THINGS TO CONSIDER BEFORE YOUR FIRST PED CYCLE

A practical guide for Indian lifters

Training, nutrition, baseline bloodwork and health monitoring before PED use.



stay strong. stay brown.

CHAPTER 1

Are You Living the Lifestyle?

Before you even start thinking about your first PED cycle, the first thing I'd ask is: **are you actually living the bodybuilding lifestyle?**

And I don't mean you've been smashing the gym for six months, cleaned up your diet a bit and now you're thinking, *right, what cycle should I jump on?*

I'm talking about training properly, eating properly and doing it consistently for a number of years, because PEDs shouldn't be what makes you serious about bodybuilding. That part should already be there.

Have You Actually Been Training for a Few Years?

There's a massive difference between going to the gym and actually knowing how to train. After you've been doing this for a few years, you start figuring out your own body. You know which exercises work for you and which ones don't, which body parts grow easily and which ones need more work, how much volume you can handle, how hard you actually need to train and how much recovery you need.

You're not going to learn all of that from watching a few reels or YouTube videos because it takes time, and if you haven't built that base yet, PEDs aren't going to build it for you.

What Does Your Diet Actually Look Like?

This is a big one, especially for us Indians. You don't need to suddenly start eating boiled chicken, broccoli and rice six times a day just because you're into bodybuilding, because you can absolutely eat Indian food and build a great physique, but you need to know what you're actually eating.

Do you have some idea of how many calories you're eating, whether you're getting enough protein and roughly how much carbohydrate and fat you're consuming? With Indian food, you've also got to remember all the stuff that's very easy to forget about, including the oil in the sabzi, ghee on your roti, butter, fried food, sauces, snacks and sweets, because it all counts.

Then there's protein. I hear this all the time: *"Bhai, protein toh bohot hai. Dal khata hoon, paneer khata hoon, doodh peeta hoon."* Great, but how much protein are you actually getting? Dal has protein, paneer has protein, milk has protein and nuts have some protein, but that doesn't automatically mean you're eating a high protein diet.

This Is What Your Macros Should Roughly Look Like

MACRO	USEFUL STARTING RANGE
Protein	1.6 to 2.2 g per kg of bodyweight. Around 2 g per kg is an easy target.
Fat	Around 0.5 to 1.5 g per kg of bodyweight, depending on calories and preference.
Carbohydrates	Generally the remainder of calories. Around 3 to 5 g per kg when calorie intake allows.

If you weigh 80 kilograms, around 2 grams of protein per kilogram works out to roughly 160 grams of protein per day. And I mean actually 160 grams of protein, not 160 grams of chicken breast, because there's a big difference.

These aren't magic numbers, and your calories and macros will need to change depending on what you're trying to achieve. Someone trying to put on size shouldn't necessarily be eating the same amount as someone trying to get down to very low body fat, but before you even start thinking about PEDs, you should understand these basics and be able to look at your own diet with a pretty good idea of how much protein, carbohydrate, fat and total calories you're actually eating.

Because if you don't understand how to feed your body to grow, adding PEDs isn't suddenly going to teach you.

Do You Know How to Gain and Lose Weight?

Before PEDs come into the picture, you should already know how to change your physique through food and training. You should have gone through a proper gaining phase and know roughly how much you need to eat to put on weight without simply getting fat, and you should have dieted properly at least once as well.

You need to know what happens to your body when calories start coming down, including what happens to your strength, hunger and recovery, and how much cardio you actually need. You learn a lot about your body by going through both sides of it, because if you have no idea how your body responds to food, training and cardio naturally, once you add PEDs you're not going to know what's actually doing what.

What Happens When You're Not Motivated?

Anyone can train when they're motivated, but what happens when you're not? What happens when work is hectic, when you're travelling, when you're tired, or when everyone around you is eating whatever they want and you've got your meals planned?

And if you're Indian, you already know how this goes. Try telling your mum you don't want another roti because you've already hit your calories for the day. Good luck.

I'm not saying you need to stop eating Indian food, stop going out or become some antisocial robot, because you just need to learn how to make all of this fit into your life. If you're going to do this for years, it has to be sustainable.

PEDs Aren't Going to Give You Discipline

PEDs can help you get more out of your training and nutrition, but they can't do the training for you, they can't fix your diet and they definitely can't give you consistency. If you're missing workouts every week, eating properly Monday to Thursday and then going completely off the rails on the weekend, sleeping five hours a night and you don't even know roughly how many calories you're eating, PEDs shouldn't be the next step.

Get the basics right first, and ask yourself one question before you even start thinking about your first cycle: **if PEDs didn't exist, would I still be training and living this lifestyle five years from now?**

If the answer is yes, then at least you know you're doing this because you genuinely love training and bodybuilding, not because you're looking for a shortcut.

CHAPTER 2

Bloodwork Before PED Use Is Non Negotiable

If you're considering your first PED cycle, getting comprehensive bloodwork done before you touch anything is absolutely essential, and don't listen to anyone who tells you otherwise. It doesn't matter if your friend has been using steroids for ten years and says he's perfectly healthy, or if the biggest guy in your gym tells you that bloodwork isn't necessary for a basic first cycle, because you need to know what is happening inside your own body before you introduce PEDs.

