

ask DR. BEN

PODCAST TRANSCRIPT

Speaker: Dr. Ben Johnson

Episode 24: The Top 10 Biggest Mistakes You Must Avoid in Your Anti-Aging Routine_Part 1

Hello everyone. And welcome back to another episode of Ask Dr. Ben. I'm going back to my roots today, and I'm not exactly sure what I'm calling this episode, but what I want to call it is, Don't Do It. Please. Don't Do It. There are so many decisions being made right now by people who trust their physician's advice or potentially their esthetician's advice and move forward with the groupthink of society today. Today's episode is all about the strategies to fight aging that you should absolutely not do. I hope you find this helpful, share it with friends who have an addiction to whatever the poison is on my list. I had an aesthetic clinic utilizing some of these, so yes, I was part of the problem. Now, hopefully we can change this industry together.

For a while there I was doing acid peels. I was doing laser procedures. It was primarily laser hair removal, but I did do some laser skin resurfacing, doing Botox injections and filler. But it was a different filler at the time. So been there, done that. I personally have been through some experiences, which I'm not shy to talk about. We all learn from our mistakes. 20 years ago I tried Botox once, did not like it. About 18 months ago, I tried filler once, did not like it. In fact, it still haunts me today. I'll share that. Then, I even tried threading with this false interpretation of my brain that with enough active ingredients, I could get the threading effect to hold. And I've had an upper blepharoplasty.

All in, I've tried some different things. You know what? I have no regrets because you'll hear from me how it propelled me forward in my understanding of what should and should not be done, but I was already seeing it. So, where does all this start? This starts from being in this industry for 20 years, having a pretty holistic mindset almost out of the gate. And I did manufacture some harsher chemical peels in the early days, because as always, I never stop learning, never stop asking questions, never stop seeking for the best outcomes possible. So yeah, I made a Blueberry TCA Peel. That blueberry just took all the trauma away. It was so wonderful. Not. Alright, we're going to get into this list.

Aging is inevitable. I totally embrace it. With aging comes wisdom, with wisdom comes more joy. Hopefully in your life with every wrinkle, you have more joy, more wisdom, more, how should we say, quiet contentment throughout your daily practices. With that being said, I will acknowledge being vain. I care about how I look. It's part of my business. I do, probably more than most men, apply [skincare](#) twice a day and I take my [wellness](#) products, and I take a couple of other little supplements. So, I'm always trying to propel my health to the standard I hold. I hold a very high standard for myself. I had to go through a whole process of being less critical, which I also advise you. But, with all of this, with all of these podcasts and Insta Lives, and when my book comes out, I want to encourage you to do two things; One is, a Radical Self-Compassion. A friend of mine has instilled that into my brain, Radical Self-Compassion.

That was one of the many things I had to learn, because I'm naturally critical, looking to make progress. I have to assess all the damage before I can assess my progress. And that

ask DR. BEN

PODCAST TRANSCRIPT

became a practice of criticizing. It was a bad practice that I have almost completely escaped from at this point, thank goodness. But at the same time, all of us, in wanting to better ourselves, to improve how we look, so that we, what I would say age gracefully. That is a process that does require an honest assessment of where you're at. It requires making good strategic decisions on the choices to stay young. I can tell you, it's hard to find good advice. I think there are a ton of amazing dermatologists, but so many dermatologists are caught up in groupthink. Not really focused on the long-term aspect of any particular situation, the potential health side effects of some of the medications they're prescribing.

I'm just against it. I don't get it. This concept of trauma, I think there's a little bit of short-sightedness and I'm just going to say it, greed permeates this medical arena. What ends up happening is, you might invest in \$150,000 laser because everyone else you know has, and because you sat through a lecture where the marketing team of that laser company made a pretty compelling story, and you haven't departed from the groupthink train. So, it's very easy to go, "Well, yeah. So last year I was using that laser and this one looks like it's just a little better than that one last year, so I could see why I would want it." But better in what way? What's the end game here? Is trauma really the solution to rejuvenation? I've been challenging that from day one, I'm going to keep challenging it. That's what today is all about.

