Living Pain Free 5/14/22

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, Dr. Darrow.

Dr. Darrow: Hello, Nita Vallens. You look gorgeous today as usual.

Nita: Thank you. Like my scarf? It used to be my Mommy's she bought it

for me, actually.

Dr. Darrow: I know. I love it's so nice, it fits you so well.

Nita: Thank you. And how are you today?

Dr. Darrow: I'm good. Did you I just wrote a book on reverse psychology?

Nita: No, do tell.

Dr. Darrow: Do not read it.

Nita: All right. I'll just knock that off my to-do list, and there we go. But

speaking of books, speaking of books, if you're just joining us especially if you're new to the program, you might want to know that if you call in today, you get Dr. Darrow's latest book for free. It's fabulous. It's called Stem Cell and Platelet Therapy, Regenerate Don't Operate. It actually has 264 scientific studies, and you can get it right now for free, you don't even pay postage, 866-870-5752 is our number right here in the studio, and you can get your free book right now, when you call the program, 866-870-5752.

Plus the real bonus is you get private little chat with Dr. Darrow about your musculoskeletal pain. So it's a win/win, right?

Dr. Darrow: Well, it's nice to win by healing, right?

Nita: Yes.

Dr. Darrow: And what we're doing is we're actually healing the body by

stimulating new tissue to grow, using your platelets and your stem

cells if you want to do that. I like to do it on me. People go how could you possibly inject yourself? Well, the answer is how could I not?

Nita: Yeah, right.

Dr. Darrow: Because I mean I've been doing this work almost 25 years and it's

worked on me, every time. It worked on you, Nita.

Nita: Yes.

Dr. Darrow: And remember, what's our friend over at your radio station, the

other one, KPFK that you have your show?

Nita: Oh, yeah, you know, Terry McNally. He's back on there, by the way.

Dr. Darrow: Oh good.

Nita: He's on there, yeah. Yeah, yeah.

Dr. Darrow: Yeah, a very good show he's got. We healed his knees, God it must

have been 20 plus years ago. And he had a football injury at Harvard where he went to school, he's a very Harvard-ee kind of

guy, very intelligent.

And he was playing intramural football, hurt his knee, and wa-lah, they took out his entire meniscus. That's what they used to do. So when I saw him, his femur, that's the thigh bone, wasn't even sitting straight on this tibia, the leg bone. It looked terrible. And actually I have a book, not the one you just mentioned, but I have another book that I wrote way, way, way on what's called Prolotherapy which is injections of concentrated Dextrose, to stimulate an immune response, and it created inflammation and bring fibroblasts to the area, and we did that on him several times.

And he was going to go back and dance, and what else did he like to do. He like to do yoga, and he liked to hike. And he was all fine.

We have better treatments today from the old Prolotherapy therapy days, still what we're doing, it's regenerative medicine, is a new terms, but it's really still Prolotherapy, meaning to proliferate new tissue growth. So we don't like to cut tissue out. I see patients, new patients every day who have had failed surgeries, that means a surgery that went bad.

It doesn't mean the surgeon did it wrong, I love the surgeons, it's just that the surgeries don't always come out very well. I'd say it's a 50/50 chance, and a lot of people get their surgery and ha-ha, Dr.

Darrow, I feel better. And then they come back to see me a year later, and go well, I guess it didn't work after all.

So be very careful. Surgery is not conservative, it's very invasive. We see all kinds of terrible side effects, like infections. I've had a few people die one or two on the table, when I was doing orthopedic surgery, I don't do that anymore. That was in my training, and I went ahead to do -- switched from orthopedics, orthopedic surgery to physical medicine and rehab, which I did a program in my residency at UCLA, where I graduated. And it's been amazing for my body. Nita, I know your neck healed.

Nita:

Absolutely.

Dr. Darrow:

I wonder if Terry's listening to the show. Hi Terry. But he's been doing great. And I see about 60 or more patients a month, most of them get better, not everybody. The failures happen when people don't listen to me. I've got to choose the right patient, using regenerative medicine of platelets and stem cells will not work on everybody, if you choose the wrong patient. You have to be a good candidate.

How do I find out? I have to touch their bodies. I don't give hoot about the MRI, the x-ray or the CT scan say unless I find something really weird, like a broken bone, or a cancer or something like that. But I examine with my hands and I move the patient around. And I get emails all day long from people saying let me send you my x-rays, and tell me if you can help me. I go, no. That won't tell me anything.

There is a photograph that I keep in every room in my office where the patients come in of a fractured spine, that's all crooked. And the reason I have it there, is because it's one of my best buddies, and he had a bad accident doing ATV, is that what it's called ATV, allterrain vehicle, yeah.

And fractured his back, and today he's got no pain, zero. When people look at it, and I say does this guy have pain? They go oh my God, it must be terrible, he must be paralyzed. Nope, no pain. And I use that as an indication and a lesson that you don't look at your MRI or your x-ray to decide if you have pain or not. Or where the pain is coming from. We need to use our hands, docs.

