

Living Pain Free 4/09/22

Narrator: Are you living in pain? Is it joint pain or muscle pain? If so, stay tuned. Welcome to Living Pain Free with Dr. Marc Darrow, from the Darrow Stem Cell Institute in West Los Angeles.

This is the program that can give you effective solutions for the pain you've been living with. Dr. Darrow is a medical doctor, board certified in physical medicine and rehabilitation. He teaches about the use of Prolotherapy, PRP and stem cells. Today's program could open up a new life without pain for you. Now here's Dr. Darrow with his co-host, Nita Vallens.

Nita: Well, hi there Dr. Darrow.

Dr. Darrow: Hello, Nita Vallens, how are you today?

Nita: I'm great. How are you?

Dr. Darrow: I'm living it up.

Nita: Well, that's good to know, because we want our listeners to live it up, and they can do that by calling us right now, 866-870-5752, and get your free book, right here, right now, Dr. Darrow's latest and it is called...

Dr. Darrow: Stem Cell and Platelet Therapy, Regenerate Don't Operate. And we have the foreword by the beautiful Susan Somers, the actress, and she is a proponent of stem cells and platelets. And not only did she write the foreword to my book, but she has a new book of her own, which is called A New Way to Age. And it says the most cutting-edge advances in anti-aging.

On page 302, there's a chapter about Marc Darrow. That's me, about doing stem cells and using platelets on the body to regenerate injured tissue or arthritis. So these are things that we do from the top of the head to the bottom of the feet. I can inject just about anywhere in the body, where you have musculoskeletal pain.

What does that mean? It's not pain from cancer. It's not pain necessarily from headaches or things like that. Although sometimes we can help headaches, if they're being generated by trigger points in the neck. And these are not just trigger points that I do. This is actually stimulating new tissue to grow back. And that's a subject that we can talk about the difference.

So I inject everywhere basically from the back of the head down the cervical spine, thoracic spine, lower back, and into the shoulders,

and the elbows, the wrists, the fingers, I have people that have rotator cuff tears that come in. I have people that have hip arthritis, knee arthritis, meniscal tears in the knees, labral tears in the shoulder, and the hips, and people have things like plantar fasciitis on the bottom of the feet, ankle sprains, ankle arthritis. You name it, it's just about anything in the musculoskeletal system that I can inject and heal up by using cells from your own body.

We can draw the blood and get the platelets out and those are very healing cells, they stimulate new tissue to grow, or we can use your own bone marrow, which literally once I numb up the area, it takes about 15 seconds to do. It's not a big deal. You don't need to go to a surgery center. You don't need to be sedated, it's very quick.

The bone marrow also has platelets and stem cells in it. So very, very good ways to heal your own body. And a free copy of the book will go out to you, if you call me during the show, we have another 50 minutes to go, so I hope I hear from you personally. It makes the show interesting. If not, we have to start telling some jokes and stumping Nita and putting her on the spot. And she doesn't like that.

So if you love Nita, then call me right now, live at 866-870-5752, I'll repeat it for you, it's 866-870-5752. I'll give you out a couple more bits of information, so get your pencils and paper. My website is amazing, it's got videos of me doing these procedures. And the website is [www.lastemcells.com](http://www.lastemcells.com), that's [www.lastemcells.com](http://www.lastemcells.com). And if you want to catch more information that we don't talk about on the show, you can call the office too. That number is 800-300-9300, that's 800-300-9300. And we want to give thanks to Warren Eckstein of The Pet Show, he's got a great show. Thank you Warren. I have pets if you want to call them that, they're like my kids. Huskies, that's right, Dakota and Bella, I was just playing with them this morning, they're amazing.

Nita, anything you want me to say before we get onto taking a question here?

Nita:

Well, yes. Actually, I just wanted to remind people about your website, which is [www.lastemcells.com](http://www.lastemcells.com), not only can you see Dr. Darrow performing the treatments on videos, but you can email him off of every page on the site, in the upper corner, you just click on a link. So it's pretty cool. And I don't want you to miss out, and this is kind of a new paradigm for many people. And this is a way for you to educate yourself a little bit. And also when you call the program, you get Dr. Darrow's latest book for free today, it's Stem Cell and Platelet Therapy, Regenerate Don't Operate.

And it actually has 264 scientific studies. So that's another way that you can educate yourself about this.

Dr. Darrow: And free is good.

Nita: Free is good.

Dr. Darrow: You know, it's funny, when patients walk out the door, I always God bless you, and say well, God thank you -- thank you so much, because I've never heard a doctor say that, and I go, well, it's free.

Nita: There you go.

Dr. Darrow: It's doesn't cost me anything to do it. You know an interesting thing is those of us involved with regenerative medicine using plateau and stem cells, us docs inject ourselves, and I've injected myself for almost 25 years on different parts of my body that I've injured, since I'm a sports freak. And even at the age of 73 I still do it. I just did both of my knees last week, using platelets and stem cells.

So, it's something that we do for ourselves. Nita had her neck done how many years ago was that, Nita?

Nita: Oh, gee, that's got to be...

Dr. Darrow: 15 years maybe?

Nita: Yeah, about 15 years ago.

