

Living Pain Free 1/08/22

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: hi there Dr. Darrow.

Dr. Darrow: Nita Vallens, how you doing?

Nita: Great and yourself?

Dr. Darrow: I'm living it up. How about you?

Nita: I'm living it up. And for our listeners to live it up, they have to call you, and get their free book today at 866-870-5752. And we already have our first caller online.

Dr. Darrow: No way.

Nita: Way, do you want to go talk to Sally?

Dr. Darrow: Yeah, let me take a look here, yeah. Sally, you're a former patient, and you want to give a recommendation on your recovery? We'll take that. That's a good way to start the show. How are you this morning, Sally?

Sally: Oh, hi Dr. Darrow. I'm fine, thank you.

Dr. Darrow: Good, are you living it up?

Sally: Yeah. I'm living it up, right. Well, I just wanted to -- you've done such wonders for me, Dr. Darrow, and I just wanted your audience to know about that.

Dr. Darrow: Oh, that's very touching. Thank you so much. I appreciate it. What happened to you? Tell us a story, because I don't remember.

Sally: Well, let me see. Let's start back in 2005, I tripped in the parking garage, over one of those cement tire stops, and I tore my meniscus on my right knee.

Dr. Darrow: Okay.

Sally: So I went to several doctors, surgeons, both doctors and they both told me that I absolutely had to have surgery, and that was the only solution, or I would never walk again. So I was really disturbed. And I had been listening to you for some time on the radio, my mom and I listened to you every Saturday, and so when I talked to my mom about it. She said, you know, why don't you go talk to that man, Dr. Darrow and see what he has say. It can't hurt, you might as well find out.

Dr. Darrow: Sure.

Sally: So I went to you, and I was just absolutely thrilled, because you gave me treatments what we called then was Prolotherapy.

Dr. Darrow: So that was a long time ago. How many years ago was that?

Sally: Yeah, since 2005.

Dr. Darrow: Okay.

Sally: And you treated me with a series of three shots, I think it was maybe two or three weeks between.

Dr. Darrow: Yep.

Sally: And I was healed. I was completely healed.

Dr. Darrow: Amazing, amazing.

Sally: And I went right back to climbing the mountains and doing all the activity -- yeah, I did before that. And it was great.

Dr. Darrow: Well, congratulations. I'm glad it worked on you.

Sally: And then all these years -- yeah, I was so thrilled, and I have to just say a side thing. I ran into somebody who had been in therapy with me. I had been in therapy for three months.

Dr. Darrow: In physical therapy.

Sally: Physical therapy, right.

Dr. Darrow: Okay.

Sally: And that person said, you're going to go and get shots. And I said, yep, I'm going to do that. So I did it, and I ran into that person some time later in an elevator, and he was on crutches again.

Dr. Darrow: Oh, no.

Sally: So, I said what happened to you? He said, well the surgery didn't do so well, so I'm having to have another surgery.

Dr. Darrow: Oh my God.

Sally: So I said well, guess what? I don't, and I did Dr. Darrow. I was so thrilled. But then again, more recently and in 2020, I fell again, and this time it was a really bad fall, I broke my femur a couple places, and I had to have major surgery. I had a rod and a -- a rod put in down the femur and then a screw to stop the rod from sliding into my knee. But I wasn't really aware until all that healed, and I have also torn my meniscus on my left knee. So I went and had an MRI and sure enough it was there, the problem, so of course I came back to you, and this time you gave me the first time with shots, the first shot it was stem cells and PRP, that's what we call it now.

Dr. Darrow: Okay.

Sally: And then I think I've had two more shots of just PRP only, and I'm healed. The results are wonderful. No surgery. Let the body heal naturally. I go to Dr. Darrow.

Dr. Darrow: Yeah, yeah, you're the perfect patient. May I comment a little bit, Sally?

Sally: Sure.

Dr. Darrow: Because there's so many issues that come up that are amazing and will help us educate everybody listening to the radio show that you've just brought up. One of them is, when you fell down the first time in 2005, and they found a torn meniscus, it's really important to know that meniscus tear may have been there for 20 years, and never bothered you.

Sally: Yes, I suppose it could, because I was very athletic, very involved in sports.

Dr. Darrow: Yeah, and as we age, many people get meniscal tears and don't even know about it, which we find when we're doing MRIs on people who say they have no pain. We do it as experiments.

Sally: Wow.

Dr. Darrow: So a lot of people -- yeah, so a lot of people will have an incident take place, and then they get an MRI, and then the doctor says oh look, you tore your meniscus, you tore your rotator cuff in your

shoulder. You tore your labrum in your hip, but those may have just been there for years and years and never bothered you. So we need to know that these things that get operated on, may not be what we call the pain generator. They may not be the thing that's causing the pain. And that means don't jump into a surgery, just because you have those. And you know I've been doing this work for gosh, since the late 90s, and starting on myself, from injuries I had, and I self-injected myself, just experimenting because I didn't - there were no classes or anything really back then. So I was case of experimentation on myself.