That's right. We need to touch the body. Almost everybody who's had a failed surgery who comes to me, I ask have you had your doctor touch your body, and they go no. The doctor did not even touch me. They just looked at the MRI and operated. To me, that's not really smart. Because they're doing surgeries that don't need to

be done, and I've had way too many people, way too many with failed surgeries, and we get them better afterwards, because I find

the pain generator using my hands. My touch.

Nita: Well, speaking of using your hands, it looks like you used your

hands on Don in LA, because he's wants to give a testimonial.

Should we talk to him?

Dr. Darrow: Why not? Hey Don, Dr. Marc Darrow, what's your last name --

well, you shouldn't tell us.

Don: Ward.

Dr. Darrow: What is it? Oh, Ward, I know you. Don Ward.

Don: Yeah, like Marc I was thinking it's got to be -- well, it's over -- at

least 45 years.

Dr. Darrow: That we've known each other.

Don: Yeah.

Dr. Darrow: We both, by the way, Don and I study with the same spiritual

teacher, and that's how we know each other.

Don: Yes. So I guess the mid to early 70s, something like that.

Dr. Darrow: Something like that, yeah, I started studying with John Roger in

1972 when I met him.

Nita: Oh, I was a mere child.

Dr. Darrow: You were hardly -- you were just a glimmer in your father's eye.

Nita: A mere glimmer.

Dr. Darrow: So Don when did you --

Don: This is a mercy call, so you don't torture Nita too much today.

Nita: Oh, thank you, Don. I'm so grateful.

Don: You're welcome. You're welcome. And I figured the more

convincing my testimonial the better more of a kick-back I'll get.

Dr. Darrow: No kickbacks.

Don: Oh, really.

Dr. Darrow: There's a Federal Law call Stark.

Don: Well, we won't tell anybody.

Dr. Darrow: No, doctors are not allowed to give kickbacks.

Nita: But I'm not a MD, I can him a box of See's Candy or something.

Don: That's right.

Nita: I can do that.

Dr. Darrow: Wait, wait don't talk about this on the radio.

Nita: Okay.

Dr. Darrow: Anyway Don, did I work on your knees, I can't even remember.

Don: Yeah. My knees. Okay, here's the story, it can be long or short.

Dr. Darrow: Make it short. Because we got a lot of people that want to talk.

Don: Oh, good, cool. 2018i was in good shape, jumped over a short wall

on a project, didn't think anything happened, the next knee was a little stiff, and then as the week progressed, it started clicking. And I'm thinking, oh my God, this -- I can't hardly walk, this is killing

me, what the heck.

Then I thought I wonder if this will lead a knee replacement, and I

can't believe I thought that. I've known you all these years.

Dr. Darrow: Well, that's what we hear about all the time, so that's what we think

about.

Don: I know. That's because it's the first thing. And it's like there's no

way -- oh duh, let me give Marc, I texted you or something. I went

in --

Dr. Darrow: Don, let me tell you something really funny. Years and years, I

mean I've been doing this work, since my residency at UCLA. And there was time when I had sciatica when I was working at Rancho Los Amigos Hospital with all the paralyzed guys, you know from brain trauma and spinal cord injuries, and my leg pain was so bad, I had to hold onto the wall and limp into each patient's room. I never

said a word to anybody, because I'm pretty tough.

And I was thinking what am I going to do. I'm going to have to get surgery, even though I was telling everybody not to get surgery. But I was in so miserable pain, I was having those negative thoughts

too. Well, guess what, I injected my own back, and the pain went away down my leg.

Don: Wa-lah.

Dr. Darrow: Well, usually I get to my certain of my neck or back, so I have other

people do it. But this was a spot --

Don: Yeah,

Dr. Darrow: Well I've done both my knees. You probably know my story. I've

injected both knees. I've injected what else, my elbows, my shoulders, and other things like I had broken ribs on my back, you know my lower back, where the 12th rib is, and up, those were fractured when I fell down the stairs. I had one of my staff inject me there. Everything has gotten better. I'm very lucky that this

work is something that --

Don: It works. And I found when you stated doing it with the Dextrose,

the original Prolotherapy.

Dr. Darrow: Yeah, yeah. But it's morphed since then, it's much more powerful

now. Now we have platelets which not only do the same thing that the Dextrose did, which is create some inflammation, but the platelets have growth factors in them. And then now we have stem cells that actually supposedly anyway, grow colonies of new tissue on their own, so we mix up the platelets and the stem cells, so we

get the best of all the worlds.

Don: Yep.

Dr. Darrow: So what happened? How many did I have to inject your knee.