Dr. Darrow: She had amazing results too. I did my shoulder after a failed surgery. And it doesn't always work like this, but for me it was one treatment, and I woke up the next morning, and I self-injected it, experimenting on my shoulder, which had had a failed surgery. You'll hear that term failed surgery a lot on my show, because I get a lot of patients who come in after a surgery and they're worse. That's called a failed surgery.

Nita how many times on your neck did it take you the first time to get better, do you remember that far back?

Nita: Yeah, the first time it took a week.

Dr. Darrow: Okay. Was it one treatment, or more.

Nita: Well, you wanted me to come for four weeks in a row and get one shot a week. And I said can I have all four shots today?

Dr. Darrow: How many did you get in that week?

Nita: Four.

Dr. Darrow: You did? Really?

Nita: Yeah. But that was the old Prolotherapy. And then when I came back, I was working with my trainer, I had re-injured the area, and I came back a few years later. And you said, I know, I know, you all the shots today. We had a big laugh about it.

Dr. Darrow: Well, we don't usually do that.

Nita: Right.

Dr. Darrow: I mean usually -- typically I inject once every couple weeks for the average patient. And back in the old days, we used sugar water, believe it or not, as an irritant, to set up an inflammatory response, in order to bring fibroblasts to the area of injury. They're cells that grow collagen and cartilage. And worked pretty good.

But today we have things much more advanced, like PRP, platelet-rich-plasma and stem cells that work at least a dozen times better than the old Prolotherapy, at least in my hands. Maybe other guys find that to be different. But it's interesting my staff gets injected by me. Most of my staff not that they're athletes, but they work out, they run, they do other things. So who is around me, I inject. I have a lot of friends drop in for quick treatments, and it's something that's just been really, really amazing, in my medical career, I'm so grateful that I fell into this.

And it happened at a lecture at UCLA when I was a resident, a doctor came in and he said I heal 80, 90 percent of my patients using regenerative medicine. And the whole class kind of scoffed at him, except me. I opened my eyes and ears, and I went to his office, and I talked to his patients. And he was right. He was just getting amazing results. And then I had a wrist injury that it took me to a workshop on this in Las Vegas. And there was a seminar on healing wrists. So I very gingerly allowed a doctor to inject my wrist. And that was healed about 50 percent the next day. So it's been a good life for me. I've done' both my knees, both my elbows, my right wrist, both my shoulders, neck and back.

And I'm ready to get out there and do whatever I want today. And so this is something that I feel very strongly about instead of doing surgery in my book, Stem Cell and Platelet Therapy, Regenerate Don't Operate, we're going to send it to you if you call into the show right now, and you can read about all these studies. There's over 250 studies showing the efficacy of using your own cells from your body to heal yourself. And how surgery can really botch things up.

And listen, I am not against surgeons. I love surgeons. They do the toughest work in medicine. There's a lot of terrible side effects. Nita, we know about them, we have patients call in who have talked about it.

Nita: Yes, we do.

Dr. Darrow: We had that one poor gentleman who died from a neck surgery. Was that a year ago or so?

Nita: That was actually Christmas of 2019, the wife called.

Dr. Darrow: Yeah, yeah, Kathleen I think it was.

Nita: Because we were both crying.

Dr. Darrow: Yeah. Yeah, that just wrenched my guts. A guy goes in for a neck surgery, and he comes out on a ventilator, meaning that probably the vagus nerve was cut down in the diaphragm or something happened like that. And it's just horrific things. I had a couple patients die after a simple surgery. My own patients, who I told them not to do it. And you know get enamored with the culture of surgery, I don't know why.

Nita: And these were elective surgeries, not ...

Dr. Darrow: Yeah, that's right. That's right. They're elective, meaning you get to elect. When it's elective that doesn't mean the doctor gets to tell you to do it. It means you're not in any kind of danger. It's just that it's something that you're tired of. But for me any time something comes up where I injure myself, I use you know my own cells in my body to heal myself, and I've had a pretty good track record for the last 25 years.

So before we get to joke time --

Nita: Uh-oh.

Dr. Darrow: -- and see if Nita can handle it, uh-oh.

Nita: Uh-oh, come on somebody call -- call, please call.

Dr. Darrow: Well, that did it. I see the call board has two people calling in right now to save you. But the phone number here right now to talk to us, get a copy of your free book, Stem Cell and Platelet Therapy, Regenerate Don't Operate is 866-870-5752, but I see this caller coming in, but can I throw in one little joke first, to tease --

Nita: Sure. Let's have a joke.

Dr. Darrow: I'll give you an easy one.

Nita: Okay.

Dr. Darrow: And I'm going to give you a hint.

Nita: Oh, don't say it's easy, because if I screw it up, I'll feel worse, you know. Never say that.

Dr. Darrow: I'm going to give you a hint.

Nita: Oh boy.

Dr. Darrow: It's one of the states, okay?

Nita: Okay.

Dr. Darrow: What do you call a hippie's wife?

Nita: A hippie's wife.

Dr. Darrow: Mississippi.

Nita: Oh my gosh. I should know that.

Dr. Darrow: Come on, Nita, yeah, you're a hippie.

Nita: My grandmother was a fully landed Southern Belle, she sure was.

Dr. Darrow: All right, cool babe.

Nita: Born in Mississippi.

Dr. Darrow: We're going to go to Courtney in Torrance.

Nita: Let's do that.