And I healed every time that I used it on myself, and as you probably know the story, my wrist was first, and that healed. That was from a golf injury, hitting the ground, and then the next one was my shoulder from playing years of tennis, and I did have a surgery. I was in medical school and had a surgery, because I was doing orthopedic surgery, and I had my boss, or my professor do it for me, and it came out really bad, and I had a few years of very bad pain from the surgery. It was worse than just the injury itself. And then when I learned how to do this, I injected my own shoulder, and it healed the next day.

And then, what else have I done? I did both my elbows, both my knees, the other shoulder, and other people have done my neck and back, because I can't reach back there. So I've had really good luck with this. Not everybody has good luck with it, though Sally. You know I have to say that as a disclaimer. And I have everybody sign a consent, which you probably signed that says...

Sally: Oh yes, I did.

Dr. Darrow: No guarantees, because it's not magic. It just makes sense. It's stimulating tissue to grow in the body, where it's been disrupted or worn down with arthritis, or things like that. So it's been pretty much a miracle for me. It sounds like it has been for you too.

Sally: Oh, absolutely. And I tell everybody about it. And I think I sent you a lot of people.

Dr. Darrow: Thank you so much.

Sally: You know, it seems so simple, but it's really the body's wonder.

Dr. Darrow: It really is. And I mean if you think about it...

Sally: You can do something.

Dr. Darrow: Yeah. If you think about it. We injure ourselves very frequently, but it goes away. So the body knows how to heal itself. But some of these injuries, the body just can't heal. I've had people with 50 years, five-zero years of let's say low back pain and they come in and sometimes it's only one -- one series of injections, you know just a bunch of injections in the low back, in the ligaments, and they're healed. And then sometimes some people take a lot of injections. I know there was one time where I injured one of my shoulders, and it took me a few months to heal, and I was -- I wasn't going to get surgery, I mean, I knew if I went to a surgeon buddy, that they'd tell me I needed to, but I knew I wasn't going to.

So I just kept at it, and it finally healed. And I'm really good now. I'm actually in front of a camera right now, and I'm lifting up my arm, showing people that it's really good. And I'm planning on playing golf later today and doing some weightlifting. So my body is in pretty good shape.

You know as I'm -- I'm 73, I think you're probably about the same, right?

Sally: I'm one year younger.

Dr. Darrow: Yeah, you're just a baby.

Sally: A baby, yeah.

Dr. Darrow: But as we age, the body dries out a little bit. And we get these aches and pains, even without actual injuries, you know, just walking around is a continuous injury. And people wear down a little bit. So a lot of people come in, when it's too late, when they have what we call bone-on-bone, where they can't move the joint. And there's not a whole lot I can do for that. But they have to be careful that a lot of times they get I'll say crucified with the term bone-on-bone when they don't really have bone-on-bone. And I examine them after they tell me they've been to three doctors who said they have bone-on-bone, and I can move the joint around easily, and I just laugh, and I go you don't have bone-on-bone. You've got some cartilage loss, and it may look bad on an MRI or x-ray, but the exam is really good, and we can probably help you.

And a lot of those people get a lot better pretty quickly. So, Sally, thank you so much for calling in. It was very brave of you.

Sally: Oh, you're welcome.

Dr. Darrow: Yeah, and your story is...

Sally: I was thrilled. I was thrilled.

Dr. Darrow: Yeah.

Sally: I just wanted to say -- can I just tell you one more little thing?

Dr. Darrow: Of course.

Sally: I sent somebody to you, who had years -- and he's a major golfer, major. And not a pro, but not amateur, but top. And he's had years of injury on his shoulder. And years of steroid shots.

Dr. Darrow: Yes.

Sally: And I said finally why don't you go to see Dr. Darrow, and when he saw you, you said to him, you should have come here earlier, because now you have -- it's disintegrated, everything that I could use to heal you, it's not -- no longer there. So he ended up having to have a whole shoulder replacement.

Dr. Darrow: That's a good point for people to listen to. When we get cortisone injections inside the joints, the cortisone wears down the cartilage that we have left. It feels real good for a while, usually, sometimes a day, sometimes several months. But it's actually destroying the cartilage at the same time. And then you end up with a worse injury. So please guys stay away from the cortisone shots. I rarely do them.

Sally: Yeah, steroids.

Dr. Darrow: Well, cortisone, o-n-e at the end of a medicine, like prednisone, those are steroids, yes.

Sally: I see.

Dr. Darrow: Yeah, cortisone is one of them, and that's the one that mostly commonly is used by doctors to inject shoulders and knees, and hips and it just shouldn't be done. In my book, it shouldn't be done. And I'm not telling the whole world of doctors what they should be doing, but it doesn't make any sense to put something in there that is a Band-Aid, and then ruins the area later. I talk about this on the show often. A woman came in who had 16 steroid shots, cortisone in her right elbow. She was a tennis player, and then she'd go back, and it would hurt again. Then she goes back to the doctor and get another one, and she'd be okay for a while, then it would hurt again. Then she'd go back and get another one.

