

Living Pain Free 1/22/22

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: Nita, you're looking more beautiful than ever today.

Nita: Why thank you. It's because we laugh a lot on this show, that's why.

Dr. Darrow: It does help, doesn't it?

Nita: It does help. So we do want to tell our listeners they can all hour and get a free book, 866-870-5752 is the number right here in the studio. And you get Dr. Darrow's latest book for free when you phone the program today. It's called Stem Cell and Platelet Therapy, Regenerate Don't Operate is the by-line. It has 264 scientific studies, and the foreword was written by Suzanne Somers, who has you in her book, A New Way to Age. I even know the page numbers.

Dr. Darrow: What are the page numbers? Boy, this is a big thick book she wrote.

Nita: I know. Page 302 to page 316.

Dr. Darrow: Wonderful. Thank you, Suzanne.

Nita: That's where you are, yeah.

Dr. Darrow: Thanks for bringing natural medicine to the forefront with your long hard years of work doing this. And all of us docs that like to do things naturally, really love you a lot. So you're helping a lot of people.

Nita: Absolutely. So you can also check out the website, which is www.lastemcells.com that's lastemcells.com. You can email Dr. Darrow off of every page on the site and watch him performing the treatments on videos. What do you think?

Dr. Darrow: I love it. I do a lot of work on that website every day.

Nita: I know, I check it like every week, and it's like there's something new all the time.

Dr. Darrow: I know it.

Nita: But that's good. You keep it current.

Dr. Darrow: Yeah. There's a lot to talk about today. And it all has to do with how to end pain in your body that comes from orthopedic injuries or arthritis. Luckily, I'm going to say for everybody else and me, my injuries were healed with using platelets, stem cells and other things that we call regenerative medicine. And it's called that because we actually grow tissue.

And when I was in med school, I was talking about this, and I was laughed out. I was talking, you know, doing things naturally. And in med school you're taught basically how to use medication and surgery in orthopedics, and physical therapy, which can be a great thing too. But it didn't get to the crux of how to heal. And in my personal opinion, surgery can be a great thing, if done for the right thing, and most of the times in orthopedics in my opinion, there are way too many surgeries being done that hurt people. And I'm going to guess from what I see with my patients, half of the surgeries seem to work for a while, and half of them fail miserably.

So I typically will send my patients with terrible things to an orthopedic surgeon for a consult, second opinion, because I want them -- I want my patients to have informed consent. That means, that they get to choose what they're going to do, and they learn all about different techniques in medicine. They get to decide what they're going to do. But what I get back from the orthos is they need surgery. And then we don't do surgery, we do injections with cells from the person's body and heal them up and the ortho says that couldn't work. Well, it does work.

And I've been doing this work for -- since actually the late 90s, so that's quite a long time. And I experimented first on my own body and had great success with my wrist and then my shoulder, and later down the pike, I had to do my knees and my other shoulder. I first did my right shoulder, then my left shoulder, and my elbows, I've had other docs do my neck and back for me, because I can do the front of my body easily, but I can't see back there, and it will kind of dangerous.

Nita: Duh.

Dr. Darrow: Yeah. But I did your neck, Nita.

Nita: Yes.

Dr. Darrow: And you had some great success with that.

Nita: I did.

Dr. Darrow: And how long has it been since you've been feeling good from the regenerative medicine I did on you. I know it's been -- I haven't seen you in the office for a long, long, long time.

Nita: Well, the treatments were actually -- the first one was about 16 years ago, and then about four years later, so it's been about 12 years.

Dr. Darrow: So that's when you were 16 years old.

Nita: Correct, what a coincidence.

Dr. Darrow: No wonder you look so good.

Nita: Yeah, right. I'm going backwards.

Dr. Darrow: Like Benjamin Button.

Nita: That's right.

Dr. Darrow: Did you see that movie; it was a good one.

Nita: A long time ago.

Dr. Darrow: I love Brad Pitt.

Nita: That was, so before you start trying to quiz me on jokes that I miss and feel like an idiot, I just wanted to invite the listener to call in again, and recuse me from this abuse at 866-870-5752, right here in the studio, 866-870-5752. You can speak directly with Dr. Darrow about your musculoskeletal pain. It's a bargain.

Dr. Darrow: It's a great way to go, and it's certainly a lot simpler than getting a surgery that has all kinds of potential side effects. I've seen some terrible things when I was doing orthopedic surgery in the old days, and I had a bad experience myself when I was in med school, as all you listeners who are regulars, know. I hurt my shoulder weightlifting, just stretching it out too much, and I ended up because I was doing orthopedic surgery, my boss, my professor operated on it, and I'm going to say kind of wrecked it for a few years, until I learned about regenerative medicine and then I injected myself. I was 100 percent completely better, full range of motion, no pain the very next morning, about 12 hours later.