Dr. Darrow: Hey Courtney, Dr. Marc Darrow, how are you doing today?

Courtney: Hi, well I'm doing okay, but I am physically sort of becoming like incapable to go upstairs and put my sock on and put my shoes on. So I saw an orthopedic surgeon last week. And he said, oh, you have degenerative arthritis in both hips, and you need a full hip replacement, one after the other. But I'm only 53, and I said well, I was a professional athlete, is that what happened? No. It's hereditary.

Dr. Darrow: Okay. Well, I don't agree with any of that. And you know doctors are just human beings, so we all get to disagree right?

Courtney: Right. Well...

Dr. Darrow: It doesn't mean he's right, or I'm right or anyone's wrong.

Courtney: Right.

Dr. Darrow: It's just, you know we have different opinions. And actually yesterday, I had a patient whose MRI came back, and the MRI in his shoulder showed the same as yours, degenerative arthritis, that's osteoarthritis. And he had a couple treatments from me with -- I don't remember if it was platelets or platelets and stem cells. I think it was just platelets and he didn't get any better. And I said, why don't you get an MRI, and let's just see what's in there.

So he came back with MRI -- okay, it said severe osteoarthritis in his shoulder, right shoulder, which I don't -- I don't necessarily agree with at all, because he can move his arm. And if it's very bad degenerative arthritis, then it's bones rubbing on bones --

Courtney: Yeah, that's what he told me. That's what he said I had bone-on-bone.

Dr. Darrow: Okay. Now are you to move your legs?

Courtney: Yeah, I can walk.

Dr. Darrow: Okay. Then you don't have bone-on-bone. And the same with this guy, he doesn't have bone-on-bone. See the bones are very porous and if it's bone-on-bone, that means all the cartilage is worn off and you don't get motion, it's rubbing like two bricks together, they don't slide.

So you know in my humble opinion you don't have bone-on-bone, so don't get scared by that. You've got some arthritis and most of all you've just got some pain.

Courtney: Yes.

Dr. Darrow: And I'll tell you another story. A woman came in -- a new patient came in yesterday, and she was an MMA kicker. She had done a lot of kicking. And she's worn down her left hip, that's her kicking hip. So she said the same thing. She said, I went to a surgeon, he said I've got to get it replaced. And I did an examination, she's got full range of motion of her hip, all right. That means all directions, internal, external rotation, flexion and all that stuff. I said how much pain do you have? She said well I don't really have a lot of pain. Sometimes going up and down stairs

And I said well, would you consider a hip replacement, and she goes no, that's why I came to you, because I don't want one.

Courtney: Right.

Dr. Darrow: So I hear this from, oh my gosh, new patients come in every day with the same story, I've got bone-on-bone, I've got to get my -- the surgeon said I've got to get a joint replacement. And none of my patients who are like this get a joint replacement.

So I'm not telling -- I haven't examined you. I can only tell you by examination, not necessarily by what you're telling me, other than if you can move around, that's pretty good evidence to me that you don't need a hip replacement and it is not bone-on-bone.

So most of these people that come in get better. All these bone-on-bone patients get better using --

Courtney: Okay. Sign me up, because I'm trying to -- I mean, I'm 53, so I thought a hip replacement was for you know people who fall and land on their hip. But I'm willing to pretty much try anything because I'm actually -- I teach tennis for a living.

Dr. Darrow: Oh wow.

Courtney: And it's becoming you know where -- yeah, so I can't -- you know I hit with my students anymore, because I can't run.

Dr. Darrow: Right. You know I talked to -- he's actually my firearm's instructor. I have been taking a few firearm's courses to know what those things are all about. And he had a knee replacement by, you know, what we consider to be the top joint replacement guy in the city of LA.

And he had it done three weeks ago. And I said how are you doing? And he said, I am freaking miserable. He said, I've never had so much pain in my life.

Courtney: Oh, no, don't tell me that.

Dr. Darrow: And this is three weeks after.

Courtney: Right.

Dr. Darrow: I said, did the doctor tell you, you were going to be like that. He goes no. He says, I can't bend my knee.

Courtney: Right.



Dr. Darrow: So, you know, these are no bargains, these surgeries.

Courtney: Right.

Dr. Darrow: You know, and I did one on my shoulder when I was a fourth-year medical student, thinking hey big deal, you know, I'll get it fixed. And it made it so bad.

Courtney: Exactly.

Dr. Darrow: My arm swelled up like a balloon -- literally like a balloon, it was sloshy with fluid in it. And I had a high fever. I thought I was infected. I didn't I don't think. And it took years for it to heal. And I couldn't really use my arm for quite a long time. And then I discovered regenerative medicine. And I injected myself and this is the greatest story, I love telling it.

My wife was watching TV, and I jumped in bed to watch with her, and I pulled out a syringe, and I injected myself with her swearing at me. I'm serious.

Courtney: And she's like stop.

Dr. Darrow: This is a true story. She was swearing at me, like what the -- are you doing? And I said I'm just experimenting. I tried it on my wrist, and it worked, and now I'm going to try my shoulder.

Courtney: How long does it take?

Dr. Darrow: Well this was -- you know I think it was spirit talking to me, because my wrist healed 50 percent overnight after the first injection, then it took a couple more. And then my shoulder literally healed overnight. And I'm not telling you that that's what happens all the time, because it does not.

