'm also going to put the link in the chat for the 240-count, which is the one that I personally get that lasts me ... I don't even know. I don't-

Michael Kramarczyk:

Even at higher-end dosing, it's a six to eight-week supply.

Michael Roesslein:

Yeah, it usually lasts me eight to 10 weeks because there's some days I forget it or something. It's eight to 10 weeks is how long it lasts me taking it regularly. So I put those two there. I just put a code in the chat also that's "Fibrenza 15" that will, for a limited time here, take 15% off one-time order of any Fibrenza products. I'm pretty sure that's good on whatever volume of them you would want to order. Whitney, who does our processing and packing and shipping and stuff, just moved, and we had a little snafu with our order from them, so it'll take a few more days than normal. But it's all on the way, it's all fixed, it's all arriving next week. I just want to give everybody a heads-up on that. And hi, Whitney, if you're watching this.

So the two links are there in the chat to the 60-count, the 240-count. The "Fibrenza 15" code takes 15% off those products. Get the smaller one if you just want to give it a try. Get the bigger one if you want to really go at it or if you've got something you know that's acute that you want to be working on. I don't have any more questions. I think that was ... Just scanning one more time through that list that I sent you earlier today. I think that's it. I think we covered it. I think that was-

Michael Kramarczyk:

There was one question, actually, that I'm seeing here.

Michael Roesslein:

Do you see-

Michael Kramarczyk:

It's talking about lymphatic drainage.

Michael Roesslein:

I don't see that one. I might've closed the thing. You can speak on that if you have anything to-

Michael Kramarczyk:

Yeah, I was just going to say there's a gentleman that I work with. I don't know another human being that knows as much about the lymphatic system as this guy does. He's got-

Michael Roesslein:

Cool. What's his name. I want to interview him.

Michael Kramarczyk:

John Ossipinsky. O-S-S-I-P-I-N-S-K-Y.

Michael Roesslein:

Cool.

Michael Kramarczyk:

Yeah, he is the final word on anything lymphatic. And, yes, he uses them religiously in his-

Michael Roesslein:

Is he a doctor or researcher, just a health nut, or what?

Michael Kramarczyk:

Health nut, researcher, author.

Michael Roesslein:

Cool. I will look him up. That's interesting. People want the link to the videos. Check your emails from this week. They're in there. I don't have the link handy right now. They're in there. Also, if you click the blog ... Go to rebelhealthtribe.com and click "blog," it'll be the top post in the blog. It's a systemic enzymes post, so it's really easy to find in the blog. John Ossipinsky. Okay.

Immune modulator. Do you know how that pertains to TH1, TH2 immune function at all?

Michael Kramarczyk:

That I don't, I'm sorry to say.

Michael Roesslein:

I don't either.

Michael Kramarczyk:

I'll tell you what, though. Because I don't know, I really want to know. I work with over 500 different doctors. I'll find the answer to that.

Michael Roesslein:

Okay, cool. Ossipinskyhealthacademy.com.

Michael Kramarczyk:

[crosstalk 01:02:05].

Michael Roesslein:

Somebody already put it in the chat.

Michael Kramarczyk:

Did they say TH1 and TH2?

Michael Roesslein:

Yeah, TH1, TH2 balance when it comes to immune function. Yeah, you're not kidding, this guy's ... One of our attendees already put John Ossipinsky's website in the chat.

Michael Kramarczyk:

Oh.

Michael Roesslein:

Lymph-Brain Connection. Yeah, I remember when that came out. Interesting. Oh, he trains doctors. Cool. Well, I'm always looking for smart people to bring on shows to talk to, so thanks for the heads-up.

Michael Kramarczyk:

No problem.

Michael Roesslein:

Oh, that one only says "all panelists." Oh, a lot of people have it on "all panelists," so not everybody can see. It's Ossipinskyhealthacademy.com. All right. So the links are there. You guys will get a recording of this on probably Friday. We'll put it on that same post. So when you get an email with the recording of this, this video will be at the top and then at the bottom will be Kiran's videos with all the different enzymes. There will be buttons there for the 60 and the 240 Fibrenza, the coupon code, everything will be all in one place, and on the email and in there.

So I am fresh out. That was a lot of answers on enzymes. I really appreciate the time and the knowledge and the experience that you bring with working with 500-plus doctors. Systemic enzymes are such a versatile addition. When people ask, "What supplements do you take," I rotate things quite a bit based on my current needs, but there's a few things that never really leave my cabinet, and system enzymes and Fibrenza is one of those. I probably have about four or five products that I take consistently, that I have taken consistently for years, and this is one of them. It's one of my staples. So thanks for all the information. Really appreciate it. I can get you guys in touch with Michael if you have any questions that I can't answer. He's always super accessible and responds really fast, so email me-

Michael Kramarczyk:

If I miss a call, do leave a message. It very, very rarely takes me more than 10, 15 minutes to return a call.

Michael Roesslein:

No, you're the most responsive person I've ever worked with in the supplement industry or anything like that, for sure. Emails super fast, phone calls, and really accessible, so I always appreciate that. If you have anything, send it to me. I'll send it to him. We'll get you some answers if you didn't get your questions answered here. Much appreciated. Thank you, Michael. Hope it was fun.

Michael Kramarczyk:

I enjoyed it. Like I said, we did this once before and it was a long time ago. It was nice to do it again. I enjoy it thoroughly.

Michael Roesslein:

Yeah, yeah. I vaguely remember. I lived in San Diego then. We've moved twice since then.

Michael Kramarczyk:

It was right after Kiran did that enzyme video.

Michael Roesslein:

Was it?

Michael Kramarczyk:

It was right after that.

Michael Roesslein:

Okay. That was five very long years ago. March seems like five years ago at the pace we're in it right now. I think it was five years ago, and I've aged 15 since then. But we'll do it again in the future. Really appreciate it. And, again, everybody, shoot me an email if you have more questions. Thank you.

Michael Kramarczyk:

Take care. Thank you.