So it can work great. It's not going to work on everybody. I have to pick the right patients for it. And then the patients have to listen to me because a lot of patients don't listen, and they come back and go how come it didn't work? Well, it was working. We know it grows tissue, there's been biopsies done before and after that show granulation tissue by day three after the injection. That's new tissue growth.

And I've seen several MRIs and x-rays afterwards where we see the joint space increase meaning there's new cartilage growth. But a lot of people don't listen to me, they are too active. They don't want to rest after an injection. And I tell them, well you're going to rest after you have surgery, why wouldn't you rest after you get these injections? And the reason is because after surgery it hurts so bad. After these injections you can walk out and do what you want to do.

Some people besides being too active take anti-inflammatory medicines, which block healing, they block the regeneration of tissue, things like ibuprofen and others. There's hundreds of them. Another thing is a lot of people get a treatment and they come back and go it didn't work. And I tell sometimes it takes a few treatments to grow enough tissue, so you feel better.

So another reason is I use an ultrasound to look inside the body, and guide the needle into the exact spot, and most docs do not do that do that. So if you're going to get an injection in the body, in the joints, ligaments, tendons, make sure you go to someone who has been trained in ultrasound, because if you miss the spot, it's not going to do much good. And the studies show for example, if you get what we call a blind injection into the knee, blind meaning no ultrasound guidance, the chance of missing the joint are 33 percent. That means one-third of those injections are not going to work.

Nita:

Wow. That's a lot.

Dr. Darrow:

It's a lot, yeah. And people -- a lot of times people get steroid injections, you know cortisone, which makes them feel better right away, but a lot of them don't work at all. And I'm not a proponent of that stuff. There are rare times when I use it. Someone comes in the office all bent over, because they have low back pain, then I might do some steroid injections into the ligaments and low back, and it's pretty amazing, because they'll stand up in two minutes. And the pain is gone. But that's not a long-term cure.

And what I'll do with them is I'll have them come back in a week, and then start regenerative medicine to actually heal the ligaments, tendons, whatever it is. And we should be careful not to inject into the joints, because that cartilage gets worn down by putting steroids

in there. Steroids meaning like prednisone and things like that, cortisone, o-n-e means steroid at the end of the word, the end of the medicine.

So, Nita, I think it's time for a little punishment for you.

Nita: I figured it was coming.

Dr. Darrow: Get the show kind of rolling.

Nita: I figured. It's okay. I'm ready.

Dr. Darrow: Can you take it? You're 16, you're pretty old.

Nita: I can take it.

Dr. Darrow: All right, Nita. Here we go. Why can't you trust duck doctors?

Nita: Because they just are quacks.

Dr. Darrow: You got it, baby. That's a million dollars in your pocket today.

Nita: All right.

Dr. Darrow: Nita, you're a genius.

Nita: Thank you.

Dr. Darrow: How did you know? Did you look at my questions ahead of time?

Nita: No, I didn't. I didn't. I just don't even know where you hide them.

Dr. Darrow: You know that's a terrible story. I was getting my first course in Physics was in pre-med. And I hadn't had it in high school, or college. I went back to doing pre-med when I was about 40, to do medical school late in life. And I got a D and a C in my first Physics class.

Nita: Oops.

Dr. Darrow: And I thought there goes my medical career. And I had a deal with the Dean of Admissions, that if I got straight As in pre-med that I was immediately into medical school. So I worked hard, but I had never had Physics before. And it was tough. It was during the summer. There was a test every week.

And I didn't know how to do it. So I talked to my niece, Denny, who also late in life going to go to med school. And I said I'm in trouble what do I do with Physics? She said don't try to understand

Physics, memorize the formulas and plug them into the problems. After that I got 100 on every exam.

Nita: Wow.

Dr. Darrow: And the professor gave me a B. But the B, the number on it, was like one point below all the other A's. So I went in to beg for that A, because I needed all A's to get into med school. And he said you'd better leave, because you broke into my computer and stole my exams. No one's ever gotten 100 on my exams before.

Nita: What?

Dr. Darrow: Yep. So I left very dejectedly, had a little nervous breakdown you might say, called the Dean of Admissions, and said hey I got a B, what's going to happen. He goes well, I've been watching you. You've gotten A's in all your other courses, so don't worry, you're going to get in. Forget that guy. He's a jerk.

Nita: Oh how could he even do that? That was so awful.

Dr. Darrow: He was taking a lot of Xanax he had been -- he was depressed.