Courtney: Right. So, is it something that you have an ongoing treatment if you have, you know a hip problem. Do you continue with the injections, or is it something that can be you know diminished and --

Dr. Darrow: It's so variable Courtney. We just never know with anyone. Sometimes I see what I think are the simplest injuries or a little bit of arthritis and they won't heal for a long time.

Courtney: Right.

Dr. Darrow: And this isn't going to work on everybody either. I'm saying this is some magical cure.

Courtney: Right.

Dr. Darrow: It is not.

Courtney: Okay.

Dr. Darrow: You've to listen to the doctor and not cheat on me, like most people do. Cheating means that they've over-exercising or running up and down stairs when there's a hip problem.

Courtney: No, I can't exercise anymore. That's my -- that's my problem. That's why I want to fix it. So one way or the other, I need to fix it.

Dr. Darrow: Okay. So there's too many I don't knows, with all of this. I don't like to give out what a person's future is going to be. Everybody's got different "karma". And I've had people with really terrible joints, that have healed with one treatment. And those with very easy things, I think that take several treatments. I never know what's it going to be.

Courtney: Okay, so I'll make an appointment and come in.

Dr. Darrow: Yeah, the phone number to the office, there's people by the phones, it's 800-300-9300, 800-300-9300.

Courtney: I'll see you this week.

Dr. Darrow: Okay. Well, I'm busy. So you know what you can do, I don't know if I can get you in this week, normally through the office, but if you email me through the website, which is [www.lastemcells.com](http://www.lastemcells.com) I'll give you a call and set something up to make sure you get in. I can always squeeze somebody.

Courtney: That would be amazing, I'm trying to travel with one of my players, who's on, you know playing professional tennis. And I'm like I just don't -- I can't keep up. I'm like having them carry my suitcases.

Dr. Darrow: Oh, I'm sorry to hear that.

Courtney: It's crazy.

Dr. Darrow: I can just say this, Courtney, there's very good hope that we can help you. I don't know if you'll get 100 percent success, but usually people -- you know, it depends how much you're willing to do. On my body, I don't give up.

Courtney: Well, I live -- I live an hour away.

Dr. Darrow: Yeah, on my body I don't give up. When I'm injured, I keep at it. But a lot of people will get let's say 50 percent better, and they go I

don't want to do any more, that's good enough. I'm functional. So it's up to the individual, it's not up to me.

Courtney: Right.

Dr. Darrow: People say tell me how many. I go that's up to you. I don't tell anybody anything. I just educate you and you decide what you want to do. And a lot of times people say what do I do, platelets or do stem cells. And I'll go if it was on my body I would do blah, blah, blah. But on your body, you've got to decide what you're going to do.

Courtney: Right.

Dr. Darrow: Because the platelets plus stem cells is more effective than just the platelets.

Courtney: Right. Well, I'll try anything before surgery, because it seems such an extensive surgery for a 53-year-old. I mean, I can't --

Dr. Darrow: Well, it's not just that, but if you do a hip replacement at this age, and you're doing the activities you're doing, you're going to have it replaced again.

Courtney: That's what I figured.

Dr. Darrow: And the problem really is -- well the first one is not fun anyway. But the second one is a mess, because the bone, inside the bone, the prosthesis which is metal, rubs and wears it out, and there was a case that I have in Denver, I did orthopedic surgery in Denver for a year, where a woman had the same thing, and we tried for a replacement the second time, and the bone cracked, and -- well, I mean stuff happens.

Courtney: That's -- I've been dreaming about those dreams, so yeah.

Dr. Darrow: Well, I'm not trying to put out negativity.

Courtney: No, no. I've been doing my research. I definitely know that this with my lifestyle, teaching and traveling with players, and trying to hit with them, I know it's -- surgery is going to be really, really hard on me.

Dr. Darrow: Well, let me tell you what we did with this poor person. We actually amputated the bone and put in a cadaver bone, what we carved to fit, and put that in. And you know plug back all the vessels and nerves and stuff. I wasn't there to follow up because that was just my internship, so I didn't follow up to know what happened. But it

was a long shot. And you know, they just didn't know what else to do.

Courtney: Right.

Dr. Darrow: And the surgeon I worked with was probably the best orthopedic surgeon on the planet. He took all the cases like this, the failed cases from other orthopedic surgeons and he just was the most amazing surgeon, the stuff that he did that no one else would even try to do because it was too far gone. He would do that.

And we would -- like that surgery, that was like a 12-hour surgery. So we'd be on our feet all day in these space suits to keep from infecting.

Courtney: Well, I'm so glad I called, it's funny because when I drive my husband's car, he has this radio station on, and I've had this for three years, and three times I've gotten in his car and listened to your show, and though I really should call. So this time I called, and I'm really glad I did.

Dr. Darrow: Well, Courtney, there is good hope for you, but before I can tell you anything, I'd have to examine you. People send in their MRIs x-rays all the time and say tell me if you can help me. And I go I can't tell you based on that. I can only tell you with an examination.

Courtney: Right, no, I understand that. I know I need to be examined. I know that. And I'm wanting longevity with my tennis business and my pickle ball business, because I'm way too young to not be able to walk.

Dr. Darrow: Well, look, you know as far as I'm concerned, why is anybody going to do a surgery when they can just get some injections?