Why Is Baseline Bloodwork So Important?

The main reason for doing bloodwork before using PEDs is to establish a proper baseline of what your body looks like naturally, because once you introduce testosterone or other anabolic steroids, a number of markers can change significantly. Your natural hormone production can become suppressed, your cholesterol can change, your haemoglobin and haematocrit can increase, and your liver, kidney and cardiovascular markers can all potentially be affected depending on what you are using.

If you never tested yourself beforehand, you have nothing meaningful to compare your future results against. For example, if you do bloodwork eight weeks into your first cycle and your LDL cholesterol is high, how do you know whether the PEDs caused it or whether your LDL was already high before you started? The same applies if your liver enzymes are elevated, your haematocrit has increased or your kidney markers don't look great.

This is exactly why baseline bloodwork matters, because you want to know where you started before trying to understand what has changed.

Don't Assume You're Healthy Because You Feel Healthy

One of the biggest mistakes people make is assuming that because they feel good, train hard and look healthy, everything inside their body must also be healthy. I hear things like, *"Bhai, I feel completely fine,"* but feeling fine doesn't tell you what your LDL cholesterol is, what your ApoB looks like, whether your haematocrit is already elevated or whether your blood pressure is sitting at 120/80 or 150/90.

Many of the health markers that can be affected by PED use can change without giving you obvious symptoms, particularly in the early stages, which is why looking good, being strong and feeling healthy are not substitutes for actually checking what is happening inside your body.

What Bloodwork Should You Get?

Before your first cycle, you want to get a reasonably comprehensive picture of your overall health rather than simply checking testosterone and assuming everything else is fine.

Full Blood Count

Your full blood count should include **haemoglobin, haematocrit, red blood cell count, white blood cell count and platelets**, with haemoglobin and haematocrit being particularly important because androgen use can stimulate red blood cell production. If your haemoglobin or haematocrit is already sitting towards the higher end before you have even started using PEDs, that is something you definitely want to know beforehand rather than discovering it several months into a cycle.

Cholesterol and Cardiovascular Markers

Your lipid testing should include **total cholesterol, LDL cholesterol, HDL cholesterol and triglycerides**, but I would also include **ApoB and Lipoprotein(a), commonly called Lp(a)**, because the standard cholesterol panel doesn't always give you the complete cardiovascular picture.

ApoB provides additional information about the number of atherogenic particles circulating in your blood, while Lp(a) is particularly useful to establish because it is largely genetically determined. For most people Lp(a) doesn't need to be repeatedly tested once you have established your baseline unless there is a specific reason to check it again.

This becomes particularly relevant with PED use because anabolic steroids can negatively affect your lipid profile, and some compounds are considerably worse for cholesterol than others, so you want to know exactly where your cardiovascular markers were before you started.

Check Your Liver

For liver health, I would include **ALT, AST, GGT, ALP and bilirubin** rather than simply looking at one liver enzyme in isolation. Something worth understanding as a bodybuilder is that hard resistance training can sometimes increase AST and ALT, particularly AST, which means seeing one elevated number doesn't automatically mean your liver is damaged.

Your results need to be looked at in context alongside markers such as GGT and bilirubin, as well as factors such as how recently you trained, medications, supplements and alcohol consumption. This is another reason why having a baseline from before PED use is so useful, because you can see what these markers normally look like for you.

Check Your Kidneys Properly

For kidney health, include **creatinine, eGFR, urea, electrolytes, Cystatin C and a urine albumin to creatinine ratio, commonly called ACR**.

Creatinine and the eGFR calculated from it can be more difficult to interpret in someone who carries a decent amount of muscle, trains hard, eats a high protein diet or uses creatine, because these factors can influence serum creatinine. A muscular bodybuilder can therefore have higher creatinine and a lower calculated creatinine based eGFR without that result automatically meaning they have kidney disease.

This is why I would also include Cystatin C, which provides another way of estimating kidney filtration and is much less dependent on muscle mass than creatinine. I would also include a urine albumin to creatinine ratio because this checks whether abnormal amounts of albumin are leaking into your urine, and albuminuria can be an important sign of kidney damage that gives you information you simply aren't getting by looking at serum creatinine alone.

Rather than looking at creatinine and eGFR in isolation, establishing creatinine, eGFR, Cystatin C and urine ACR before you begin gives you a much better kidney baseline to compare against later.

Check Your Blood Sugar

Your baseline should also include **fasting glucose and HbA1c** because you want to understand what your glucose control looks like before introducing PEDs or any other performance enhancing drugs that could potentially influence metabolic health. Again, the point isn't simply to see whether your result has a green tick next to it on the pathology report, but to establish what is normal for you so you can identify meaningful changes later.

Get Your Hormones Checked Before You Suppress Them

Your hormonal testing should include **total testosterone, SHBG, free testosterone or calculated free testosterone, estradiol, LH, FSH and prolactin**, because this could be the last opportunity you have to see what your natural hormonal profile looks like before introducing exogenous testosterone.