Hopefully this guide resonates within you. You make the right decisions for you. You recognize where the flaws are in the system, in the assessment of what's actually causing the aging. In the assessment of what it actually takes to help reverse aging. In the assessment of which procedures bring you closer back to your original beauty, and which ones take you further away. We'll look at it from that lens because that's the only lens I have anymore. Although I guess I could empathize with the medical community as someone comes in. I mean, I had the lasers, right? I made the calls like that. It's not hard to feel comfortable, sitting within 90% of all the dermatologists in your belief system, that's a very comfortable place to be. I've been out on the edge for probably, 10 to 15 years. And I'm comfortable there too. It's certainly a harder path on occasion. But anyway, I'm not here to complain, because I love where I've landed.

I love the results we're getting. I believe the advice I'm about to give you is absolute truth. It'll make sense to you when you understand again, how amazing your body is, that your body is always just in adaption mode. It's adapting to every new environmental change. Every nutritional change, every poison exposure that you might get, knowingly or unknowingly. It's a matter of working through that and going, "Wait a minute, it's not broken. It's just adapting to its new situation." So, let's jump right in. We're going down to the top 10. I'm going to go backwards from 10. There's less offensive, but still offensive things that are not on the list. Obviously, I only chose 10 topics, but let's just say that I think I leave the top part of this list up to number one, being the things that I think are most commonly causing the most significant damage.

Here we go.

Number 10, Steroids. Steroids, such a poorly understood substance. We're talking about corticosteroids. These are steroids that like cortisone, right? Dexamethazone, these creams and pills that people take when they're inflamed, because it helps the inflammation. It's so

ask DR. BEN

PODCAST TRANSCRIPT

funny, because of course I was talking to a friend of mine who had gone to the doctor and she was trying to express to the doctor, "Well, but doesn't this steroid hurt me, because it's suppressing my immune system?" And the doctor with great confidence and vigor responded, "No. No, because inflammation is bad." Essentially, I'm summarizing, I wasn't there. But yes, that is such a pervasive thought pattern in our culture, and it could not be more wrong.

Inflammation is not bad. Inflammation is repair. What was bad was what triggered the inflammation. And so that is either a pathogen, a wound, a toxin, or an emotion. That is what was bad, watching the body interact and all the immune cells go crazy, depending on the situation, is not the problem, so inflammation is synonymous with repair. When they talk about, "Oh, you've got inflammatory markers." Well, you've got immune cell markers and your immune system is brilliant. If you just knew the number of different cells they've identified. I've been diving in a bit to watching how they report their viral research and just reading about immune cells that I never knew existed. There are just thousands and thousands and thousands of them, you just have to sit back and as you watch these adaptations to the environment and your body does share information, I believe.

This is not a commonly believed concept, but I believe they've proven that when they put rats in a maze, the next generation of rats seem to know how to do the maze better. There's this sharing of information that is in the conscious stream. That information is a wealth of knowledge. Your DNA is like an antenna by many quantum physics experts' analysis. It's drawing that information and sharing it with the cells of the body. It's just one big, huge monstrous operation. When you use steroids, you are shutting that operation down. You are interfering with the process. It's not something that you want to consider if you can help it at all. I get it. If you're dying, anaphylactic reaction, this may not apply. There are going to be instances where I'm certainly not advising you to avoid steroids. What I'm advising you to do, is to think every time about it, like, "Really, is this really necessary for me?" Go to that inner voice, follow your intuition.

It will be hard sometimes. For example, perioral dermatitis is a common problem that I think is linked to constipation in most cases and steroid creams on the surface of that skin, are the number one prescription that was provided to these people who go to their doctor for it. For rashes, steroids are often prescribed. Acne, steroids are injected, and or sometimes prescribed. There's just a misunderstanding, so often when the skin has rashy, redness inflammation that, "Oh, that's bad. And we need to suppress what's going on." As opposed to figuring out what virus caused that rash or what toxin exposure caused that rash? Was it bleach? Is the rash on the chest? Was it a virus? Is that rash on the torso? These are not skin problems.

Again, we've been trained in medical school to think more superficially. When you realize everything's related to a toxin, pathogen or emotion, that changes the game. The number 10 absolutely do not do strategy, is steroids. Here's the main reason I put this in aging. The outcomes of people who chronically apply steroids to their skin are horrendous. Their skin scars down, it thins, it ages dramatically. The results of people who are on chronic steroids, inhalers for their asthma, for example, it affects their immune system. They age more rapidly and the problem is, your body's amazing, so aging more rapidly may not show up as obvious

ask DR. BEN

PODCAST TRANSCRIPT

until you're 10 or 20 years in to this chronic steroid use. Then it's like, "Oh, no going back now. I've lost it." So, I put steroids at number 10, as the one thing that I think a lot of people assume is good for the skin. That it calms the skin, when in fact it actually dramatically ages the skin and internal steroids dramatically age the body.