Nita: Oh, my goodness.

Dr. Darrow: All right. So let me get to a question here, and jazz up the show a bit, okay?

Nita: I would have testified for you, that you're not a computer guy by the way, because I know you a long time.

Dr. Darrow: I wouldn't know how to...

Nita: I know.

Dr. Darrow: I can hardly break into my computer, let alone someone else's.

Nita: With all the passwords.

Dr. Darrow: Yeah, exactly. All right. So someone writes in, sudden and progressive hip pain, international mountain guide. Let's see what that means. The person said I found this article very interesting having had osteoarthritis diagnosed with an MRI in the right hip, which shows it as being significant. The pain and stiffness came on so suddenly over a two-week period from being very active to reducing my fitness regime significantly. I know sooner, rather than later I will require a hip operation.

Well, that's an error in thinking, Nita. That is not true. But I am that person you mentioned that wants to climb a few mountains in 2022 as my job is a mountain guide. And one quality final year of guiding would be fantastic, PRP injection would be my delaying tactic prior to an operation. That's error in thinking also. Because I don't do this to delay surgery. I do it to irradicate the need for need for surgery. If there are any trials going on, I would really be interested in getting involved. Kilimanjaro in July would be my target, for my 14 time on the summit. Wow. And he says regards and gives his name which I'll keep private here.

So I wrote back immediately and then let's see what he says after that. He says thank you, Dr. Darrow for your quick response. And by the way, everybody listening, if you go to my website, www.lastemcells.com there is a spot on every page where you can email me. I hope you're not too shy to call into the show, but if you are, you can always get to me through the answer those emails every day. I get emails from early morning till late night and in the middle of the night. And I answer them every day. So that's a great way to get a hold of me and get a direct response.

But if you want to talk to me now, why not? Call me at 866-870-5752, that's at the studio, 866-870-5752. And if you want to catch me at the office, the number there is 800-300-9300.

Let me get back to this gentleman. He said I did have swollen knee joints in 2020, and I took Predastinol (phonetic) for which took the swelling down. That's a steroid shot. And I returned to normal cycling and walking, and this followed a fall I had on my bike, at very slow speed. So this was trauma induced. I was fine then, until August that year, and the pain came back swiftly. Within a week, after a pleasurable walking holiday here in the United Kingdom.

And by the way, we do have a lot of people that come in from the United Kingdom, from all countries, from all states, and they usually will stay with me for several days and get several injections in a row. And that's another question that we get, Nita. How often do you do these treatments?

Nita:

Right.

Dr. Darrow:

And as people know, who know me, when I blew my knee out a couple years ago, I had 45 ccs of fluid, which I saw on my ultrasound, which freaked me out. And I did stem cells on my own knee, four times in one week. And I will go out and play golf today, and I'm going to feel great. My knees are good. My shoulders are good. My wrist is good. My neck and back are good. So this stuff has worked well on me.

In terms of pain management, I am on eight -- whoa, eight Tramadol and three Naprosyn a day. Oh, and once a week 12 milligrams methotrexate, not good. If the PRP injection worked, I would love to come off all drugs, I hate taking them, but just need them to get to sleep and be able to function the next day.

Well, this person is an over-exerciser, which I also am, so I understand the syndrome. You know we are addicted to something that's good in a way, and something that hurts the body. And I've had good luck with all of these injections, I've done them myself, and I think this person can also.

The interesting this is the person said they had arthritis in the right hip, which came on over a two-week period. What does that tell you, Nita, I'm going to put on your thinking cap for you and let me know if you can think of a reason why that happened.

Nita: Okay.

Dr. Darrow: Was it from the arthritis or overuse?

Nita: I think overuse.

Dr. Darrow: You got it, baby, bingo. That's two million bucks in your pocket today.

Nita: I'm doing great. Thank you.

Dr. Darrow: So yeah, arthritis comes on slowly, okay. It's not something that pops up in two weeks. So does that mean the arthritis was the problem? Absolutely not. I get people come in all the time that have arthritis that don't have pain, and there are studies that you can read on my website, or in my book which we're going to give you for free, if you want to call in. It's a \$25 book, but if you call in right now, you get a free copy, and we'll mail it out to for free. And that number to call me right now at the studio, because I want to talk to you is 866-870-5752, so write that down.

If you miss the show, with us live on it. Sometimes they play the show at other times when it's not live, you can always call at the office to get more information, and the number to the office is 800-300-9300, that's 800-300-9300. This book is amazing. It has how many studies, Nita? 256?

Nita: 264 actually.