And that extensor tendon on the lateral epicondyle was so worn down when she came to see me, she could hardly lift up her hand, extend her hand backwards, her wrist. And that took a lot of work to rebuild that tendon. We had to do a lot of regenerative -- we call it regenerative medicine now using platelets from the blood, or platelets and stem cells, to heal the area. So she did well. It took her a while and she got better. But sometimes there's just nothing I can do if the joint is so worn down, or the tendon is worn off from getting these cortisone shots.

So Sally, God bless you, and thank you so much.

Sally: That's what I say go early to Dr. Darrow.

Dr. Darrow: Thank you.

Nita: Thank you, Sally.

Sally: You're welcome.

Dr. Darrow: What a sweetheart.

Nita: Absolutely. Well, you can talk to Dr. Darrow and get your free book at 866-870-5752. Do you want to talk about the book for a minute?

Dr. Darrow: Yeah. It's a book, I'm actually holding in my hand right now if you're watching the video of this, which all my radio shows go on my website, which is www.lastemcells.com so you can listen to the radio shows there, and you can watch me doing these procedures, there's videos of me doing the procedures there. And there's just a lot of information that you can read and learn how to heal yourself. And you can teach your doctors how to do this stuff, without surgery.

Now, I was in training to be an orthopedic surgeon, until I had that shoulder surgery by my professor, that ruined my shoulder for a few years. And I still love the guy. I don't think he did anything wrong. It's just that that's what happens often with surgery. And I get so many patients that come in, who have had failed surgeries, that made them a lot worse. And you know it's not -- it's not a thing against the surgeons, because I love the surgeons, that's the hardest work in medicine. It's grueling, it's very difficult for them and when I was doing the surgeries in my training, there were days we'd be on our feet like 20 hours a day, it was exhausting.

And there's a lot of side effects that happen. I unfortunately saw one woman die on the table during the surgery. I've had other people who have died from surgeries later. I had one patient who

had a knee surgery, a knee replacement, which he actually didn't need, and he died two weeks later from a blood clot that went to his brain.

So we have to -- you know, it doesn't happen often, but if you're the guy it happens to, that's 100 percent. So there are a lot of failed surgeries. The insurance companies have a diagnostic code for like failed back surgery. That means it happens frequently. I would say in my experience probably 50 percent of the time these surgeries fail. So if you're like a gambler, and you like to go to Las Vegas, and you like that thrill then get a surgery. I don't like that. So I learned how to do regenerative medicine. Today it's using platelets from your blood. It's real simple, you just draw the blood, spin it in centrifuge, and inject it. And you can add stem cells to that. We do bone marrow, we just put a needle into the pelvis, in the back, above the buttocks and draw out the bone marrow. And bone marrow has platelets and stem cells and a lot of healing factors in it. So it's a real good way to heal quick.

So, I'm going to go to Gavin in one second, but I want to give out our phone number to get more callers. And the number to the studio right now, where you can talk to me live is 866-870-5752, grab your pens and pencils and write it down, I'm going to read it again, 866-870-5752.

Now, if you catch -- well, let's say you're shy, I hope you're not, because you can always pretend that you're your grandfather or something, and we'll be nice to you anyway. But don't be shy, give us a call. But if you are shy, you can always just call my office and that number is 800-300-9300, and there's people by the phones most of the time. If the phones are busy, just leave your name and they'll call you back, and your phone number.

And everybody that calls in now, gets a free copy of my book, which is Stem Cell and Platelet Therapy, and then the by-line is the most important part, Regenerate Don't Operate. Now that's not for everything that happens, you know if you break a bone, you'd better go see the orthopedic surgeon, I'd say run to see him, but you can't run. But get there and get an opinion. I send a lot of my patients to orthopedic surgeons for second opinions. And there's a lot of guys I really like. One of them is Michael Gearhart in Santa Monica at the Santa Monica Orthopedic Institute, SMOG actually it's called, and I like him, because he's pretty conservative in terms, he's not just going to do an operation, because he gets a patient in the door, and so there are orthopedic surgeons that I do love and some are conservative, but unfortunately most are what should I call it, they have a hair trigger, and whatever walks in the door they're going to operate on. And I think that's absolutely terrible. But they do come

from a culture that's surgery is the best way to do things. And when I was in my training in orthopedic surgery, that's how I felt. That was the culture of it. And I thought only surgery could help.

Anyway, let go to Gavin. Gavin, you have two knees. I hope you do. Chronic pain, can stem cells help? So give us the story. What happened to you, Gavin?

Gavin: I'm sorry, can you hear me. I'm having trouble hearing you. I'm not certain if it's my phone.

Dr. Darrow: Are you in the car?

Gavin: Yes, sir, I am.

Dr. Darrow: Why don't you pull over and get off your blue tooth and maybe we can hear you. But in the meantime, how long ago did your knees start hurting you?