Don: Well, I'll tell you, so the knee was like you know really hurting, I'm

limping and it's clicking and then this crap, and it's like -- duh. So I texted you, went into the office, they drew blood, and then you injected me with using that ultrasound so you could see where you were going. I think you had about 10 or 12 injections around my knee. I mean, you know, it wasn't painful or anything, and I walked out, and maybe it was a little stiff, about three or four days, I'm out in my garden and I'm talking to my brother on the phone and I'm

pacing back and forth in my garden.

And I'm telling him oh yeah, I went to see Marc and I got injected and everything and then I go, I stopped in my tracks and I'm going wait, I bent down on my knees, and squatted, I go the pain's gone,

it's fine.

Dr. Darrow:

I know. I've had the same experience with my knees. I know. It's actually amazing. And by the way, what I probably did with you, because I had to do this with me, was I probably injected into the joint capsule using ultrasound so I can see where the needle is going. And by the way, folks listening, don't ever get a knee shot or a shoulder shot, or a hip shot without an ultrasound, because the doctor doesn't know where that solution is going. He's guessing and the studies show that we miss the joint if we do blind injections. You don't want to do that.

And it's really to do ultrasound, they're expensive to buy I've got three of them in the office, so we just roll them around from room to room.

Don:

It's fast. I mean after you spin the blood, it's fast, the injections are fast.

Dr. Darrow:

But the other thing I want to tell you, if your patella was clicking, your knee was clicking, that means that the patella was out of its track in the femur, and that's the trochlear in the femur. And I had that happen. I tell this story every once in a while, how Dakota, my 85 pound Husky was running full speed and hit me on the side of my knee at the dog park. And that was happening to me, my patella was loose, and it would catch all the time, and I did what I call the ring of fire, I made this up, I never saw it, I just intuitively did it, which is what I've done with most of this work. I've just practiced on me, experimented.

So I do injections all around the kneecap, and that regrows what's called the retinaculum, it's like a glove that fits on top of the patella, that hold it down into the trochlear groove. So I did that to myself, one time, and that's probably what I did with you, I can't remember, because I do so many knees.

Don: Yeah.

Dr. Darrow: And my knee just tightened up, and the pain was gone, the clicking

was gone. It was like a miracle.

Don: Exactly. So you know I refer a lot of people to you.

Dr. Darrow: I know you do. And I love you.

Don: Yeah, of course, well, because it works. And I want to see people get

well, just like you. So I went back for a follow up visit about three or four weeks. And okay, what's matter, what hurting you. I told -- I'm not, I'm fine, my knee doesn't hurt. And you go what are you doing here. I said, I was supposed to come for a follow up. And you

said, only come back when you have pain, or you need something. I was like oh, okay.

Dr. Darrow:

Well, we usually have people follow up about two weeks after injections, and by then we can usually tell if a person is better or not. Now the standard in the industry, if we could say there is such a thing, is most doctors who don't do a lot of this, will wait for weeks and weeks or months, to check a patient to see if all the tissue is grown and if they're better.

And I think that's foolish. I'm just putting it out there. Because when I hurt myself, I do it sometimes three, four times a week, to get the most cells in there, and get it healed the quickest. Why am I going to wait a few months.

Don: Yeah.

Dr. Darrow: You know then the healing --

Don: In hopes they will get better.

Dr. Darrow: Yeah, there's just no point, but that's my technique, everybody does

this on their own, their own way. I don't put any other doctor down. I just think that if you want to get healed quickly, you do the injections quickly, close together and I've had many people who fly in from out of the country, or different parts, different states, different parts of the country. And if they're just here for a few days, and a lot of people come here to vacation, you know it's so

beautiful.

Don: Sure.

Dr. Darrow: But I will inject them each day, and you know just pumping the

cells, and rebuilding that tissue, keeping the inflammation going. Inflammation is actually a good thing. When people are sore from inflammation, it's the body trying to heal itself. That's God's way of

doing natural healing.

Unfortunately, many injuries don't get enough inflammation to create enough sequestering of what's called the fibroblasts or the cells that come to the area that actually spit out and grow new collagen and cartilage. So when we do these procedures, they actually create a short burst of inflammation. So after I inject myself, I'm usually stiff for about day or so, about 24 hours. That's

not anything terrible, it just feels like I worked out hard.

Don: No. It's not even that stiff. I mean you can feel it, but it's not it's

immobilizing or anything like that.

Dr. Darrow:

No. There was one time I did my elbow, my left elbow, and I used sodium morrhuate which is a very strong proliferant, and as soon as the needle touched the skin it burned. And that burned for two weeks. I haven't used it since. And my arm was locked up in like a 90 degree ankle. And I was terrified, because I didn't know who to call to find out -- you know it was back in the day when very few people were doing this.

And I just waited it out. And two weeks later, my arm loosened up. I had awakened one morning and the "tennis elbow" was gone, and it's been gone ever since, it's got to be I don't know, 15, 20 years I did that, more maybe.