Number 9, Scrubs. Number nine in the list of often used, but mistakenly used strategies, are scrubs, but scrubs are exfoliants. Things that are physical abrasive materials that tear skin layers off, tear the lipid barrier off, and they are another highly misunderstood application. Why do I say it's misunderstood? Because most people think when they have dry skin, and their dry skin is flaky in particular, that of course you should have a scrub, because you got to get this flaky, dry skin off to reveal the less flaky skin underneath. It's still going to be dry. I don't know why people have convinced themselves that once they scrub away the flake, that somehow they've addressed the dry. If the skin's flaky, and I'm putting aside a peeling reaction to stimulation, the skin's flaky, it's dry, it's a deep dryness, it needs to be addressed at a different level than a scrub and a scrub actually makes your skin more dry. It's crazy. I know people think, "Oh, but I want it smooth, I'm going on a date tonight. I want to scrub that skin smooth." If you're going to have that moment, it's not the end of the world. I guess I should say this...Remember we're on the low end of the list here. We're not in the end of the world, decision-making stuff, but it's just not as healthy for the skin as you think.

Now there's this strategy called dry brushing, which I get. If you want to understand it from a detox perspective, what you're doing there is by shedding the layers of your skin, you're forcing your skin to have to turn over more quickly, to go back and replace the barrier. In that turnover, the skin is more likely to pull some toxins out. Then, there is this skin detox event and the skin is the largest detox organ in the body. So there's this mini skin detox event that comes with dry brushing that, if you want to do that once a month, it's not so bad. This is all not horrendous stuff, but just understand that it's not a practice that should be done routinely.

Your skin generally is struggling to keep up, because of the nutrient deficiencies in its dermis and the circulation declines. It's already struggling to keep up, which is part of the reason that it might feel dry. And that's always the irony. There are so many things we're doing in society that are actually worsening the result of why we're doing them. In my book, I'm going to have my longer list. Some of it shocks even me when I realize what we shouldn't be doing. But, as it comes to the face, a lot of people think, "Oh, it's so good to polish that skin right up." It feels tighter because you've stripped away the lipids with that scrubbing exfoliating action. There's a glow, there's a redness to the skin, because the skin is now like, "Oh geez, we've got some work to do." Circulation cranks up. There's a little flushing involved. You might even, with the scrub, beat the skin up a little bit.

That might lead to a little plumping, so now you even have your fine lines looking a little better and you're like, "Wow, this is so refreshing. My goodness. Look at the glow of my skin. I should do this more often." But you have now jumped out of your grounded state and you are thinking with your brain, letting your eyes deceive you. Because what you're seeing is an image that is created by harming the skin. Yes, in fact, every time you exfoliate your skin, you force nutrients that might've been there to keep your wrinkles from getting deeper into

ask DR. BEN

PODCAST TRANSCRIPT

the epidermal layers, because the skin puts that as a priority. Once the barrier starts getting damaged, it becomes a priority over the dermis and there's a shortage of nutrients as it is. You're always going to be stealing resources when you do this. Then of course, there's the fact that when you scrub that skin off, you have increased sun damage when you go outside. You have increased water loss, because the lipids are gone, but that's what's holding your water in your skin best. Then there's the sensitization factor, because now more things can get into your skin. Milia show up on the face, these little white bumps under the eyes typically, because that's the most common, thin zone to be abused, that also gets some extra makeup in that area and the makeup is usually causing milia. The milia gets in because the follicles are more exposed, because the whole barrier has been compromised. So yes, compromising your barrier, is not a good idea. Scrubs are not something you should consider to be a healthy thing.

Now, if you go into your esthetician once a month to get a facial and there's a deep clean and a scrub, that's fine with me. I'm really talking about that daily application of product. If you haven't heard this before, you have 15 layers of stratum corneum roughly, when you are born, and you have 15 layers of stratum corneum when you die. There are no real extra layers. Yes, there's extra layers on your feet, because your body intelligently puts them there because of the sheer pressure of walking and the weight. There are also extra layers on your palms because of similar reasons. I think what it really just is, you don't have extra layers on your stratum corneum, but you might have dryness because of a loss of lipids.