Gavin: My knees had started -- well, first of all, I'm now 52 years old, and I have to admit I still play like I'm 30 years old. But I started have the points in my knee, probably in right knee about eight years ago. And now my left knee is catching up. And what happens is, is there is a point in the range of motion where it's like it hits a nerve, and both knees literally buckle. It's worse when I'm extending my legs, you know, where my quadriceps are flexing.

Dr. Darrow: Yes.

Gavin: When I'm passive, like walking downstairs it's not as bad, but if you're walking up stairs and you hit that point, my knees will literally buckle because of the nerve reaction is all I can assume.

Dr. Darrow: Okay. So let me give you a little bit of feedback. First of all, typically walking up stairs with knee pain is what we call a pathognomonic sign meaning it's pretty assured this is what it is. That you may have patellofemoral syndrome, which means the joint between the patella and the femur, and the tibia is worn down. And that's very common for guys who are super active. What sports have you done?

Gavin: I have been a skier all of my life...

Dr. Darrow: I didn't catch that. Talk a little slower, because you're in the car. You've been a what?

Gavin: Okay. I have been an Olympic downhill skier and I've been skier my entire life, and I raised motor cross most of my life.

Dr. Darrow:

Okay, so yeah, you're going to most likely have patellofemoral syndrome, which is maybe somewhat advanced. I don't know if your knees make noise. Do you put your hand on the knee when you bend, it will feel what we call in medicine crepitus, or just a grinding? And that shows that that's what's going on. And yes, the platelets and the stem cells can help regrow the tissue, the cartilage in that joint, and help you feel a lot better. There is another sign if you ever go to a theater, I know people aren't going to theaters very much now. It's called the theater sign, or when you're on an airplane, you're kind of cramped up and you can't move or the knees will ache, that's another sign of this patellofemoral syndrome.

But I would have to examine you, Gavin, and in about two seconds, I can tell you what's going on, just by moving the knee around. And I have an ultrasound that I would look inside your knees, to see what's happening, also. The ultrasound I use is not a heat ultrasound, for physical therapy. It's one that I can actually look inside the body and see what issue is happening.

So, I'm pretty sure that's what's going on with you, but again, I have to examine you, to decide. Are you still pretty active?

Gavin:

I am. I will have to say I have used for the last three or four years PEMF, so that frequency does alleviate it, and I am actually able to move, but when I come off of it, the pain starts and I have to admit, I spent the last few weeks skiing and it got so painful then, that I actually had to stop, because I couldn't continue.

Dr. Darrow:

Okay. Well, my experience is that PEMF feels good, but it doesn't do anything, that's just my experience. I had one of the first machines that came from Germany about 30 years ago. And I really used it a lot as an experiment to see if I wanted to use it on my patients, and it just didn't work long distance.

So what I do, you know, with regenerative medicine of putting your cells from your body back into that spot with the problem is, actually regrows the tissue, and can heal it up. So I've seen MRIs and x-rays pre and post treatments, and you can actually see the cartilage growing. So it's something I've been doing, you know, since the late 90s, and they tell me I do the most of anybody on the planet. I don't know if that's true or not. But I see amazing results. The reasons people fail with my treatment is they're overactive, and they don't let it heal, or they're taking things like ibuprofen, a non-steroidal anti-inflammatory that actually block the inflammation that's needed to heal, and by the way, inflammation is the body's natural way of healing. When you're inflamed, the body sequesters or draws fibroblasts to the area that grow back the tissue. And then one of the big failures is because people try it once or twice, and

then they say it didn't work. It's working, because we know it's growing tissue, because biopsies have been done to watch the process, but they haven't done enough for whatever their injury is, and another reason for failure is a lot of doctors, most doctors don't have an ultrasound to look inside. They don't want to learn how to do it, and they're expensive. I have three in my office, and we move them from room to room on a table. And then I'd say the last reason for failure are these clinics where they mostly chiropractic clinics I'd say, where they have -- and this is nothing against chiropractors -- hang with me please, because I want to finish this with you. We're going to the break.

Nita: Stay with us.

Dr. Darrow: And give us a call at 866-870-5752 and I'll talk to you too.

Nita: All right. 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, 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. We're taking your calls at 866-870-5752, and you get Dr. Darrow's latest book for free. It's called Stem Cell and Platelet Therapy, Regenerate Don't Operate with 264 scientific studies. And right now we are speaking with Gavin in Burbank.

Dr. Darrow: Hey Gavin.

Gavin: Yes, sir.

Dr. Darrow: I was just -- on the break I was just answering a text from about 10 patients, everybody knows that I give out my cell number and patients always have a lot of questions, and I'm literally -- I'm embarrassed to say I forgot what the last thing was I was talking about. Do you guys remember?

Nita: Yeah.

Gavin: Well, of course the last thing you were talking about was the PEMF which I was using and granted, I agree with you. It does relief, but I am looking for something that's a more permanent factor, and I don't want to undergo surgery. That's why I'm interested in stem cells.

Dr. Darrow: No, there was something else. Nita, do you remember what it was.

Nita: No. But -- I don't, sorry.