Courtney: That's right.

Dr. Darrow: Walk in, get injected and walk out.

Courtney: Try it, right.

Dr. Darrow: And do something that's conservative instead of something invasive. It's makes no sense to me --

Courtney: People like me, I just teach tennis, I don't know about platelets and stem cells, and you know I'm just trying to be able to function to the best of my ability.

Dr. Darrow: We're going to the break. So God bless you, Courtney, and there's good hope ahead for you.

Nita: Thanks for your call.

Dr. Darrow: So please call the studio right now, talk to me at 866-870-5752, I would love to talk to you, or go to the website, [www.lastemcells.com](http://www.lastemcells.com).

Nita: All right. This is Living Pain Free, and we'll be right back.

[Break]

Narrator: Whether you have pain in your back or joints, surgery may not be the answer. Instead of the dangers involved in cutting out tissue, consider healing and rejuvenating the area with stem cells, platelet-rich plasma or Prolotherapy, the treatments that are available to professional athletes are now available for you. Watch the videos at [jointrehab.com](http://jointrehab.com) or call the Darrow Wellness Institute at 800-300-9300, 800-300-9300, that's 800-300-9300.

Nita: Welcome back to Living Pain Free with Dr. Marc Darrow. I'm your host Nita Vallens and we're taking your calls at 866-870-5752, that's 866-870-5752. And right now we have Martha on hold, and do you want to go to Martha, or did you want to say something first.

Dr. Darrow: A couple things. Hi Martha, don't go anywhere, it's Dr. Marc Darrow. We do something called the Vampire Facelift in the office where we inject the stem cells and/or platelets into the face to regrow the collagen, and make you look young. And that's an amazing, amazing thing. I'm not really into cosmetics personally, myself, but when I see people that have done this, they look very, very, very good and it's a really easy procedure to do.

Also, we do something that regenerates hair on the top of your head. And who doesn't it work for, Nita?

Nita: You.

Dr. Darrow: No, I've done it, but I wouldn't do it on me, it's -- it wouldn't work on someone like Dr. Phil or me, because we've lost all of our hair. But if you're thinning, it's very, very good for that, the results I've seen are amazing. Actually, it might work us, but I'm not really interested to be honest. I'm married 30 years, I've got five kids, I'm pretty happy the way things are.

So the way I look is not all that important to me. But it is for lots and lots and lots of people, men and women. So --

Nita: Plus you wear a hat. You have a hat one.

Dr. Darrow: Only for the show, and then I'm playing golf. What else, I guess that's about it.

Martha, God bless you for calling in. Thank you so much. You're going to get a free copy of my book, Stem Cell and Platelet Therapy, Regenerate Don't Operate, just for calling in. Who's yelling at me in the background.

Nita: Martha?

Dr. Darrow: Martha are you with you?

Martha: Yeah, I'm right here, yes. Sorry about that.

Dr. Darrow: No, no problem. So I understand your knee bothers you. How long has that gone on for?

Martha: Actually, it's not my knee, it's my leg. My husband's knee.

Dr. Darrow: Oh, your husband, okay.

Martha: Hold on, how long -- about two years.

Dr. Darrow: Okay. And what did the doctor say about it?

Martha: His ligament is broken and they -- the cruciate ligament is broken.

Dr. Darrow: The cruciate okay. And can your husband walk around okay?

Martha: Pardon me?

Dr. Darrow: Can your husband walk around okay?

Martha: Yes.

Dr. Darrow: Okay. So it sounds like his main problem is he's having pain in his knee, is that correct?

Martha: Right, yes.

Dr. Darrow: Okay. So let me explain a few things to you, okay, Martha. Whoa, we've got a baby on the phone here.

So the idea is this the ACL, is called the anterior cruciate ligament, and it is a ligament that holds the femur bone, that's the thigh bone down to the tibia, that's the leg bone. Because it's torn, does not necessarily cause pain. So when we do an MRI and we look in there, we see if it's torn, the surgeon says we have to repair that, but most people with an ACL tear do not need a surgery.

With an ACL tear, there could be laxity or looseness in the knee, and that theoretically could be a problem. But most people with an ACL tear that I see do not have laxity or looseness in the knee, and they do not need a surgery. They could use stem cells and PRP, platelet-rich-plasma to heal the inside of the knee, and sometimes the ACL will repair also.

Okay, so there's good hope that your husband's knee can be healed by using stem cells or platelets. Do you have any questions, Martha? Or does your husband have any other questions?

Martha: No. That was it.

Dr. Darrow: Okay. And if you want to call the office, to find out more information, specifically, the phone number there is 800-300-9300, God bless you for calling in, Martha, I appreciate it. And there's good hope for your husband's knee, okay?

Nita: Okay, so you can call too and join the conversation at 866-870-5752, 866-870-5752. And you can your free book, Dr. Darrow's latest and it's called Stem Cell and Platelet Therapy, Regenerate Don't Operate, the foreword is written by Suzanne Somers, and it has 264 scientific studies.

Dr. Darrow: That's pretty amazing.

Nita: Very.

Dr. Darrow: I go back and read it for a reference myself, every once in a while.

Nita: Well, it's got so much information in it, you can't possibly remember every study.

Dr. Darrow: I know. It's pretty amazing. So it's time to punish Nita, okay. You ready Nita?