LH and FSH are particularly important to establish beforehand because once you start taking exogenous testosterone, these hormones will generally become suppressed as your body's own testosterone production shuts down. If you decide six months later that you want to know what your natural testosterone, LH and FSH were before you started, you can't go backwards and recreate that information, which is why getting these markers tested beforehand is so important.

Don't Forget Blood Pressure

Blood pressure obviously isn't part of a blood test, but I would absolutely include it as part of your baseline health assessment before PED use because elevated blood pressure is an important cardiovascular risk factor and PED use can make blood pressure management more difficult.

Buy a decent blood pressure monitor and learn how to take your readings properly rather than checking it once immediately after coffee, training or rushing home from work. Take several readings under similar resting conditions and establish what your normal blood pressure actually looks like before starting PEDs, then continue monitoring it regularly once you begin.

A Practical Bloodwork Timeline

Getting bloodwork once before your first cycle is the starting point, not the end of your monitoring. If you're going to use PEDs, you need to know whether the markers you established above are changing once the drugs are actually in your system.

BEFORE STARTING	Get the full baseline panel within a few weeks before starting. Include natural hormones, full blood count, lipids, ApoB, Lp(a), liver function, kidney function including Cystatin C and urine ACR, fasting glucose and HbA1c, and establish your normal blood pressure.
AROUND 6 TO 8 WEEKS	Repeat full blood count, lipid profile and ApoB, liver and kidney markers, glucose markers and relevant hormones including testosterone and estradiol. LH and FSH are expected to be suppressed on exogenous testosterone.
EVERY 8 TO 12 WEEKS IF CONTINUING	For longer periods of use, repeat testing to watch trends in haematocrit, HDL, LDL, ApoB, liver enzymes and kidney function. Test sooner if something is already abnormal, compounds or dosages change, or symptoms develop.
AFTER COMING OFF	Post cycle bloodwork helps show what is recovering and how close you are getting to your original baseline. Timing depends on the compounds used and how long they remain in the body. Testosterone, LH and FSH become particularly relevant again.
LONG TERM	If PED use continues over the years, comprehensive bloodwork every few months should become part of the lifestyle, with additional testing when results, symptoms or changes in use give you a reason to look sooner.

Blood pressure is different because you don’t need to wait for bloodwork to check it. It takes a couple of minutes at home, so monitor it regularly throughout PED use and look at your average readings over time rather than obsessing over one isolated number.

Understand Your Results

Getting the blood test is only half the job because you also need to understand what those numbers mean and, more importantly, how they change over time. If something comes back significantly abnormal or concerning, get it properly investigated rather than assuming it is normal because you’re a bodybuilder.

If you speak to a doctor about abnormal results while using PEDs, be honest about what you’re taking because they can’t properly interpret what is happening if they don’t have all of the relevant information.

Keep Copies of Every Blood Test

Don’t just look at the reference ranges on your pathology report, see a bunch of green ticks and forget about it. Save every blood test and keep the results organised by date because, over time, the trends in your results can become just as important as whether an individual result happens to fall inside a laboratory reference range.

You want to be able to look back and see what your HDL and ApoB looked like before PEDs, what happened to them during your cycle, whether your haematocrit steadily increased, whether your kidney markers changed and whether those markers eventually moved back towards your original baseline.

If you continue using PEDs over the years, having that history becomes incredibly valuable because you are no longer guessing about how your body responds, you actually have the numbers sitting in front of you.

This Isn’t the Part to Skip

Bloodwork might not be the exciting part of bodybuilding, but if you’re mature enough to make the decision to use PEDs, you should also be mature enough to understand and monitor what they are doing to your body.

Get comprehensive bloodwork before your first cycle, keep those results, establish your normal blood pressure and continue monitoring your health while you’re using PEDs and afterwards. Don’t let a friend, coach, influencer or some random guy at your gym convince you that bloodwork isn’t necessary simply because they never bothered doing it themselves.

Bloodwork before your first PED cycle is non negotiable.

Conclusion

Before you even think about your first PED cycle, make sure you have actually built the foundation to justify taking that next step. You should already have years of consistent training behind you, understand how your own body responds to different styles of training, know how to structure your diet and macros, and have experience both gaining muscle and losing body fat. PEDs can enhance what you are already doing, but they aren't going to teach you how to train, fix a poor diet or suddenly give you the consistency and discipline that you haven't developed naturally.

The same applies to your health. Get comprehensive bloodwork before you start so you have a genuine natural baseline, know your blood pressure and keep monitoring both once PEDs are introduced. Blood count, cholesterol and ApoB, liver and kidney function, glucose control and your natural hormone profile all matter, and the trends over time are far more useful when you know exactly where you started. If you're going to make an informed decision to use PEDs, then training, nutrition and monitoring your health all need to be treated as part of the same lifestyle.

Want to Talk About Your Next Step?

If you're considering PED use and want to make sure you're approaching it with a proper understanding of your training, nutrition, bloodwork and the health markers you should be monitoring, **reach out to me through the website to book a consultation.** You can also connect with me on Instagram and follow my content where I talk openly about PEDs, bodybuilding, bloodwork and my own experiences along the way.

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