Dr. Darrow: That's okay. I'm not putting down PEMF. You know, if you like it, you should use it. I'm just saying it's not something that is anything like regenerative medicine, where you're going to use your platelets or your stem cells to regrow that cartilage behind that patella, you know your bone in the front of the knee, and that joint. So I think there's a good chance you're going to heal up Gavin. The number to the office is 800-300-9300 if you want to give a buzz there right now to get more information.

Gavin: So I can call today after I'm done...

Dr. Darrow: Yeah, yeah.

Gavin: They're there.

Nita: Right now.

Dr. Darrow: Yeah, definitely.

Gavin: One question for you, if you don't mind.

Dr. Darrow: No, I'm fine.

Gavin: I understand the link to the process is basically determined by the degree of my damage, how many treatments it will take are all determined by that. But my question for you is, once treatment is done, what is the down time that you recommend for me not use, because obviously I have a very active work life and play time. I can sacrifice, I can't sacrifice the work.

Dr. Darrow: That's true.

Gavin: So I'm curious to know what's the down time.

Dr. Darrow: I'm going to say it like this. Every patient has that question, and the answer is up to the patient. I'll advise and I haven't examined you yet, so I can't tell you, but you have to live your life. So as an example, with knee patients, hip patients, foot, toe, ankles, whatever that is, I'm going to tell a person not to go up and down

stairs. And they sometimes say but I have 18 stairs to get to my apartment. And I go well then do the 18 stairs, just do it as infrequently as you can. So, in the best of all possible worlds, you know you would not want to use it at all, you know in terms of exercising, and you know walking around is exercise. Walking stairs is exercise, but you've got to live your life, and you've got to do what you got to do. So there's no hard and fast rule, when I see your knees, I will tell you what I think. And then we negotiate what you'd like to do, okay?

Gavin: Okay.

Nita: Thanks for you call.

Gavin: Well thank you very much for the information.

Dr. Darrow: Yeah, God bless you, Gavin, and there's good hope for you healing up and getting back to being an Olympian downhill skier again.

Gavin: I will be in touch with you. Thank you very much.

Dr. Darrow: All right. Thank you so much for the call, I appreciate it.

Nita: Our number is 866-870-5752 right here in the studio. You can talk directly to Dr. Darrow. Do you want to go to Doug?

Dr. Darrow: I do. Doug, you've got a 7-millimeter herniated disk, can stem cells...

Doug: Hi. How are you, sir?

Dr. Darrow: Yeah. Do you have pain in your back?

Doug: Yeah, I do. And it's not so much pain, as I wake up in the morning and I'm extremely stiff, I feel like it's extremely inflamed, and I have to go on the inversion table to really get going.

Dr. Darrow: Okay.

Doug: I enjoy going to the gym, I lift weights. I was doing Jiu Jitsu, but I just can't do it anymore, and if I go on the inversion table, I can get to the gym, and I can do my weight routine, and my stair master and all that, but it's still kind of wakes me up at night. It's really when I'm laying down for a long time and it's very uncomfortable.

Dr. Darrow: Okay. So is the main issue you just have low back stiffness?

Doug: Yeah, I mean it hurts. It does hurt if I sit too long. It's very -- it's very stiff, and uncomfortable.

Dr. Darrow: Okay. All right.

Doug: They told me I needed surgery. I tried decompression therapy.

Dr. Darrow: Sure.

Doug: That helps very little, I'd say.

Dr. Darrow: Yeah. Okay, so here's good news. The good news is that they told you, you need surgery, and you didn't do it. That's the good news. And the reason I'm saying that is a herniated disk doesn't have to cause any pain, okay. I don't know -- I'm not sure what part of the show you tuned in on. But in the beginning I was talking about people having things like herniated disks, or meniscal tears, or rotator cuff tears in the shoulder or all these terrible things, labral tears, terrible, terrible, terrible, right? No.

Because a lot of people have those and have zero pain. So that herniated disk may have been there for an awful long time before your back started bothering you. And again, like I tell every single person, I need to examine you, and touch the area. I can generally tell you in about two minutes, if it's something that I can help you with, or whether you need surgery. I don't remember the last time I ever sent somebody to surgery, although probably half the people that come to see me, have been told they need surgery. After treatment they didn't need surgery anymore, because it wasn't a surgical issue. And from what you're telling me, this is not a surgical issue, okay?

Doug: Yeah, yeah. They really -- they really made a big deal, they said 7 millimeters is huge, and they need to go in there and do a micro incision and cut off the herniated part, basically.

Dr. Darrow: Yeah. I don't agree just from what you're telling me. I would have to examine you to tell you. Did anybody touch your low -- did your doctor touch your low back?

Doug: You know what? Not really. No.

Dr. Darrow: No. Right, so how the heck does he know what's going on?

Doug: That's interesting, yeah. They did like toe, like where they do these things with my toe and my reaction.

Dr. Darrow: Yeah, I know. I know.

Doug: But no I don't ever remember him really getting in there and touching my back.