Don: Wow.

Dr. Darrow: So, yeah, I've done a lot of experimenting on my body. And that's

how I practice medicine. I do a lot of natural medicine, but before I have anybody do anything, I always check it out on my body. So everything that I give to other people I check out on me first.

Don: Well, you are intuitive, but I think that's spirit's way of guiding you

to the best route and the best methods of helping.

Dr. Darrow: I think so. Yeah, I think so. You know I've been trained in

traditional medicine, you know of the best institutions, UCLA, but most of what I do in medicine is really intuitive. It's things that I just experiment with, I'll read about something, and I'll try it out on me, and see it works, if it does, then I will approach my patients,

and say I tried this on me, it worked, do you want to do it.

And there's tons and tons of things -- I hope -- I think I'm a dummy,

but there's something there.

Don: So anybody listening now, and you have anything that's causing you

pain or anything, call and set an appointment. It works.

Dr. Darrow: And the phone number is 866-870-5752, that's 866-870-5752. You

can call me right now at the studio. I love people to call. We'll take

good care of you, like we are with Don.

And Don, God bless you, and thank you so much for your call, and

your experience.

Nita: Thank you, Don.

Dr. Darrow: Because that really helps other people understand what these

procedures of regenerative medicine are, how simple it is, you walk in the office, you get an injection with your own cells, that we take from your body, and you walk out. You don't need anyone to drive you, it is so easy and it's so simple. It's something that a lot of people, a lot of my patients who have had their healings tell their friends. And their friends, well I have an orthopedic surgeon who says it doesn't work. Well, that's because that doctor doesn't do it.

So from my point of view and from my experience surgery doesn't work, okay. So there's different schools of medicine. I don't know if any is better than the other. It's just whatever we get in the rut of doing, we think is the best, and I like conservative medicine

The third cause of death in our country is introgenic that means that the doctor created it, it's infections and hospitals, that we pick up special infections like pseudomonas in hospitals where it grows. It's hard to get anywhere else. Medicine can kill people combinations of medicines can hurt people.

When I was resident at Cedar Sinai Hospital, a patient had a stroke, because they were given more than one medicine, and there was an inaction of blood thinning, that the doctor didn't even know about. Surgeries, my God, there are so many terrible side effects that I see from surgeries, that I don't ever want to have one. I hope I don't have to. I had my shoulder operated in med school, and it turned as an abomination, absolutely terrible. I loved my friend, who was the surgeon, who was my professor, but it came out bad. And I don't blame him. I never blamed him for it. It's just what happened.

And if you're going to do anything in medicine, do the most conservative, natural thing you can. That's the greatest advice I can give to anybody. I tell my patients, and I told someone this the other day, and it was funny. I said, you know I tell people, and I'm going to tell you. The healthiest thing to do is stay away from doctors totally. And the guy stood up laughing and he goes I'm leaving. I'm out of here. He sat back down.

You know, you've got to find out the right doctor for you, and guy who is open-minded to what you want, and I think the most important thing to know is that most surgeries on the skeletal system, the musculoskeletal system that are done, are what we call elective.

Now, elective, means that you the patients get to elect whether or not you want to do it. It doesn't mean the doctor tells you, you have to do it. If it's elective, that means you don't need it. You want it maybe because you have pain. But if you have pain, you know, your joints, ligaments, tendons, anywhere from the head all the way down the neck and the shoulder and the elbows, and the wrists and the fingers, and the hips, even muscle tears, the knees and the ankles and toes. Think about doing regenerative medicine first. It's very, very conservative. There's very little in the way of side effects, because basically, the only thing that happens mostly, people just get a little bit stiff afterwards. Some people don't even get that.

The people that fail are mainly people that stay very active, and don't listen to me. They cheat on me. I tell them, let the tissue grow. Stop weightlifting, stop whatever it is, swimming, a lot of swimmers have shoulder injuries, rotator cuff tears. Give it a freaking break. You know, let it heal. A lot of people will take anti-inflammatory medicines. We need the inflammation you've got to stop your NSAIDs like ibuprofen.

Another big cause of the failure is not enough treatment. Don't come in expecting one treatment is going to you know wave a magic wand on you and have you fly to heaven. It doesn't work like that. You've got to grow enough tissue; it may take a few treatments.

Another reason for failure is not using an ultrasound to look, and see where that needle is going. The studies show if you don't use an ultrasound, you can miss that joint at least a third of the time, so the injection that doctor did, did nothing, it went to the wrong place.

And then we this new thing coming up where we get, I'm going to call it bad doctors, where the doctors don't have any experience. Very often chiropractors will herd in their patients to get stem cells or platelets, with the doctor who doesn't know what they are doing. If you're going to get regenerative medicine, go to somebody who does it all day, every day. There's a few of us out there that do that. If you don't like me, I can refer you to someone else. But there's a handful of doctors in LA that do this full time. The others are just -- I was going to call it want-to-be's but it's not even that. It's just guys who hang their shingle, saying they do it, but they don't do very much of it. And I would stay away from. You're not going to get a good deal with them.

