

Hormones According to Dr. Craig Koniver

Shawn Ryan Show #330 • “The Godfather of Peptides” • Starting ~1:56:00

What are Hormones? (Dr. Koniver’s framing)

“Hormones by definition are just messenger molecules... As people age, I think the most tangible thing that happens is that their hormones decline. The goal is not to manipulate. The goal is not to make your arms as big as your legs... We never want to manipulate the hormones. We want to help you get back... The goal is never to make someone younger. I think that’s a silly, silly goal. The goal is to help people feel their best so they can perform their best at any age.”

— Dr. Craig Koniver, Shawn Ryan Show #330 (~1:56–2:01)

Core philosophy: Hormones are foundational. Test and optimize based on how the person feels and lab data—not just “normal for your age.” Reference ranges often reflect a tired, overweight, medicated population. Aim for the upper end of the range when it matches how someone feels. Avoid super-physiologic levels.

Hormones He Discussed & What They Are For

Hormone / Category	Who / Priority	What Dr. Koniver Says
Testosterone	Men – #1 priority	Biggest deal for men. Low testosterone is the #1 risk factor for heart disease, stroke, depression, and dementia. Men who replace it report higher quality of life across the board. Goal is optimization based on how you feel, not chasing a 21-year-old number or bodybuilding levels. Too much → excess estrogen conversion (bloating, water weight, emotional swings).
Thyroid	Women – #1 priority	Most important hormone for women. Low thyroid in women has become an epidemic; most women in their 40s and 50s will have some thyroid problems. Critical for metabolism.
Cortisol (Adrenal / Stress)	Both – foundational	Main stress hormone from the adrenal glands. He compares hormones to kids on a playground: testosterone is the fun, happy kid; cortisol is the big bad bully. Too much or too little cortisol negatively impacts the other hormones.
DHEA & Pregnenolone	Both – adrenal support	Adrenal hormones he lists alongside cortisol. Part of the broader adrenal/stress hormone picture.
Estrogen & Progesterone	Women primarily	Listed among the key hormones that decline with age. Important to understand where a woman is clinically and in the lab before considering bioidentical replacement.
Growth Hormone	Both	Anabolic hormone (like testosterone). Declines with age and stress. Supports mending, healing, recovery, and tissue rejuvenation. Peptides are often used to give a “push” to the body’s own production instead

		of always using direct GH.
Insulin	Both – metabolic	Signaling hormone that helps the body utilize glucose.

Notable insight on “normal” ranges: Reference ranges come from the general population—which is largely overweight, tired, depressed, and on multiple pharmaceuticals. Being “normal for your age” often just means mediocre. He prefers the upper end of the range when it matches how the patient feels.

Baboons & testosterone (Robert Sapolsky reference): Alpha males (highest T) and bottom-ranked males (lowest T) had the shortest lifespans. The #3 in the hierarchy lived longest. Stress of always defending the top or fighting to climb is costly. Koniver’s takeaway: aim higher, but not for maximum—base it on how you feel and avoid excess.

Source: Shawn Ryan Show #330 – Dr. Craig Koniver (hormone discussion begins ~1:56:00). Chart compiled from the episode transcript for educational reference.