Dr. Darrow: The first thing I'm going to do if you walk in the door, is I'm going to have you lay face down, and touch your low back. That's how I'm going to tell what the issue is.

Doug: Okay.

Dr. Darrow: Not from an MRI. Never -- never from an MRI. I like people getting MRIs, just as a backup, because a few times I found cancer, or these weird tumors and things.

Doug: Oh wow.

Dr. Darrow: So I like to get that as a backup. But no. Doctors need to use their hands, and examine people, just like my grandfather did who was a doctor born in the 1800s. He didn't have an MRI.

Doug: Right. Right. Okay, well yeah, I'd love to see you and is this something like that can heal? Or is it something that I have to come back...

Dr. Darrow: No. From what you're telling me, I think -- I think that using regenerative medicine, you know cells from your body, platelets or stem cells can heal it up. And from what you're telling me, you don't seem too bad.

Doug: Wow, okay.

Dr. Darrow: Get that 7-millimeter herniated disk out of your mind, right now.

Doug: Okay. Because it has at times where I can't even walk, it blows up.

Dr. Darrow: I understand. I'm not saying you're perfect.

Doug: Okay.

Dr. Darrow: But from what you're telling me with your activity level, there's not much going on that's terrible. And it is hopefully healable.

Doug: Okay.

Dr. Darrow: I'll be able to tell you as soon as I touch it.

Doug: Okay, great. I'm excited. Okay, I'd like to see you. Thank you so much for the time.

Dr. Darrow: All right. And the number to the office is 800-300-9300, you can call there now, there's people by the phones.

Doug: Okay.

Dr. Darrow: And you can go to the website, which is www.lastemcells.com, that's www.lastemcells.com. And you can watch videos of me injecting the low back and see if it's something you want to do, it's a lot easier to walk in the office, get some injections and walk out, than getting surgery, and not knowing what's going to happen.

Doug: Right. Absolutely. That's a good point, okay lastemcells.com.

Dr. Darrow: Yes.

Doug: I'd love to get in touch. Thank you so much.

Dr. Darrow: And every page on that website has a spot where you can email me too.

Doug: Okay. Wonderful. Okay.

Dr. Darrow: God bless you, there's good hope ahead.

Doug: God bless you as well. Thank you.

Nita: Thank you, Doug.

Dr. Darrow: Thank you.

Nita: Appreciate your call, 866-870-5752 is our number right here in the studio, call and speak directly to Dr. Darrow about your pain, especially before you're about to roll into an elective surgery, right.

Dr. Darrow: Yep.

Nita: So do you want to go to Steve?

Dr. Darrow: You know what my mom used to say?

Nita: What?

Dr. Darrow: When something happened to her, I go Mom, I've got to take you to the hospital. And she'd go don't take me to the hospital Marc, and I'd go why? She goes because they'll roll me in the front door and then roll me out the back door. She did not like doctors, whoa.

Nita: Well, she loved you though.

Dr. Darrow: Oh, she loved me.

Nita: Yes.

Dr. Darrow: I mean, she wanted me to be a doctor. But she didn't like going to doctors, and her father...

Nita: Yeah, no, I know.

Dr. Darrow: And the reason is simple. Her dad was a doctor. And the office was in their house, and they lived in a Black Ghetto in Chicago. So they had a lot -- when she was a little girl, they had a lot of stabbing and gun shots, and people screaming in the house. And she got terrified. And to the day she died, at 102, she never, ever wanted to go to a doctor. She would fight me to go. One time I had her go to the dentist, and the nurse called up, or the hygienist called up, whatever it was, and said Dr. Darrow, your moth just punched Dr. Sun in the face. What should I do? So yeah, she was traumatized.

Nita: I'll say. Wow.

Dr. Darrow: Yeah, she was really traumatized as a little girl. So anyway, the question for Steve here, thank you for calling in, Steve, is can inflammation in lungs be resolved with stem cells.

Steve: Hello.

Dr. Darrow: I'm going to say the answer is yes. It's not something I do. I stick to orthopedics.

Steve: You're involved with stem cells.

Dr. Darrow: Turn off -- please turn off your radio because we're getting the echo back in here. There are guys who do stem cell inhalation in the lungs. I don't know who they are. I have definitely heard of it many times, and I've had patients come to me, who have had all kinds of lung diseases healed with stem cells. It's not the work that I do though. And I don't think the Medical Board in California would like me very much, if I did it. But there are guys who do it. You've got to get on the internet and do a search, and you will find them.

Nita: Thanks for your call Steve.

Dr. Darrow: And we're going to go to Jonathan. Let me give out the phone number to the studio again.

Nita: Okay.

Dr. Darrow: You can call me and Nita right now at 866-870-5752. You get a free copy of my book, Stem Cell and Platelet Therapy, Regenerate Don't Operate. It took me five years to write this book, get all the research together for it. I think it's a great book, and people seem to like it. I

write it in a very simplistic, rather than a medical way. And if you call in right now, I'm going to send you a copy of it. I'll mail it out to you, for free. Totally free, and again the phone number to call me right now is 866-870-5752. Jonathan, let me read what the call screener said here. Your right knee has degenerative arthritis. Can stem cells help chronic pain? The answer is typically yes. Not always. So tell me more about your knee and how long its bothered you for and what the MRI shows, and what your doctor said.