So, Nita, I'm going to give out the phone number one more time, so we can get some callers, it's 866-870-5752, and if you want to catch me at the office or get more information that we didn't talk about today on the show, the phone number to my office is 800-300-9300, I'll repeat it to you, 800-300-9300. Oops the break, I'm going to give out the website so you can watch me doing the procedures on videos, www.lastemcells.com you can email me there from every page.

Sounds good, you're listening to Living Pain Free with Dr. Marc Darrow, I'm you host, Nita Vallens and we'll be right back.

Nita:

[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, plateletrich 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 we're taking your calls at 866-870-5752, right here in the studio, and you get your free book, when you phone in, it's Dr. Darrow's latest, Stem Cell and Platelet Therapy, Regenerate Don't Operate with 264 scientific studies, and the forward is written by Suzanne Somers. What do you think?

Dr. Darrow:

I love Suzanne Somers, God bless you, Suzanne Somers. She's a great advocate of the kind of medicine that I do. Her new book has a chapter about me, and about regenerative medicine, and how it worked on her and her family. I've been treating them, my gosh for the last 20 plus years with good success, thank goodness.

I'm going to ask for your calls again at 866-870-5752, you get a free copy of my book, Stem Cell and Platelet Therapy, Regenerate Don't Operate and I also wanted to mention, Sunday on May 15th, I'm going to be on another radio show of I guess you would call him a famous fitness trainer, and it's on KABC radio, a different station. And let me see if I can find the information on that, to give that out, yeah. His name is Rehan Jalali, and he is sort of the fitness trainer to the stars. He's got book, The Six Pack Diet Plan, and Sport Supplement Buyers Guide. He treats Oscar winning actors, Emmy winners, TV Stars, Grammy winning people. He's also starting to refer me patients, because he had pretty amazing instant success on his torn quad tendons, both knees. He came in, and we worked on that.

So that's on KABC radio, 790 AM and that is on May 15th, from 5:00 to 6:00, so you can listen in on that also, if you'd like. I'm going to go in the studio and be with him, and it will be filmed and he's a great guy. He's got a great, great show, it's published if you want to call that, maybe you have a better radio word for that Nita, all over the country.

Nita: That's great.

Dr. Darrow: Is that the word? What do you use when you have a -- syndicated, that's the word.

Nita: Syndicated.

Dr. Darrow:

Yeah, his show was syndicated. So I'm really excited to be on that show on the 15th. So let me see what else I have going here. We do something called the Vampire Facelift in the office, where we inject the cells from your body, the regenerative cells into the face, really? Yeah, it's called the Vampire Facelift, and it regrows the collagen, and makes you look young. We have just as many men and women who do that. It's not just something that females do for vanity sake, it's not like that. It's something that really is regenerative kind of a thing and regrows the collagen.

As we dry out -- as we age, things don't look as good as they used to. So this pumps it back up and rejuvenates the face, just like rejuvenate the joints and the ligaments and the tendons in the body.

We also something for hair regeneration, if your hair is thinning, we can use the same cells on the top of your head. If you're completely hairless, it's not going to work on you. What's our friend, the psychologist's name, Dr. Phil. Dr. Phil don't come in and try this, I don't think it will help you very much. You'll have fuzz, that you'll have to shave off.

So we have a lot going on in the office, and I'd love to see you there. The number to the office, if you want to call me there, or get more information is 800-300-9300, and the website if you want to watch videos of me doing these procedures all over the body, I do the entire body is www.lastemcells.com and there is a spot on every single page of my website which is a very prolific website, I work on it every single day. It's got a lot of articles on healing. And there's a spot to email me. So if you -- if you're too shy -- I hope you're not too shy to talk to me now, because we're good to our callers, we love you.

But if you are you can always just go to the website and email me from there, and I do responses all day, in between patients, at night, in the morning, so I get back to everybody every single day, and as you folks who are my patients who are listening know, every one of my patients gets my cell number and I get back, if you call me, I get right back to you, if I can't pick up, if I'm with a patient, or you text me, I usually respond within a minute or so.

I love communicating. I always did since I was a little kid. And back in the day when I was a youngster, we just really had pretty much letters. I used to write letters every day to my friends and my family. And I used to love getting letters back. I still letters that my Grandfather wrote who was sort of my spiritual teacher when I was youngster. He was a philosopher, medical doctor, and they're very -

- I look at them now, and they're so fun, because I would write these simple questions about life, and truth, and he would write back all these philosophical dissertations, and I have a whole thick stack of these letters of us going back and forth, since I was probably like around 12 years old with him. You know what is the meaning of life? All of these philosophical things that the great masters would discuss with their disciples.