Dr. Darrow: Whoops. A lot of studies that show why you should be using regenerative medicine of stem cells and platelets instead of doing

surgery. Now I'm not putting down surgeons. I love surgeons. If you break a bone, where do you need to go? To the surgeon, right away. But if you have a meniscal tear in your knee, ACL rupture, labral tear in the shoulder or hip, that's not something that I would recommend surgery for. I've had endless people with ACL ruptures, I take the blood out immediately, using the ultrasound, so I get every drop, and they heal right up, unless that knee is loose, which most ACL ruptures do not give a loose knee, they can keep doing their sport. So why get a surgery you do not need?

I had one on my shoulder, I did not need. And it made it a lot worse. So be careful. All right, Nita, punishment time. You ready?

Nita: I am ready.

Dr. Darrow: I'm so bad. All right, Nita. What do you do with sick boat?

Nita: Rock it.

Dr. Darrow: Well, how's that going to get it un-sick, how's it going heal it?

Nita: Because it will soothe it, just you know rocking motion, it helps babies, it helps babies.

Dr. Darrow: What do you did a sick boat? You take it to the dock.

Nita: Oh, that's a good one.

Dr. Darrow: But you're not laughing. So I'm going to give you one more, until you laugh. All right. I know you'll laugh with this one. Why don't they play poker in the jungle, Nita?

Nita: They don't play poker in the jungle, because there's not enough chips.

Dr. Darrow: Too man cheetahs.

Nita: That's a good one.

Dr. Darrow: There you go.

Nita: That's a good one.

Dr. Darrow: See, I've got you reinforced now, that if you don't laugh, you get another joke.

Nita: Okay, I got it.

Dr. Darrow:

All right. We're going to go to -- let me see this one. Okay, this -- what does it say, worse pain after knee surgery, yuk. I had knee surgery to remove 50 percent of my meniscus -- yuk on that one. And in November, still having more pain that I did before the surgery. Had to blood clots in the back of my knee, now and the middle of my knee is killing me. I didn't know if the doctor did me right or not. Just taking medication for inflammation seemed to help, but now I have to be on blood thinners. So I can't take the other medications.

I think this person wrote me again, because this seems familiar, but I'm going to go over it again, in case this person didn't hear the show. So I don't like when people take things out of joints. That's good cushion tissue. And I have people all the time that come in, every single day, actually, I treat people with meniscal tears in the knee, rotator cuffs in the shoulders, and a lot of them get better. Most of them get better.

So I didn't do surgery. All I did was inject some of their own cells, some platelets or stem cells into them, and they did great. So why take out tissue from part of the body, when it's going to destabilize that joint. It makes no sense to me. I had that shoulder surgery, and they shaved down my acromion, which is the bone on top of the shoulder, cut some ligaments and I came out terrible.

I lucked out though. I discovered this type of medicine. I injected myself, that was back in the late 90s, and as I always tell people on the show, I'm going to go play golf today. I'm doing good. Probably lift some weights. Go for a run. I got to live it up doing sports. And I know a lot of you are just like me. So give me a call right now, if you can, the number here 866-870-5752.

So I'm going to go another question here. Okay, let's see, pain shooting down my back and into my left leg. Doesn't sound fun. I have pain shooting down my back and into my left leg, affecting my knee, making it very painful and stiff, and unable to walk. Well, a lot of issues there. One is the pain is shooting down the back may have nothing to do with the leg pain, or it may. And that's something we have to figure out.

And one way we find out is by doing a very thorough examination and seeing if there is any kind of tenderness or problem moving that leg around. If there is, it probably is not coming from the back. If it comes from the back, we call that a radiculopathy, which means the little nerve coming out from the spinal cord is being impacted, what people generically call a pinched nerve. It could be from a herniated disk. It could be from the facets that are arthritic that

cover over the foramen, which are the holes that the nerves come through.

So that's one that we have to be careful not to just operate on right away, because it may not be a problem. It may be something where the knee is the problem, or the hamstrings are the problem. Hang with us. We're going to go to the break, and Nita take it from here. We love you folks.

Nita: We certainly. You're listening to Living Pain Free with Dr. Marc Darrow. Grab a pen or a pencil, write down this important information coming your way. I'm your host, Nita Vallens 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 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 this is where you can learn how you can heal your musculoskeletal problems without surgeries. So give us a call right here, right now in the studio 866-870-5752, 866-870-5752. You get a free book Stem Cell and Platelet Therapy, Regenerate Don't Operate is the title. It has 264 scientific studies.

And what do you think, Dr. Darrow? Would you like to talk to OC?

Dr. Darrow: I would. OC how are you today? Dr. Marc Darrow here.