Jonathan: I had a -- I already had an appointment, or I actually met with an orthopedic doctor, and obviously what they're saying is that I need a knee replacement.

Dr. Darrow: Okay.

Jonathan: I had x-rays, and so -- but the funny thing is that I have no pain. I really don't have -- I don't have any pain.

Dr. Darrow: Well, then get the knee replacement and you may.

Jonathan: So seriously...

Dr. Darrow: I'm sorry. This is hysterical. And I'm laughing a little bit, but inside I'm not very happy, I'm just going to be honest with you. This makes me very angry. Why is someone going to give you a major surgery, where you could get infected, you could die, you can end up with a terrible thing, when you don't have pain. You tell me the answer to that one?

Jonathan: I don't know. I don't take pain pills. I don't anything like them for that. I mean, I don't have -- I lose my balance a little bit. I'm a golfer, I'm a walker, I'm a cyclist, I'm afraid to cycle anymore, because I am -- I just don't have that balance, I feel a little bit off balance.

Dr. Darrow: Yeah, how old are you Jonathan?

Jonathan: I'm 70 years old.

Dr. Darrow: Okay. The balance thing, I would go get checked out, start with an ear, nose, throat doctor, that's where you start. And then if they need to, if they don't find anything they may send you to a balance expert. Because that may not be from your knee. As we age, we lose what's called proprioception which is our ability to know our body part in space. So, it's not uncommon, and people have it without...

Jonathan: I could -- I could (inaudible) standing up. I could (inaudible) standing up. And so but now I find it a little bit -- a little bit awkward now, I have to depend on the (inaudible) to you know kind of keep my balance.

Dr. Darrow: Okay. Well all that's fine. All I'm telling you is this may not be related to you knee. And it's something that you may want to get checked out, because there could be something going on, that you can heal. It's not what I do. I'm not a balance expert, but there are balance experts.

Jonathan: Okay.

Dr. Darrow: But the knee --

Jonathan: Right.

Dr. Darrow: The knee is a different story. I mean if you're having any kind of discomfort with it, that's something that I'd love to look at with you, okay.

Jonathan: Yeah, I don't -- I really don't, but like if I'm stepping downstairs, of course, there is a little bit of like nitch but not a sharp pain. I can walk up there's not a sharp pain either, but I just don't have the strength that I used to have to be able to walk.

Dr. Darrow: Yeah, okay. Another thing that happens with aging Jonathan, is we're not as strong as we used to be, and if you are having some kind of pain in your knee or joint, we guard that, so it doesn't hurt. We keep it from hurting and the way that looks is that we're weaker. So I'd have to see you. You know, this is sort of complex, and you've got some issues that should be looked at, okay?

Jonathan: Okay. So I call that 1-800-300-9300?

Dr. Darrow: Yeah, 1-800-300-9300, you can talk to my staff there right now, and I'll be glad to see you and give you my two cents on what's going on. And I'm certainly not going to send you for a knee replacement.

Jonathan: So you can actually inject cells onto -- you can actually inject something that my cartilage will grow?

Dr. Darrow: Yes. There's no question about that. That's been studied.

Jonathan: I do have a copy of the x-ray, I can either email it to you, or take it when I see you.

Dr. Darrow: Well, just bring it in, I mean emailing me doesn't do any good. I need to see you and then see what's going on.

Jonathan: Okay.

Dr. Darrow: And the x-ray is not going to tell me a whole lot. I need to examine you.

Jonathan: Okay.

Dr. Darrow: I want to see the x-ray, but I've got to examine you, and then I'll look at the x-ray.

Jonathan: Okay.

Dr. Darrow: X-rays don't tell the truth all the time. And I'll give you an example. I had a person come in yesterday, a new patient. And this person is a physical trainer, very active guy. He's actually about my size, he's about six feet, 165 pounds or so, and a real sports guy. And he's got advanced arthritis in his left hip, okay. And of course, what do they want to do? Give him a prosthesis. Well, I examined him, and he walked around, and he's in good shape. So his x-ray looks bad, but he's good. So I'm not going to treat based on his x-ray, all right?

Jonathan: Well, I did a 100-mile ride, my last 100-mile ride from here to San Diego was last year.

Dr. Darrow: Okay. You're in good shape, man. We can make you better but stay away from the knife. That's all I can tell you. There's no point in...

Jonathan: Stay away from the bike?

Dr. Darrow: The knife, knife, knife.

Jonathan: Oh, the knife, oh, okay, yeah. Yeah, no, I used to do spinning training at the YMCA for like 10 years I did that.

Dr. Darrow: Okay. No, you're in good shape, you're not going to be any problem to get better.