So I was sort of his little disciple, and my mom used to -- I'll say force me to spend my Sundays with him, and we would go hiking, we were from Chicago, we would take the train from downtown Chicago to the Indiana Sand Dunes and hike all day. And he actually had a bunch of followers, and we'd all hike together and they would discuss philosophy and you know what makes humans tick, and what the world is about. So I grew up with a very philosophical background, and I do love philosophy, and spirituality and all of those things. And if you're my patient listening, you know we've probably had these conversations because I look at it as one of my jobs with people's healing is to have them elevate their consciousness and have them realize that what they're going through is really the best thing for them at the time, and there's ways they change their attitude, right, Nita? That's what you do for a living too.

Nita: Pretty much.

Yeah, Nita is an Analytical Psychologist and I studied psychology in Dr. Darrow:

college, and it's all about how do you live in this world as a happy human being doing your best, loving yourself and loving over people. And helping people, that's what it's all about. And that's something I'm very lucky about, because my work as a doctor allows me to have that purpose. And I don't just give people medicines and surgery and you know all those kinds of things. I stay away from that. I want people to heal. And I want them to do it naturally, if that's possible.

And regenerative medicine has worked on me. I know Nita, it worked on you, thank goodness.

Nita: Twice.

And it's worked on people you've referred to me. And it's been a Dr. Darrow:

real blessing for me to be part of this movement to bring regenerative medicine to the world. Because when I started very few doctors did it, and we were the devils of medicine. No one like

us, because it worked. And no one believed in it.

And you know a lot of guys still don't believe in it, unfortunately, even though, I know a lot of doctors who do a little bit of it, a lot of orthopedic surgeons do a bit of it, and then they tell their patients, see it didn't work. But that's not how it works, sometimes it takes a few treatments to get there. It's not the kind of thing where you do it once, and it fails, and then you go get surgery.

I don't remember the last time I sent somebody to surgery. We just don't need to so it. I'm sure it's happened sometime back in my memory, where someone had a fracture or something. I'll send them right to a surgeon, but I've had many, many very difficult cases we've been able to solve, by injecting stem cells or platelets, or some mixture of that. So it's been a great, great life of medicine for me.

So, Nita, if you don't mind, I'm going to do some questions here.

Nita: Okay, do you want to give the phone number?

Dr. Darrow: I so, the phone number to talk to me right now is 866-870-5752,

and let me see if I can get a good question going here, otherwise, I'm going to have to tell a joke and make Nita suffer. No, I don't

want to do that.

Okay, here's one.

Nita: Answer an email.

Dr. Darrow:

I know, had arthroscopic on both seven years ago, looking at possible knee replacement. Let's see what this person's got to say. Knee problems. Had arthroscopic surgery on both knees seven years ago. Doctor say not bone-on-bone and steroid and gel shots within the last year did not work. Looking at possible knee replacement.

Well, I have people come in every day ready for a knee replacements who never needed that and did not really have bone-on-bone. Bone-on-bone means there is zero cartilage, and most people have some though they're having pain. So I wouldn't get, I'm going to use the word, bamboozled by hearing that you have bone-on-bone, and you need a knee replacement or another joint replacement, or even a surgery. The fact this person had arthroscopic surgery, that means you know through a port in the knee, they make a little hole put a camera in there with some tools and another port, meaning an opening, and scrape out the tissue, or cut things out.

It's not something I like to see happen, I like all that extra tissue there for cushion. And I don't see the results being great. I think it causes immediate arthritis, so patient goes in, you know, has knee pain, or shoulder pain, whatever, hip pain, gets an arthroscopic surgery. The surgeon says, oh, it's a simple procedure, we just do it arthroscopically, we're not going to open up the joint. And then they come out worse than they came in.

So, I don't like those surgeries I'm sorry. Don't beat me up about it. I don't like it. And I like orthopedic surgeons, I just don't like these surgeries that they do that don't need to be done. I think it's time that they look at their own journals, that actually do report regenerative medicine, do report how good it works. And do report the problems with surgery, but you know it's hard to change the stripes on a zebra, that's what my dad used to say, you can't change the stripes on a zebra. Meaning it's hard -- old things die slowly. And unfortunately it's a certain culture that doctors grow up in and they can't seem to get out of it. I was trained in orthopedic surgery, but because of my own injuries, I had to try something else, the surgery on my shoulder failed. I healed my shoulder afterwards, by just self-injecting.

I got a call, I'm going to go to Barbara, thank you so much for calling Barbara, this is Dr. Marc Darrow. It says left shoulder replacement, can stem cell avoid getting replacement.

Barbara:

Yes.

Dr. Darrow:

So to find out the answer to that Barbara we need to examine you. I need to touch your shoulder and move it around, and see what is going on. I can tell you this, I get patients all the time, who were told they need a shoulder replacement and definitely did not and never had to do it, and are all better now, just doing injections.