OC: How you doing? Let me turn off the radio. Just a minute.

Dr. Darrow: All right.

OC: I can barely hear you, but I put you on speaker, let me see. Here we go, can you hear me pretty good right now?

Dr. Darrow: Beautiful. So you have a neighbor whose son or a daughter has spina bifida, is that correct?

OC: Yes. Yes, she very sweet, man. She's a beautiful Spanish girl. She's about 8 to 10. And she hops around. She had a beautiful personality. She don't let it stop her. You know, she goes to school,

she a little car, a truck that comes by and picks her up, and takes her to some type of thing, for recreation. And she has -- and I just know is there any probability or possibility she can aided?

Dr. Darrow: Let me explain what that's all about, because it's something that -- it's not really something that I deal with. It's more of a neurological issue, but I know about it. We obviously studied. So it's a birth defect that occurs...

OC Yeah, it's a birth defect, yeah you're right about it.

Dr. Darrow: All right. Can I explain?

OC Yes, sir.

Dr. Darrow: It's a birth defect which happens in the developing baby's spinal cord, and it fails to develop properly. There's often a defect in the vertebrae and then the spinal cord and nerves can actually pop out through the back, and sometimes there's spinal fluid that can leak out. There are so many different levels of intensity of what it is. Some people that have it, have zero problems at all. Some people that have it are paralyzed from it, from the waist down.

So in this case, the little girl is, you said hopping around, which means she doesn't have a terrible case of it, but she's not normal you might say, like other kids are, can't do everything other kids do maybe. Now the only thing that I could do for someone like that is if they're have pain because of it, or their joints are being irritable, or their tendons or ligaments, then I can help them with that. But I don't anything involving the neuro system, okay. And if she had a problem with it, when she was born, they may have operated on it, to try to reduce it. I don't know the story. But there's probably not a lot that can be done with the neurology of it, the way the nerves are being impacted into the legs.

OC Well, it's just the same, the parent, she's not -- she's -- the children are bilingual, but she's not, she just speaks Hispanic. You know, Spanish.

Dr. Darrow: Okay.

OC And so is there a phone number they can call, like...

Dr. Darrow: Yeah, but there's not -- OC, that's not really much I can do for that, unless the poor kid is having pain.

OC Okay. No, I want to see if you could describe those symptoms, get someone to describe those symptoms, if they're having them in, you know, because it would have to be done in Spanish.

Dr. Darrow: Well, yeah, she can always -- yeah, we have Spanish people -- we have Spanish speaking people at the office, and she could -- they can call. The number to the office is 800-300-9300, but like I said unless the girl is having pain or joint discomfort or something like then there's not much I can do. Now, a lot of these kids do end up having issues like that I can help them with, okay.

OC All right. Thank you very much.

Dr. Darrow: So the number to the office is 800-300-9300. And thank so much for calling OC. God bless you.

Nita: And our number -- excuse me, our number is 866-870-5752 right here in the studio, give us a call and get your free book, right here, right now. Time's a flying by and let's go to Mike in Burbank.

Dr. Darrow: Uh-oh, Mike from Burbank. It says you were in the office yesterday. That could be good new or bad news.

Nita: Mike, are you there?

Mike: Yes, I am.

Dr. Darrow: How are you?

Mike: I'm here, very good. Thanks to you.

Dr. Darrow: Oh, that's a nice - whew.

Mike: You alleviated 12 years of pain.

Dr. Darrow: Oh my God.

Nita: Wow.. Wow.

Dr. Darrow: I lucked out, Nita.

Nita: What happened? Can you tell your story a little?

Mike: Well, over the years I've had a lot of injuries to my knees, I was in the Military, and I jumped out of helicopters a lot, and then I was pretty active till about 12 years ago. I hiked a lot and things. And one day I kind of messed up my knee, hiking -- and I was told by the Vet Doctors I'd need a knee replacement in 10 years, and just to deal with it. And I luckily heard Dr. Darrow's show a few weeks

ago, and I came in, at the first of January and he was able to help me.

Dr. Darrow: Well, you've made my day, let me tell you.

Mike: Yeah, you saw me in the office I was (inaudible) my knee around, and there was no pain.

Dr. Darrow: Oh yeah, yeah, yeah. I remember that. I remember you now. Yeah, you were laughing and flinging your knee all over the place. Your wife was sitting there.

Mike: A lot better than I have in 12 years. I've always had night pain from it, never able to get comfortable, wake me up three or four times a night and I slept through the night, almost every night since you did the treatment.

Dr. Darrow: When was it a couple weeks ago or so?