So, it seems like it's extra, the skin doesn't look particularly good, because the turnover has slowed for this or that reason. But no, the idea of removing that is not what you want to do. What you instead want to do is, figure out how to get the lipid barrier back on. Then your skin feels soft and smooth. Then of course we work on all the things that most of us work on to improve your texture, your color, your nutrient levels, your circulation levels, and all that stuff kicks into high gear. Next thing you know, you're stunning. You're walking around with a glow.

Number 8. Vitamin A. Don't use a regular vitamin A. This is number eight, because it's so common. Everyone has been brainwashed into believing that vitamin A is a necessary part of a skin care routine. It's not that simple. Nothing is quite that simple when it comes to the skin, right? It's so complicated. The skin has several different types of vitamin A stored in it. Each type of vitamin A does its own thing. A lot of the vitamin A's aren't meant to come through the surface skin, that's just how it is. Like plain old retinol. Retinol comes in two forms, it's called cis-retinol or trans-retinol, but plain old retinol is usually 50% cis and 50% trans, so that's retinol. Now, if you just use trans-retinol, it's more Keratolytic, it's more stimulating to the epidermis. It might even be arguably more harmful now that I think about it, but it tends to trigger more peeling.

Then you get the wounding. When you put retinols in your skin, they have about a 2% absorption rate, which means that the bulk of it is thankfully not going into your skin anyway. Number one problem of retinols, they don't penetrate well. So, of that 2% of the

ask DR. BEN

PODCAST TRANSCRIPT

molecules that do make it in, those get stuck in there as well. They don't make it all the way down. Most of them are not making it to your dermis, because your dermis isn't looking for that nutrient load. Number two, they get oxidized on the way down. Even if you're applying these serums at night, they're still there the next day, when you're in the sun, and they oxidize. Then they cause DNA damage. What I'm telling you is, if you're choosing a vitamin A, that's not what the skin uses to make collagen, then that vitamin A is not going to make collagen for you.

So retinols by everything I can read and all the research, are not the collagen molecule. Yes, you can get caught up in the science and go, "But they can turn into that collagen molecule." They certainly can. So does beta-carotene, but no one's rubbing beta-carotene on their face. Beta-carotene turns into retinol with a couple of modifications. Trust me when I say, the vitamin A choice you make matters, and there's only one choice and it's retinaldehyde. Every other choice that you make is a choice of something that's wounding your skin to get a result. You can prove it to yourself. You might be looking in the mirror going, "But wait, I love my vitamin A, I see that my fine lines are better. What's Dr. Johnson talking about, it doesn't look wounded."

It's true, subtle wounding doesn't typically create this massive inflammatory reaction. Most of the time, you're not going to see redness, or you might not even see irritation, especially once your skin acclimates to the poisoning. But what is happening in there is DNA damage. It is a false sense of anti-aging caused by edema, by fluid, in your epidermis, making your lines look more plump. I will show that to you by asking you to stop using it. Stop it. Watch what happens in the first week. I don't know if the entire inflammation is gone in a week, or if it's two weeks, so you might need to stop it for two weeks. Then you tell me if your lines did actually get better in the long-term. Because what is the point of wounding your skin every day, if there's no long-term gain to it. Just doesn't make sense to me.

When you use retinaldehyde, it's a thousand times stronger at making collagen. It's as equal as Retin-A to making collagen, but Retin-A is a disaster for your epidermis. Retin-A is actually a disaster for your dermis. It thins the skin by 18%. It's not the vitamin A choice you want. Retinol is used by such a high number of people, and it has a skin drying effect which dehydrates your epidermis. It has a skin aging effect, because of its own oxidative damage that it causes. But also because of the exfoliating, Keratolytic defect, it's called, where it removes your barrier so that when you go in the sun, you're sun sensitized. This is 24/7.

I don't care if you use it at night. That is also the case. Let's say you put vitamin A on your skin at night and it sheds one layer off of your 15 layers. When you get up in the morning, that layer is not back. It's not there and you go outside. Your skin now has less reflection of the sun, has more damage. I love the sun, I'm just speaking on the excess sun category there. I don't mean to say, as soon as you go in the sun, it's about damaging. But it is more damaging when you're on vitamin A. So yes, retinol, retinyl palmitate, retinyl acetate, cis-retinol, trans-retinol, adapalene, commonly prescribed for acne. That's the main list of what's being used out there. I'm telling you that is a negative in your fight against aging.