Nita: Oh gosh. Okay, let me give the phone number again, please someone rescue me at 866-870-5752, thank you so much, I'll send you candy and flowers.

So yes, you were saying?

Dr. Darrow: Okay. So why are there gates around cemeteries?

Nita: To keep the dead people in.

Dr. Darrow: Almost the opposite, because are people are dying to get in.

Nita: Okay, I got half a point, I get half a point.

Dr. Darrow: I think we should give you a full point.

Nita: Okay.

Dr. Darrow: I'm a lenient professor here.

Nita: Oh cool, cool. That's very cool.

Dr. Darrow: Can you handle one more?

Nita: Yeah, yeah, absolutely.

Dr. Darrow: Can your ego take it?

Nita: Oh, yeah, my ego doesn't care. It's not about my ego.

Dr. Darrow: Do you have a big ego or a little ego?

Nita: I have no ego at all, I just have gratitude.

Dr. Darrow: Ah, even better. That's somebody with no ego. By the way, people think ego is bad. Ego is actually very good.

Nita: Oh, look Rosy is here, maybe we'll have to wait till later for the joke. Let's talk to Rosy.

Dr. Darrow: Hey Rosy, you've got sciatica. This is Dr. Marc Darrow, how is your leg feeling today.

Rosy: Hi, Dr. Darrow. I'm excited to speak with you, it's an honor.

Dr. Darrow: Oh, thank you.

Rosy: My mother has had a hip replacement about a decade ago, because of trauma. And she's now compensating on the other side. She's diabetic, and she's had multiple -- multiple consultations with orthopedic surgeons. They keep saying that she stenosis in your L4, L5 and S1.

Dr. Darrow: Okay. And does she have back pain or just leg pain.

Rosy: She has both, back and leg pain, to the point that she used to be a walker to the beach from you know -- from where we live, all the way, for about two hours. But now she can't even walk half a block.

Dr. Darrow: Where do you live? Does she live in Riverside and walk to the beach.

Rosy: By UCLA.



Dr. Darrow: Well, that's where my office. I'm close to UCLA.

Rosy: That's wonderful.

Dr. Darrow: Yeah, so she'd be able to get to me pretty easily. So let's talk about this. You mentioned she had a hip replacement traumatically, she fractured her hip probably, and that's a good thing to do when there is a fracture like that, the surgery is needed.

Rosy: Right. She had it when she was about 53.

Dr. Darrow: Okay. And how does that relate to her back pain now or does it?

Rosy: She was fine a while, but you know I think it's that once they do the hip replacement, I guess because the length of the legs are not the same, the back started compensating.

Dr. Darrow: Yeah, yeah, that happens.

Rosy: Even though it was done by one of the top surgeons that would treat Olympic players.

Dr. Darrow: Wonderful yeah. So a couple things. Number one, I'm glad she used the top surgeon, because I always tell people when they say refer me to a surgeon, refer me to a cardiologist. I always go, go to the guy who does the most, who is the best, you know the most well-known, because they've seen more things and they can handle the problems.

But even the best surgeon can't necessarily help somebody, because surgeries cause trauma too. And your mom did need that surgery if it was fractured, there's no question about it. But even the best surgeries can come out bad. Okay, even a perfect surgery can come out bad.

You know there's a joke, about -- let me think if I can think of what it is, the surgery was perfect, but the patient died.

Rosy: Oh God, that's not a fun joke.

Dr. Darrow: No, it's not, but I mean it does happen. I've seen it happen right on the table that I've been working on. Perfect surgery, but surgeries don't always work, it doesn't -- it's not a negative statement against surgeons at all, it's just, you know if you need a surgery, you need a surgery, and with a fracture, you need a surgery like that. But the surgeries don't always come out okay. Even just from a fracture like that you can die from -- from an embolus you know where fat comes

out of the -- and goes up through the blood system into the brain or the lungs, or something like that.

Rosy: The problem is that she's in so much pain, that her blood pressure keeps going up.

Dr. Darrow: Oh boy, yeah. Is your mom overweight?

Rosy: I guess clinical obesity Class 1, borderline. She's lost a lot of weight overall.

Dr. Darrow: Okay. But you see that's one of the main things she needs to do, she needs to get on a ketogenic diet or something like that. Because you mentioned she had diabetes, which was a hint that she's got too much you know body for her bone structure, and for her heart and all that, and for her pancreas. So she's got to do that, and that may help her back and her leg also. And I put people -- all my patients on ketogenic diets, if they're overweight. And you know what I do, I have them so they're accountable to me, I have them text me every morning with their weight, and if they didn't lose weight, I have them tell me what the foods are.

And people say really? You're going to do that for me? I go yeah, your success is my success. And if you're not getting better I'm not happy about that. I'm only happy if you're feeling good and getting better.

So let me discuss a couple other things. Number one, stenosis doesn't necessarily cause back pain, okay a lot of people come and they go I've got this terrible stenosis and I've got back pain. And I got it's not the back, it's not the stenosis that doing that.

Stenosis just means that there's a squeezing of the spinal cord or the nerves that come out, and it doesn't necessarily cause any problems at all. Most back pain or neck pain and spine pain that I see really is really from ligament problems, not all of it, but most of it, I'd say 99 percent of it from a sprain, and I use this analogy on the show every week, when you sprain an ankle, you don't go to a surgeon to get an ankle surgery, because there's nothing -- nothing sexy about an ankle sprain, it's like everybody knows they get better, and if they don't, you know we can certainly help heal that.

