



CELLWELL · RESEARCH INFRASTRUCTURE FOR HEALTH

We read the study. Then we **translate** it.

CellWell turns research into relationships that humans and AI can actually use. over 425,000 peer-reviewed studies from international databases, read, tiered and indexed by ingredient, mechanism, function and outcome, in plain language, with every claim traceable to its source.

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Health research is huge, scattered and **unreadable**. Brands, clinics and AI tools all need it, and none of them can read it.

The problem

A supplement brand wants to say something true about an ingredient. A clinic wants a patient handout they can defend. An AI assistant wants to answer a health question without inventing a citation. Each one faces millions of papers, in a dozen languages, behind paywalls, written for specialists.

What CellWell does

We fetch the papers from 470+ source databases, read the full text, write a plain-language takeaway, grade the strength of evidence, and tag every study by ingredient, mechanism and outcome. Then we connect them: ingredient to pathway to lab marker to outcome.

Why it is different

We do not aggregate. We read. Over 1,000 fabricated citations and 54 retracted papers have been caught and removed by reading, never by trusting a search result. And we do not claim to hold every study: when a topic is not in the library yet, the software goes out and finds it, reads it and files it. Searching is free for everyone.

425,000+

studies read and summarized,
international

470+

source databases, many
languages

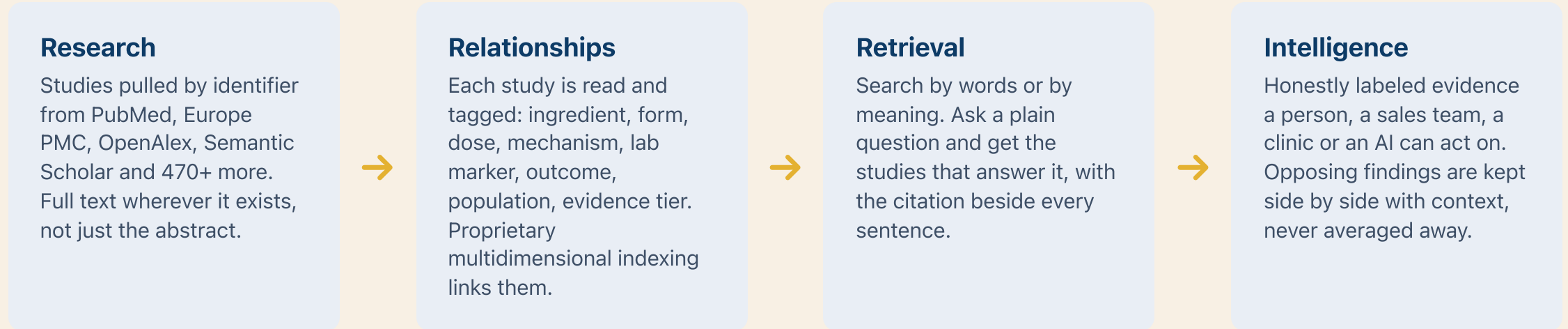
~10,000/day

new studies added, every day

\$0

to search. Always.

Research → Relationships → Retrieval → Intelligence



The claims ladder every deliverable climbs



Start with what you want to say. Find the mechanism. Show the process in the body. Grade the evidence. Attach the citation. Write the plain-language version that a customer, a patient or a regulator can read. Output is designed to support compliant communications and reduce unsupported-claim risk, with final regulatory and legal review on your side.

Nothing in the body works in isolation. Neither does the research.

The specialists do not share a language

A liver doctor and a kidney doctor share a patient and not a vocabulary. A physicist measuring light and a biochemist measuring the enzyme that absorbs it are describing one event from two sides. A neuroscientist and a cardiologist both study the vagus nerve and file it under different names. Each field is excellent. Nobody is responsible for the whole.

CellWell reads every paper in its own language and files the **relationship**: ingredient to mechanism to lab marker to outcome, across fields. A question asked in one discipline returns the evidence from all of them.

Where the fields already meet, measured

STUDIES THAT SIT IN BOTH	COUNT
Brain and heart	3,465
Gut and mood	2,111
Iron and the gut	1,358
Kidney and liver	1,337
Physics and biochemistry	761
Meaning and physiology	509
Thyroid and liver	366

Cofactors: a nutrient is never the whole story of itself

Searched alone, a nutrient reads as thin, because its evidence is filed under its partners. So every search expands along five axes: **transport** (what carries it), **partners** (what must be present for the pathway to run), **antagonists** (what depletes or displaces it), **pathways** (the enzyme or cycle), and **markers** (what moves downstream).