Barbara:

Okay, I have bone-on-bone on the ball and socket, I just had the last CAT scan, and the torn rotator cuffs are not the issue for the pain. And I'm very hesitant, I am scheduled on the 24th of this month. But I would love to not have to do the surgery.

Dr. Darrow:

Okay. May I speak a little bit and have you listen, and then I can tell you about it.

Barbara:

Yes, thank you. Thank you.

Dr. Darrow:

Great, thank you so much for calling in. So you've told me a few things that I don't believe, and not that you're wrong. Okay, but I'm just going to tell you. It's not that you're wrong, it's just you've been told certain things, and you believe them, and I don't believe them.

So you said the torn rotator cuff is not the issue. The issue is the arthritis in your glenohumeral joint, the ball and whatever you call it, socket joint. So that's necessarily true. None of that is necessarily true. I wouldn't be able to give you a real answer unless I touched your shoulder, pressed on it all over the place and found out where the pain is being generated from, and then moved it around to feel how the motion is.

Are you able to lift up your arm at all?

Barbara: Yes.

Dr. Darrow: Okay. Well then the arthritis is not that bad, okay. And I'm going

guess just from you being able to lift your arm, you do not need a shoulder replacement. But I'm not going to tell you what to do, unless I become your doctor. And that would mean that you'd have to come into the office, and let me do an examination, and get your

history.

I can't tell you on the radio what to do, do you understand that. I

can't tell you, you should or shouldn't get that shoulder replacement. I can tell you if it were me, I would go to somebody

else and get an opinion that's a second -- what we call a second opinion. And I wouldn't go to an orthopedic surgeon, if that's the one who told you have to do it. Because they're all trained the same

way, and they all believe pretty much the same thing.

So that's not really a second opinion. You need to go to a different

type of doctor, do you understand that, or not really.

Barbara: Yes, of course I do. I had four orthopedic surgeons that I need a

reverse shoulder replacement.

Dr. Darrow: Yeah, I don't believe that from what you've told me. But you get

four different opinions is one opinion because they're all from the

same tribe. I'm not putting the tribe down.

Barbara: No, of course.

Dr. Darrow: I'm just saying they're all trained the same way. I'm trained that

way, but I'm also trained another way. And if I had -- listen, honestly Barbara if I thought you needed a shoulder replacement,

I'd be the first guy to tell you that. Okay.

Barbara: So then the next step is just come see you.

Dr. Darrow: The phone number to my office is 800-300-9300 and if you watch

these injections, you can go to my website at www.lastemcells.com

for those of you that want to call in and speak to me right now, the studio phone number where you can talk to me live is 866-870-5752.

So Barbara when is the date -- how many days from now is your surgery about, or how many week?

Barbara: In a week, the 24th.

Dr. Darrow: Okay, so I'm going to tell you this. If I were you, I would go to my

website right now, and email me, and I will get you in as soon as

you want to.

Barbara: Okay. All right.

How long would it take you to get to me and get a real second Dr. Darrow:

opinion? Not much. And look I get so many people that have surgeries, that they're miserable. And shoulder replacements, I've seen the worst thing happen where that joint, you know the prosthesis doesn't even fit, and they can't move their arm afterwards. So that's not a surgery that I like to see happen.

Barbara: Okay. Would you repeat your website?

I'm just being honest, that's just my experience, it's not a negative Dr. Darrow:

statement about the surgeon, please. Surgeons don't get mad: I

love you guys.

Barbara: I understand, can you repeat the email to email to you.

Dr. Darrow: Yeah, it's not an email address, it's a website, every pay on the

website has a spot where you can email me. So it's

www.lastemcells.com, L-A-S-T-E-M-C-E-L-L-S dot com.

Barbara: Got it.

Dr. Darrow: And that's a website www.lastemcells.com there's videos on there of

> me injecting all over the body. You can see if it's something you want to do. And there's just tons of information there, that I wish doctors would read, because I don't get it. I don't get why doctors don't continue to learn. I don't get it. It makes me very angry every day, every single day when I hear these things that doctors tell their patients, it makes me mad, because they refuse to learn and get -get with it. There is new way of healing. Get with it, docs. I love

you guys; you do great but get with it.

Barbara: In the event, that I do surgery, are you familiar with the reverse

shoulder apparatus?

Dr. Darrow: I am. I am to some extent, but I'm not going to get into it, because I

don't think you're going to go there. Why should I talk about

something that I don't think is going to happen.

Barbara: Okay. Okay. Sounds good. I'm going to look this up and email you

from the website.

Dr. Darrow: And you know, you can just call the office at 800-300-9300. And

listen if you have any trouble getting in -- I want to get you in right away, you know, I'd like to see you as soon as you can make it, because you need to get more information to decide whether you

want a surgery or not. I don't want to keep you hanging.