Jonathan: Yeah, (inaudible) I don't have a problem. I mean I'm 70 years old, but I don't feel 70.

Dr. Darrow: No. You don't. You sound like you're 20. Anyway, Jonathan God bless you, we're going to move on. And I'm going to give out the number to the studio right now to talk to me. I hope you call me, it's 866-870-5752 and I would love to speak to you, if you call in right now, I'm going to send you a free copy of my book, Stem Cell and Platelet Therapy, Regenerate Don't Operate. There's about 250

studies in here about regenerative medicine, using platelets and stem cells, and studies showing that surgery is really not a great thing to do for a lot of these things, that really don't need surgery. I mean, we've heard about it on the show by several people who have called in, who were told they needed surgery and didn't -- never did it and were healed by this.

And I'm the guy that had the surgery, before I knew about this, and it turned out terrible. And then I healed it using my own cells from my body. So I'm a believer in this. Most of my patients are believers in this. There are a lot of patients I have that didn't heal, because they didn't follow my advice and it wasn't the treatment that failed. They failed. So that's where I'm at with it.

Nita, it's time for what do you think?

Nita: Well, I was just going to share that I also had Prolotherapy. So I'm also one of your success stories, just reminding you.

Dr. Darrow: Yep. Your neck was -- did they tell you, you needed surgery by the way, I forget?

Nita: Oh, yeah. My chiropractor fired me, because he said I needed surgery. Well, because I got the x-rays and MRI with him, then I went to -- I was trying to get a second opinion from another chiropractor, he wouldn't even see me. And then I heard about you.

Dr. Darrow: Well, I'm glad you're okay now. So anyway, are you ready? You're on the pin.

Nita: Oh, I was trying to distract you. Yeah, I'm ready.

Dr. Darrow: Nita, Nita, Nita. You have two seconds to answer this question.

Nita: All right.

Dr. Darrow: What do you call it when Batman skips church?

Nita: Oh.

Dr. Darrow: Christian Bale.

Nita: Oh wow, I never even thought that.

Dr. Darrow: That's pretty good. Yeah, whoever...

Nita: Yeah, that's really a good one.

Dr. Darrow: Whoever figured that one out is pretty smart.

Nita: Wow, that's a good one.

Dr. Darrow: Okay, and one more and then we're done with this.

Nita: All right.

Dr. Darrow: What did the elevator say when it sneezed?

Nita: Hic-up?

Dr. Darrow: That's good. I like that. I think I'm come down with something.

Nita: Okay. 866-870-5752 is our number.

Dr. Darrow: Save her. Save her.

Nita: Here in the studio. And check out the website www.lastemcells.com that's www.lastemcells.com. And if you can't call, and you really want some attention this weekend, you should just call the office directly, people are answering the phones all the time, 800-300-9300, that's 800-300-9300. And you can email Dr. Darrow off of every page on the site, and you can see him performing the treatment on videos. That's very educational and pretty exciting I think.

Dr. Darrow: Absolutely. I think I've got a great website too. I work on it every single day.

Nita: I know. I check it all the time. It's always different. You're always updating it. You're on top of it. No, that's good. That's really good.

Dr. Darrow: I love it. I love it.

Nita: Yeah.

Dr. Darrow: I love communicating with people, educating, you know I was a teacher at UCLA, in the residency program for physical medicine and rehabilitation for 20 years. And I love -- I love when the students -- the student doctors come, and they call it shadowing me. They watch me, and I teach them how to do the work that I do.

Nita: Okay. We've got Al. We're going to run out of time.

Dr. Darrow: Oh, let's do it. Al, Marc Darrow, Dr. Darrow, how are you? You've got problems with pain in your legs. What's up with that? How long has that been going on?

Al: I'm not sure exactly what it is. I had edema.

Dr. Darrow: You had what?

Nita: Edema?

Al: Edema.

Dr. Darrow: Okay. Is it in both legs or one leg?

Al: Both legs, and then I have peripheral neuropathy and I lose my balance real bad.

Dr. Darrow: Oh boy, how old are you Al?

Al: I'm 81.

Dr. Darrow: Okay. So this isn't what I do for a living, but I'll give you some information about it. Number one, you need to get a blood test, that checks all of your vitamins, minerals, amino acids, and antioxidants. We do have it at our office, it's called Spectracell. And that may tell you if one of these things is low, that can cause the nerve damage that you're having.

Secondly, you need to go to a cardiologist, because edema in the legs is often from the heart not functioning as well as we want it to. And then the fluid that's being pumped back up to the heart doesn't get back there very well. So gravity leaves it in the legs. We call it dependent edema. And that's all I have to tell you right now Al. And we're ending the show unfortunately. God bless everybody. Thank you, Al, thank you all the callers. Thank you Nita Vallens for being a great host. Thank you Suzette, thank you Alex. And if you want to watch videos of me doing these procedures of stem cells and platelets, go to www.lastemcells.com or call the office, 800-300-9300. Thank you everybody.

Nita: Thank you. And thank you Steve. See you next time.