The reason why my list is the absolutely nots, is because all of these are making you older. All of these are leading to faster aging. That's the irony of it, is these are some of the most popular things used in this plane and they're leading to more rapid aging.

ask DR. BEN

PODCAST TRANSCRIPT

Number 7. Alpha hydroxy acids and or the Jessner peel. I'm including in this category people who use alpha hydroxy and beta hydroxy acids, beta hydroxy salicylic acid, lactic glycolic for the most part Malic, but not too many people are using high doses of Malic. Plus, the peels you do on a monthly basis typically, or every other month when you go get your facial.

You love to be spoiled. You love to be touched. Your skin feels firm and taught and glowy after you're done with that facial. But in fact, if they were using acids on you, it promoted aging. Again, going in and getting exfoliated once a month, not the end of the world. But if you add to that, acid burns, actually burning your skin with acids. Then of course you might have a problem. We are looking at a situation where on a daily basis, people apply alpha hydroxy acids, and you know why they do that? Because their wrinkles look better. But then when you say, "Well, isn't that the point? Is it making collagen?" Yeah, I think there is a little bit of collagen being made because you're peeling off your epidermal barrier and the dermis, which is short on collagen molecules, which is struggling to keep up with the collagen in your dermis, which is the true wrinkle component of your skin, is now having to divert those precious collagen molecules up to the epidermis, because you just shed them away.

And you're like, "Hey, this is a nice barrier, but let me take a few sections off." That totally distracts the skin, and diverts that manufacturing. But, if you're getting really aggressive with those acids, they work their way all the way down to the DEJ and they burn your DEJ. So that's permanent tissue you're now burning. What happens when you repeatedly burn your DEJ, you get age spots, you get bad texture changes. You start to get some pitting. You start to see your epidermal barrier becomes less and less capable of forming a healthy hydrated self. So, you start to see increased dehydration or at least a propensity for dehydration and or you go in and you're like, "Hit me with the good stuff." And they throw down layers of peels on your skin. They might even microderm your face first, so that peel can just suck right in and burn the bejesus out of deeper layers.

And it's a no, no, no. When did we decide that the skin likes to be burned? I don't know how we got there. Pretty amazing, right? It really is amazing when we we're going to look back in hopefully 10 years, but maybe it's going to be another 20 or 30 years. It may be like, "What did we do? It is kind of the way we look at bloodletting today. "You did what? You drain blood out of people and you think that's going to make them healthier?" Well, back then it was a, hell yes. There's a, hell yes going on right now with acid peels. So yes, we have a problem here, people.

You need to move away from that. Of course, here at Osmosis, we have a [Facial Infusion](#), which is an amazing 30 day collagen activating peel for professional use only. I call it a peel, because about a third of people, see some sloughing from all the stimulation. But really what it is, it's a rejuvenation activation. It's a feeding of a very important part of your skin. It's because there's so much retinaldehyde in that treatment, there's a ton of niacinamide dilating your skin, there's a ton of chlorella activating collagen from a different pathway, and four or five other collagen activators in it. It's just generating this collagen activation with no burn, with no wound, with no harshness, and with no shedding of the surface.

ask DR. BEN

PODCAST TRANSCRIPT

You don't even have a sun sensitivity issue after this treatment. That's what I prefer. All I can tell you is, I promise you, you're not getting younger in the slightest by doing those acid peels. There's no advantage to it. I generally put a limit on acid. I say, don't do more than 5% on a daily application basis of L-Lactic acid. I think L-Lactic acid has the nice benefit of being a natural moisturizing factor. As it traps in your skin, it actually draws water, as long as you're not using too much, that you're damaging your barrier. There's that fine line. You know, within [Osmosis](#), we have a product called [Polish](#), which is just barely over the top there at 6% L-Lactic acid, it's a fan favorite. A lot of people mistake that, because it's in my line, it's something that they can use regularly.