Barbara: I would like to come in on Monday, if I could.

Dr. Darrow: Well, I will make that happen, if you get a hold of us. I'm booked.

Barbara: Shall I call the office.

Dr. Darrow: You can do that. And if they tell you that there's no room, that it's

filled up, you just tell I said to sneak you in the afternoon.

Barbara: Afternoon, sounds perfect.

Dr. Darrow: Yeah. I'll make it happen for you.

Barbara: Will do. Thank you very much.

Dr. Darrow: Listen it won't take me more than a minute to find out if you need a

surgery or not.

Barbara: All right.

Dr. Darrow: The exam is simple, it's just touching the shoulder all over the place,

pressing on it, and then moving you around, and then checking

your other shoulder and comparing it, it's very easy.

Barbara: Okay. I shall be there. Would you like to on the air, give me your

office address.

Dr. Darrow: No, you can just -- don't worry about that, we'll figure that out after

you decide if you want to come in. Because we another caller

waiting, and the show is coming to the end.

Barbara: Okay. All right. Thank you.

Dr. Darrow: We are across from UCLA on Wilshire Boulevard. All right,

Barbara, God bless you, and I'm glad you called in, I hope we can

save from a needless surgery. I hope you don't need it.

So we're going to go to Darlene. Darlene, Dr. Marc Darrow how are you today.

Darlene:

Hi, Dr. Darrow. So my question is, I have carpal tunnel really bad, and I have it in both hands, but on the left side, it's worse and sometimes my fingers just lock so that I have to [inaudible] and open it up. Does your treatment help carpal tunnel?

Dr. Darrow:

Yes it does, but it not that treatment. It's a different treatment, we use a hydro-dissection, I just did one two days ago, and I actually the woman late last night to see how she's doing. She said her symptoms are almost all gone.

If it is carpal tunnel though. Carpal tunnel, means the carpal bones and the tendons that are around the median nerve are impinging on that nerve which comes down from your neck and down the arm, and through that little part in the wrist called the carpal tunnel. And by over use people like postal workers, guitar players, people that overuse their wrist, that nerve can get inflamed, and it squeezed by the carpal tunnel.

So what we do is we put a needle in there with solution and it sort of prys all that stuff away from the nerve, so it can heal up again. So that's carpal tunnel. But you said that your fingers are locking, that's not carpal tunnel ends up being weakness in the fingers and the hand with paresthesias which are funny feelings down the fingers. If yours is locking, that's call trigger fingers, that's something different.

Darlene: Is there a possibility I have both, because I have the --

Dr. Darrow: Oh, yeah, yeah, yeah, very possibly you have both. You said you had

something, I didn't hear what it was you had something.

Darlene: Oh, I've had, you know the nerve test that they do with the needles,

and the test results came back that I did have the carpal tunnel on

both sides.

Dr. Darrow: Okay. Well, that's not -- the carpal tunnel doesn't cause locking of

fingers though. That's why you might have both.

Darlene: Okay, would your treatment be able to help me for both.

Dr. Darrow: I have to examine you and see what's going on. It's possible.

Darlene: And you say that you do take some of the insurances?

Dr. Darrow: You know, we talk about insurance which is so complex, I can't even

get into it. I don't even understand it all. There is some that we

take.

Darlene: But I can call the office.

Dr. Darrow: What's that?

Darlene: I would be able to call the office and speak to someone about --

Dr. Darrow: Yeah, yeah, the number at the office is 800-300-9300, you can call

there, you can call right now if you want, there's always people

around. And if the phones are busy --

Darlene: I think I remember you from Rancho Los Amigos Medical Center,

because I'm employee there also, and I think --

Dr. Darrow: Yeah, yeah. Yeah. I was the guy that was running around on roller

skates from patient to patient. It was busy over there, my God. Which department do you work in there -- or did you work in.

Darlene: Urology Clinic.

Dr. Darrow: Urology?

Darlene: Okay. Yeah, they needed that --

Darlene: But I had worked with Dr. Cambridge before.

Dr. Darrow: Okay. Wonderful. It's a great, great institution, Rancho Los

Amigos is one of the premier rehab hospitals in the world. It was a great gift for me to be able to work there for a couple years. All right, Darlene, God bless you and there's good help ahead for carpal

tunnel.

Darlene: I can call today or will I have to wait until Monday to call to speak to

someone.

Dr. Darrow: No, you can call right now. All right, Nita Vallens thank you so

much.

Nita: Thank you, Darlene.

Dr. Darrow: I'm going to give out the phone number one time for people that

want to call 866-870-5752. You can call the studio, and then if you want to call the office, it's 800-300-9300, to catch me do an email through the website, it's www.lastemcells.com thank you, Alex,

thank you, Suzette. And God bless you everybody.

Nita: See you next time.

Dr. Darrow: Yeah, thank you.