Iron is the case everyone gets wrong: ferritin is a number, not a mechanism. Usable iron depends on vitamin C, vitamin A, copper, an intact gut and light exposure. **Lithium and methylation** searched alone came back empty seven ways; expanded through B12, folate and homocysteine, the literature was there all along.

The more cited evidence sits behind your product or topic, the more **authority** you hold

People no longer only Google a health question. They ask ChatGPT, Perplexity, Gemini and Google's AI answers, and those engines answer by citing sources. A page that holds real studies, summarized honestly and linked to their identifiers, is the page they quote. A page with adjectives is the page they skip.

Every cited product page, blog post or course built on CellWell carries that evidence with it: the studies, the strength of evidence, the plain-language takeaway, and structured data a search engine and an answer engine can both read. Your content stops competing on volume and starts competing on proof.

How we help: cited blog and product content built with our marketing partners, search and AI-engine optimization run on every page before it ships, and a citation count that keeps growing because the library does. CellWell stays the independent source that is cited; it never sells or recommends the product.

THE AUTHORITY LADDER

1 • Studies on your ingredient or topic

How many, how strong, how recent. Measured, not guessed.

2 • Content that cites them

Product pages, blog posts, handouts, courses. Each sentence traceable.

3 • Search and AI engines pick you

Structured data, source links and quotable summaries are what answer engines cite.

4 • You become the reference

Relatable to the scientific community, credible to customers, cited by machines. It compounds as the library grows.

WHO IT IS FOR

Five doors into the same **library**

Product companies

Supplement, food and device brands. Evidence briefs, compliant claim sets and cited product pages for your SKUs, plus ongoing monitoring so a retraction or a new trial never catches you by surprise.

Education & clinics

Co-branded "Powered by CellWell" evidence embedded in your patient education, courses and practitioner tools. Cited curriculum built to your scope. CellWell never implies accreditation.

Teams & franchises

Seats for every location with central billing, a shared workspace and sales enablement so every rep talks about products the same compliant way.

Private index

Your own curated shelf inside the library: the studies behind your portfolio, your ingredients or your protocol, indexed and translated, with new research flowing in as it publishes.

Developers & API

Search by words and meaning, provenance and relationships for your own app or AI assistant. Answers with citation IDs. No bulk export at any tier, by design.

The Lab Atlas

Our consumer tool, powered by CellWell: a person's lab results connected to the diet and nutrient evidence behind them. It has its own site, thelabatlas.org, and is priced and sold there, never here.

Enough to know if it fits. A written quote follows a 20-minute call.

CELLWELL SERVICES	FROM
Compliant claim set, one product	\$500
Evidence brief + cited product page	\$1,500
Device claim set + verified specs	\$1,000
Catalog monitoring, ongoing	\$1,000 / month
Sales team workshop	\$2,000
Cited course or curriculum	\$5,000

SCOPED ON A CALL	WHY
Teams & franchises, per-seat workspaces	Depends on seats and setup
Coaches & clinics	Depends on scope
Private index	Priced per corpus
Developers & API	Depends on volume

Searching the CellWell library is free and stays free. Catalogs, team and clinic setups vary, so seat and program pricing is set on the call, in writing.

Book a 20-minute call → thecellwell.org/contact

Quick answers

Is this medical advice?

No. CellWell is a research library and a translation layer. It tells you what the studies found and how strong the evidence is. Decisions stay with the person and their clinician.

Who writes the summaries?

They are authored from the full text, not the abstract, run through ten mechanical gates (citation must resolve, takeaway must match the body, no disease claims beside a product) and checked against the source. Anything that fails is pulled.

Do we have to pay for the database?

No. Nobody pays to search and nobody pays to be indexed. You pay for the work built on top: claim sets, pages, courses, monitoring, seats, API access.

How fast is a first deliverable?

A single product claim set or cited page is typically days, not months, because the reading is already done. Catalogs and courses are scoped on the call.

How is this different from Google or PubMed?

They return documents. We return read, graded, tagged studies with a plain-language takeaway and the connections between them. PubMed hands you 4,000 results; we hand you the twelve that answer the question and say how sure to be.

Can we trust the citations?

Every citation resolves to a real paper by its identifier. Over 1,000 fabricated or mismatched citations have been caught and removed. A citation that cannot be traced does not ship.

Can our own AI use it?

Yes, through the API. Your assistant asks the librarian a question and gets answers with citation IDs. It never gets the shelves: no bulk export, no list-all. You bring your own AI and your own tokens.

Do you have every study?

No, and nobody does. We hold over 425,000 and add about 10,000 a day. When your topic is not there yet, the software goes and finds the studies, reads them and files them, usually within a day. Ask for any ingredient, device or topic and watch it fill in.