I just don't want you to overdo it. Maybe use it once a week. Don't be too aggressive with your skin. You want to make sure your barrier's healthy before you put it onto sensitive skin. But yes, it is true that if you look at the studies of these acid peels, you might see some evidence that the skin after a six layer Jessner's triggered collagen at a higher level. Again, that's what happens when the skin immediately goes to emergency fix mode and says, "We've got a whole barrier that's burned down to the ground. We need to do something about that." Now the AHA Jessner's are definitely the most common peels being done out there, because estheticians are still outnumbering derm clinics and this is what they're allowed to do.

We're going to talk a little bit later on the list about some more aggressive peels and how they affect the skin. These are typically considered superficial. But superficial, depending on how aggressive they are. If you do a 10%, 15% lactic, and a lot of it has to do with the pH of the product. It might not burn its way down all the way to the DEJ. It's still going to cause a whole lot of sloughing and extra work for the skin, but not nearly as much as it would be when you get more and more aggressive. I don't like the concept of microdermabrasion and then, a 20% AHA is just too aggressive.

Number 6, more aggressive peels. These are the peels where you go to the doctor and you're like, "Well, I get my pills at the dermatologist because I want real results or I want the super deep results." But here's where it gets scary, is these TCA and phenol peels that they are doing at the doctor's offices are burning your skin down into the papillary dermal layers. Honestly, phenol can be done to the point where it's getting into the deeper levels of your dermis and it gets quite scary at that point, because all bets are off when you start burning down into those layers. what is at high risk, is hypopigmentation.

Hypopigmentation is no pigment forms there anymore, after you're done with that particular procedure. Almost always people who get phenol peels get hypopigmentation, and that's a permanent big white blotch on your face. When you do this peel, there's a very high chance that you will look like you have a massive white spot on your face.

What it indicates, by the way, is that you've so significantly damaged the basal membrane, the DEJ of your epidermis dermis, that the melanocytes aren't capable of migrating to that area, or just are no longer present. What oftentimes can happen is the phenol burns down and kills all the melanocytes that are lining the hair follicles in that area, so now the backup melanocytes are gone. I think that can be one of the main causes, but in many cases, it seems to be a more superficial scarring if you will, of that tissue. Then there's the post-

ask DR. BEN

PODCAST TRANSCRIPT

inflammatory hyperpigmentation opponent with its own issue, so you have that problem to deal with, and then you have the problem of broken capillaries, which are essentially the skin creating new blood vessels in the surface near the DEJ, because you burned it so bad.

Now that it was damaged so much, they're putting extra blood supply there to try to repair it, long-term. Don't buy into it. I was back, in my way back days doing TCA peels and people would develop telangiectasis, as they're called or broken capillaries. I'd call the maker of the TCA peel and be like, "What is that?" "Oh, don't worry. That's just revealing. It was already there. That capillary you just peel their skin down to a level where now you can see that blood vessel." I bought that at the time, I'm telling you groupthink is powerful. I was like, "Oh, okay, well, I've got a laser that can shut that blood vessel, so we're all good." No, you're not. That's going to be on our next list. Just know that you doing more aggressive peels only increases your chance of long-term scarring. You might get PIH that you can heal. You might get hypopigmentation that almost no one can ever heal. You might get scarring. You might have some fat loss. I think I have heard about phenol peels effecting some of the subcutaneous fat, but old school phenol. They used to do some really aggressive phenol back 10, 20 years ago. You're going to get these permanent changes that you don't want.

We're through the first five of the absolutely please, do not do list of, how to stay young and how to stay beautiful. I'm telling you, the holistic medical approach uses the power of your skin, which is the only power we can rely on, to do its level best to get you back to square one. To get you back to healthy. The things that we've talked about to this point are absolutely progressing aging for you and you don't need that anymore.

It's time to make that shift. I promise you, there is light at the end of the tunnel. Make the switch before it's too late, before there's an accumulation of DNA damage we can't resolve. Before there's an accumulation of DEJ damage that we can't resolve. Hang in there and we'll see you next week.

Thank you for joining me. Remember to check out my Insta Lives on Osmosis Beauty, Instagram. I'm giving lectures on virtual show and webinar platforms, if you're an aesthetician. I give a lot of lectures to help teach you about this new way of doing skin and healing from the inside out. Look for me there and for everyone else, thank you for all the kind words. Remember, you can always write me at drben@osmosisbeauty.com. You have direct access to me, because I want to help you make the right decisions for you and your family. Let's do that together. Talk to you soon.