But when it comes to the neck or back and there's a sprain, doctors don't really to see if it's ligaments. They do an MRI or an x-ray to see if there's spinal stenosis or a herniated disk or something like that. I don't know why they do that; they don't use their hands to actually check it.

I can tell you in about two seconds, if your mom would come in, if I can help her by just touching her low back. And if she's a candidate for -- for doing my treatments which is stem cells or PRP using platelets from her body, then there is a high probability that we can heal her up.

Now, if she's having leg pain that's a different story. Sometimes when I fix the back, the leg pain goes away, but if it really is spinal stenosis that's causing leg pain, she's probably tried an epidural already, correct?

Rosy: She has yes, and it didn't do her any good.

Dr. Darrow: Okay. So that's a really good indication that it may not be the spinal stenosis that's a problem, because the steroid, you know the cortisone type steroid that's put in the epidural, normally will shrink down the tissue around the spine, where the nerves come out, the foramen and open that up, so that the leg would get better.

So I'd have to examine her to see what's going on, it's very complex. It's not just look at any MRI and decide or give an epidural and decide. And honestly when someone flunks an epidural they don't get better, that makes me happy, because that's a higher probability that I can help them.

Rosy: I understand. She got the typical shopping care syndrome.

Dr. Darrow: Yeah.

Rosy: She -- her pain gets alleviated by just holding onto a shopping cart to move.

Dr. Darrow: Yes.

Rosy: Okay. I'll put her on --

Dr. Darrow: Again I have to examine whatever patient I talk to. I get emails every single day from all over the world with MRIs and x-rays or CT scans, saying doc can you help me? And I go no, not based on what you're sending me. Because I can't really diagnose based on an image.

I like to have the images. I think that's really important, and there was a few times that I actually found cancer, or tumors of different types or cysts or things like that have to be removed. But I don't diagnose pain based on images, but I like to have them, so I don't miss anything.

Rosy: I'll get her on your scheduled for sure.

Dr. Darrow: All right. And the number to the office, you can call now is 800-300-9300, we've got a ton of calls, so I'm going to move to Lisa. Thank you very much for calling Rosy, God bless you.

So Lisa, this is Dr. Marc Darrow, your neck and back bother you, and how long has been going on?

Lisa: For one year. I had a car accident on 3/31 of last year and after chiropractic treatment and the typical treatment afterwards, they want to the injection and my back, but it doesn't-- they said it's not a steroid. I'm not exactly sure what it is, but my fear, was oh, everyone does it. And I said and what are the results. Well, it works for some, and it doesn't for others. He said my wife did it. And I said how long ago, and he said a year ago. And I said how long did it last. He said she had to have it done like five times.

Dr. Darrow: Well, let me explain something -- let me explain, okay.

Lisa: Okay.

Dr. Darrow: The typical injections in the neck or back are with steroid injections, okay, with steroids.

Lisa: That's what I believe it is.

Dr. Darrow: That is -- yes, with a very strong anti-inflammatory. And unfortunately those things feel great for a little bit, but then they wear off. And they're not good for the tissue either. So I rarely, rarely use them.

So that could be in the form of the epidural, it could be a for trigger point injections, but they're not things that I do. What I like to do is hit the point that we call entheses which is where the tendons or ligaments or muscles attach to the bone, and actually in a sense weld that back together -- regrow the tissue. And I use stem cells and platelets, PRP to do that. And that's more a lasting type of a -- of a treatment. That could last theoretically a lifetime.

So I don't -- I'm not telling you what to do, and I haven't examined you yet, but if you come in and I can touch the area, then I can tell you what the best treatment is, okay?

Lisa: Okay. I'm absolutely willing to do that, because they said it wasn't steroid, but I wasn't really clear, and then they take -- they said they pinpoint by using the x-ray machine, and we do it all day long, and

I'm just -- I didn't want to take that gamble for something that might only give me relief for three months.

Dr. Darrow: Okay. I don't know what they would use. I mean, a lot of people just use lidocaine, you know, a local anesthetic. But they're not things that heal anything.

Lisa: That's don't heal. That's what I wanted to know to be able to go back and tell the different -- to the doctor and does it matter if it's your neck or your lower back, your L4-L5, C2-C3, I mean does it -- do you have the same -- and I am overweight, you know.

Dr. Darrow: It doesn't matter what part of the body it is. But I'm going to tell you one time.

Lisa: But I mean being overweight, I know my --

Dr. Darrow: No, no, being overweight is not a big deal about it. If you do come in the office, I'm going to warn you ahead of time, I'm going to ask you to diet.

Lisa: I know. I know. And I'm ready for that too.

Dr. Darrow: And you know what I tell people. I say, tell me to shut up when you want me to, because some people are offended when I ask them to work with me to lose weight, and that's okay with, because it's your body.

Lisa: It's important though.

Dr. Darrow: Well, it's important, but some people don't want to delve into that area. They find it offensive. It raises their -- it triggers their emotions or something like that, which is fine with me. I say shut up, tell me to shut up and I'll shut up. I won't mention it. But if you're open to it, you will lose weight. All of my patients lose weight, because I have them text me every morning, so they're accountable to me.