Mike: Yeah, you did it on January 3rd, and I did exactly what you told me to. I stayed off with it, and I didn't take any kind of pain medication and it just over the period of the last three weeks, it's just gotten better and better every day. There's nothing there now. I mean, it feels like it did before I injured it. So it's great.

Dr. Darrow: Well, now you can go back in the Military and start jumping out of helicopters again.

Mike: Nah.

Dr. Darrow: Been there, done that, huh?

Mike: No. I'm going to come back and see you and let you work on my left knee, my left knee's got a little tiny wince in it every once in a while. I'm going to let you do that, and for my birthday.

Dr. Darrow: Oh that's so sweet. I'll tell you what, if it's your birthday, I'll give you a present.

Mike: Make me pain free, and that will be the best present.

Dr. Darrow: Oh, well, that's a present too, let me tell you. And I know that feeling, because I had years of injuries that I healed myself, you know injecting myself with regenerative medicine, platelets and stem cells. And I remember the first time it happened; it was like I couldn't believe it was real. And my first healing was my wrist. And the next day, after I was -- actually, someone else injected me the first time, to turn me onto this type of medicine. And they told me

it was going to be stiff for about 24 hours, and then it would feel better.

Did you have that kind of experience where it's stiff for about 24 hours?

Mike: Yes, sir, yes. The very next day, I told my wife, I was like, you know it's really weird, I don't feel like I had much pain over the -- overnight, because I didn't remember waking up. And she goes, yeah, I hear you moaning in your sleep.

Dr. Darrow: That's hysterical.

Mike: She always heard me. I was like -- like you know, I must cry out at night, sometimes, because when I would turn my leg the wrong way, I would wince, you know in pain. And then the next day, you know, I stayed off of it, but I just didn't have the impactful pain that it had over the years, and it was sharp and definite. And it just kind of faded away, over the week, it just was gone.

Dr. Darrow: Well, Mike, God bless you, man.

Mike: And the more I -- you know, I was able to walk on it throughout the week, and then there were just -- it was just gone, exactly, it's like it evaporated almost.

Dr. Darrow: Yeah, it's amazing. I mean, I've done so many parts of my own body, and to wake up feeling good, after being miserable for years.

Mike: Yeah. Really, it was like waking up feeling good, that's a great way to describe it.

Dr. Darrow: It's really one of the greatest blessings...

Mike: You know, you're ready to jump out of bed, and go out into the world.

Dr. Darrow: Yeah, one of the greatest blessings is to have health, and after you've been miserable to feel good again. So I'm very grateful for the work I do. And not only for helping other people, because that's a fun way to live, it's been a great life for me. But my own healings. I mean, it's just amazing, whenever I get injured, and you know, to be honest, I do sports pretty hard, and I get injured. And when I do it, I'm like -- I don't have to worry about it. I know I'm going to be okay, because I'll just inject myself.

Mike: Yeah.

Dr. Darrow: And anyway God bless you Mike.

Mike: I'm incredibly thankful.

Dr. Darrow: Yeah, thank you so much for calling in. Give my love to your wife also.

Nita: Thank you, Mike. Appreciate your call. Our number is 866-870-5752, right here in the studio, 866-870-5752. Get your free book right now when you phone it's called Stem Cell and Platelet Therapy, Dr. Darrow's latest book and the subtitle is Regenerate Don't Operate. Don't you want to find out what that means with 264 scientific studies?

Dr. Darrow: Plus, if you call, you save Nita from having to answer...

Nita: Another joke.

Dr. Darrow: Very difficult jokes. So call me now, the number is 866-870-5752. I would love to talk to you. And hear what your issue is, what your family's issues are, what your neighbor's issues are, all of that stuff. You can use a fake name. No one will know it's you. Pretty simple.

Nita: Absolutely.

Dr. Darrow: All right. Let's get to another question, actually I didn't finish up that last one about the pain down the leg.

Nita: Okay.

Dr. Darrow: If you're ever going to get a surgery for pain in one of your limbs that your doctor says is coming from your neck or your back, be sure, write this down, because it's so important, get an -- well, the MRI is important, but it doesn't tell the truth, get an EMG. EMG stands for Electro myelogram and an NCV, that's a Nerve Conduction Study, okay. Get both of those, and they can tell you where the impaction in the nerve is, if it's a nerve. They can tell you if it's in the back, if it's somewhere down the leg, in the arms, they can tell you, if it's at the elbow or the wrist.