I don't charge anything to do that. I just love getting people healthy. Everyone of my patients has my cell number, okay. And if you're with me in the office, you're going to hear my cell phone ping, ping, ping all day long and getting phone calls from patients. And I'm up late every night calling patients and talking to them.

You know I learned something. I have an issue, and my doctor called me up one night. And I was like, are you kidding me? You're actually calling me, and he said yeah. I take care of my patients, and I do the same. I do the same. You know I have many doctors

too that are friends of mine that I go see for different things, and I can't even get a hold of them. And I think that is -- I think that's abomination of being a medical doctor.

Lisa: You know, I'm very happy to hear you say that.

Dr. Darrow: To me and this isn't for everybody obviously. To me being a medical doctor is being a minister. And I was laughed out of class, and I'm not saying a religious minister, I'm saying you administer to people, a spiritual minister. And that first day of class in medical school where I went, the professor got up and he said okay, so what is a doctor. And I raised my hand. And I said a doctor is a minister. And he started laughing, literally just laughing at me out loud, you know, implying doctors are scientists.

Well to me, yeah, we're scientists, but if we're not ministering to people and giving what they need which is a lot of love, we're not doing a good job. So anyway I'm available.

Lisa: You're right.

Dr. Darrow: So listen, I think I can help you. I've got to touch it first and God bless you, Lisa, we're going on to Rick right now.

Rick, this is Dr. Marc Darrow. You have a friend who is a veteran had a spinal cord injury, can stem cells help? The answer is maybe yes, maybe no. What I want you do for that one, is email me through my website which is [www.lastemcells.com](http://www.lastemcells.com) and we're going to move onto Barbara in Anaheim Hills.

Barbara, Dr. Marc Darrow -- oh no, we're going to Mark, you hang on Barbara. Mark, your hip is bothering you. How long has that been going on for?

Nita: Hey, Mark, are you there?

Mark: Yeah, good afternoon, I'm here. Are you sure you're not using that hair thing because I'm looking at your picture here, you've got a full set of hair right there man.

Nita: That's an old picture.

Dr. Darrow: Either that, or it's black paint I put on my head.

Mark: I don't know if it's the right doctor here, this guy got a full set of hair.

Dr. Darrow: Listen, I'm sorry, we don't have much time, so I love your joking. I appreciate that. I'm a jokester. Nita's a jokester. But your hip is bothering you, how long has it bothered you for?

Mark: Yeah, you know what, I mean it's been bothering me for about a year or two so I went to a doctor. And he said it's -- there's bone spurs on both my hips. So I am wondering, am I candidate for -- I mean would that give me any relief or not.

Dr. Darrow: Well it depends. Mark, are you able to move your leg around, can you walk? Can you go upstairs?

Mark: Yes.

Dr. Darrow: Okay. Then, yeah, you're a candidate, yeah.

Mark: Walk with discomfort, yeah.

Dr. Darrow: Yeah, with discomfort, yeah. I treat people like that every day who get better. The bone spurs don't mean a whole lot. And they may not even be the issue.

Mark: Yes.

Dr. Darrow: A bone spur just means you've got a little bit of arthritis and as long as you can move --

Mark: Is that also osteophytes?

Dr. Darrow: Yeah, the same thing. A bone spur and osteo are the same word, okay.

Mark: Oh, I see, okay, yeah man roots, right. Should have given my hooked-on phonics man.

Dr. Darrow: People are amazing. Mark, I can't wait to meet you. You're going to teach me a lot of new jokes, but we're going to Barbara. And Barbara, God bless you for calling in. Thank you so much. Your neck is bothering you. Tell me how long that's been happening for.

Barbara: Yes, hello, yes I'm not getting a very good reception right now.

Dr. Darrow: Okay. Can you hear me.

Barbara: That's better. Yes, now I can hear you.

Dr. Darrow: Good, good, good. How long has your neck bothered you for?

Barbara: Since probably the end of December.

Dr. Darrow: So you've got about four or five months into it. And what did you doctor tell you about it?

Barbara: I have severe arthritis in the neck. I had an MRI February 8th. March 8th I had a CT scan, March 15th I had an epidural. None of those worked. And now I am scheduled for an injection to determine if radio frequency ablation would provide more lasting pain relief.

Dr. Darrow: Okay. You've got all the terms down, that's cool. Can you move your head around?

Barbara: Yes, but sometimes it's very painful.

Dr. Darrow: Okay.

Barbara: In the morning, it's worse, as I go through the day, it's a little better. I take anti-inflammatory cyclonex (phonetic) twice a day.

Dr. Darrow: Good. I got you. Are you ready for some information?

Barbara: Yes.

Dr. Darrow: My turn? Here we go. I don't think there's much wrong with your neck, just from you're telling me, you can move it around. The arthritis is not a problem and I think with regenerative medicine of stem cells and platelets, high probability we can rid of your pain, or help you somewhat, all right? God bless you; we'll talk to you soon. The office number is 800-300-9300. The website showing me doing videos of these procedures, [www.lastemcells.com](http://www.lastemcells.com). Nita Vallens you're a great host. Thank you Suzette. Thank you, Alex. Thank you.

Nita: Thank you. We'll see you next time.