And if you have that, and it's not coming from your neck, if you don't really have a radiculopathy that surgery is not going to do you a darn bit of good. Then you've had a surgery you did for nothing. And I'm going to tell you, I get patients in all the time, who have surgeries that failed, not because the doctor screwed up. It's just the surgeries don't work. The doctors do great jobs. I love surgeons. It's just that sometimes they're not getting to the pain generator. And these studies of the EMG and Nerve Conduction Study can give you more information to see if you really do need a surgery, or if you don't.

Nita: Okay.

Dr. Darrow: I got another question here.

Nita: Okay. Do you want to give the phone number first?

Dr. Darrow: I do. Give me a buzz, right now, talk to me, let me help you out, free what do they call it, a curb consult. Give me a call at the studio, 866-870-5752. Okay, let's see. Knee osteoarthritis. Let's see what this person has to say. They say synovial fluid shots, stem cell therapy.

Okay. Person says I have arthritis in my knee, no cartilage behind the kneecap, bone spurs lateral and medial sides, that's per the MRI and x-ray report and the surgeon. Surgeon recommends synovial fluid shots. Do you think stem cell is an option for me?

Well, the answer is if you're moving it, yeah. If you can move it, I think that using regenerative medicine can help regrow some cartilage, so you can rid of the pain and make it move even better. Synovial fluid shots, I'm not a proponent of that. There's a million of them out there, Synvisc, others by that name. They are taken from the -- from roosters, from what is that thing called, the thing on the top of the head, the -- I forget, I'm blocking.

Nita: Their hat.

Dr. Darrow: Yeah, their hat. They wear hats. Maybe it's under their chin, I don't remember, but they take those, and they get the synovial fluid from there. They inject it into joints to lubricate them. But they're already lubricated, and people that have arthritis typically have excess synovial fluid there anyway.

So I started when I got out of UCLA doing those injections. I didn't find they worked very well. And then now we find out, studies show that when you inject platelets or stem cells, they automatically stimulate the joint, to produce synovial fluid. But not a ton of it, that gets in the way like knee had. You know I had 45 ccs. That's a lot of fluid. But just a drop of it to lubricate.

So the other thing when you inject it, if you're not using an ultrasound to guide the needle, and you put that synovial fluid into soft tissue, that knee, or shoulder, hip, wherever they put it, can blow up and you may have to get an incision and drainage, a surgery to clean it out. It looks like an infection; it gets very scary. So we have someone hanging here from Laguna Hills. So, Jeff...

Nita: It's Jeff.

Dr. Darrow: So Jeff, Dr. Marc Darrow.

Jeff: Yes.

Dr. Darrow: Thanks for calling, I appreciate that. So you have what...

Jeff: Good morning, I have -- I'm 67. And I was a former athlete and had to give it up, basketball, about when I was 60.

Dr. Darrow: Okay.

Jeff: And my right leg, it seems like affected by perhaps sciatica or some nerve damage. And now I have some -- I have neuropathy in my right foot, and my right arm is starting to tingle.

Dr. Darrow: Okay.

Jeff: And I have had some steroid shots in my lower back, and that didn't do anything. And I've done acupuncture, and pressure and I just -- I can't walk for more than, gosh 100 yards, before I start tensing up and kind of hurting.

Dr. Darrow: Okay. All right. So first of all, the best news I've heard so far that you said is that the steroid shots didn't help you. And that's an indication that it's probably not coming from the nerves in the back.

Jeff: Okay.

Dr. Darrow: Because if it were and the nerve was impinged, that steroid shot would shrink down the tissue there, and give you some relief. So that's good news in a way. It's bad news you're still having problems. But it's good news to me, because that means what I do can probably help you get better. I'd have to examine you, and I tell people all the time, I say it on the radio every week. If you come in and I examine you, it takes me literally one second to know if you if you have a radiculopathy or if it's just local tissue issues, you know like sprains.

Jeff: Got you.

Dr. Darrow: And then a lot of times people --

Jeff: Do you accept Medicare?

Dr. Darrow: That's something to call the office about, that's 800-300-9300, I'll repeat it for everybody. The office number is 800-300-9300. I don't deal with insurance issues on the radio, it gets really confusing, and although I've been doing this work for a long time, I

still don't understand insurance. Everybody's got a different kind of policy. And it's something that's very confusing.

So, what I'm going to tell you is this, Jeff. There's a chance I can help you, but I won't know unless you want to come into the office and let me examine you.

Jeff: Okay. So very good.

Dr. Darrow: I don't diagnose based on MRIs or x-rays. It's just they fail; they don't show you what's causing the problem. They can, but they, I'd say more than half the time, they don't. So I look at them, and I like people to get them. I found a couple cancers by getting an MRI. So I'm glad I got those because we were able to, you know, cut out the cancers. Because you can have a cancer in your back or neck that is impinging a nerve or in the shoulder or something like that. So I like to get MRIs, but they don't usually tell you what the problem is.

Jeff: Got you. Okay, well, I will give the office a call then.

Dr. Darrow: All right, man, I appreciate you're calling in. That is good questions, good information and I think it helps all of us to learn a little bit.

Jeff: Okay. Thank you, doctor, have a great day, and good weekend.

Dr. Darrow: God bless you, man. I appreciate it, Jeff. Annette, Dr. Marc Darrow, you're next in line. How are you today?

Annette: Hello?

Dr. Darrow: Hey.

Annette: Yeah, hello, yes, hi. My name is Annette and I'm 80 years old, and I have several problems that I've been having for many years. One of them is -- two of them, I have stenosis in my lower back, in the lumbar and also in my neck area.

Dr. Darrow: Okay.

Annette: And I also have bone-on-bone on my left knee which I have been avoiding for a long time. You know I've put -- steroids help to a certain extent, and then they -- I try not to get many shots anyway.

Dr. Darrow: Okay.

Annette: Because I know it's not good for you. And I have a chiropractor who really -- he's the only one that really -- really can help me and

it's not permanent, but he's the best chiropractor that I've known, you know.

Dr. Darrow: Wonderful.

Annette: And I was thinking that maybe you can help me, but I also have -- oh, God, I broke my leg, I fell and broke my leg a year and a half ago, and it hasn't really healed too well. I mean I am healing, but it's because of my back, and because of my knee, everything you know it's just not producing, especially my age, healing fast enough. My leg came out of my socket, and so they had to do surgery.

Dr. Darrow: Sure.

Annette: And they -- which I avoid surgery like the plague, because I know I can't do it. And I had my hip, had to have a partial hip surgery, because of it, because it came right out of the socket.

Dr. Darrow: Sure.

Annette: That's kind of stiff, I don't know if you can help me with that, but anyway, that's part of my -- hello?

Dr. Darrow: I'm with you. I'm with you, I'm listening and listening. And now I'd like to respond, if you don't mind.

Annette: Yeah, sure.

Dr. Darrow: Okay. You got a lot of issues. You didn't mention that you have pain down your arms or legs, correct?

Annette: I have -- I don't have pain, yeah, sometimes and the chiropractor does help me, you know. But yes, you're right.

Dr. Darrow: So let me respond to that. So I don't think the stenosis is the problem for your neck and your back pain. If it's stenosis, which means a squeezing of the nerves, then you would have pain down your arms and legs, which you don't have. You have neck pain and back pain, which in most cases is from the ligaments being sprained. And the way I talk about it, makes people laugh.

I say you've got a sprained in your neck or your back. And they go what are you talking about? And I go it's no different. It doesn't matter where you sprain the ligaments they hurt. But that doesn't mean because you get a sprained ankle, that you get a surgery. People that get sprained ankles let them heal up. The problem in the neck and back is there's not a good blood supply like there is in

the ankle because of gravity a lot of blood pools in the ankles. And blood carries oxygen which is really the healing agent.

So your neck and back most likely we can heal up using regenerative medicine, platelets or stem cells or both. The knee with bone-on-bone, getting steroid shots in there is suicide, it's killing the cartilage and giving you more arthritis. The hip which has been partial replacement, we can probably help you with that, and I'm glad you're using a chiropractor to help palliate, you know, lessen the pain you have. I love chiropractors they do great things.

They're natural doctors and it's very funny, because my mentor when I was his lawyer told me next you're going to be a doctor. And I said, great. I'll be a chiropractor. He said, yes, you will with an MD license. And I laughed. I wanted the way out that didn't take me 10 years. You know the chiropractic was three years, and I thought I would kind of skirt by.

Anyway so I finished medical school and I got my MD degree, and I went back to him, and I said, great, I'm done. He goes nope now it's time for internship. That was another year. I finished that; I go okay I'm done. And he goes nope, now you've got a residency, that was another three years. So it was a total about 10 years getting through that process.

And I'm glad I did it. I also did a fellowship after that in regenerative medicine, natural medicine. So I've been pretty well schooled. I had 22 years of college all in all. And I love learning. Anyway, Annette, I think I can help you. The number to the office is 800-300-9300, I'll repeat it for you, 800-300-9300 and Mike has called about knee -- Mike why don't you email me through the website at www.lastemcells.com and call the office 800-300-9300. God bless you, Nita Vallens, and Suzette, Alex and everyone on the staff. And thank you all for calling in and listening to the show. We love you.

Nita:

Thank you Dr. Darrow. I'm your host Nita Vallens and we'll see you next time.