

Living Pain Free 11/07/20 10:00 a.m.

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, Dr. Nita Vallens.

Nita: Hello, Dr. Darrow.

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

Nita: Great. And yourself?

Dr. Darrow: Living it up.

Nita: Yay. Well, guess what, everybody listening can be living it up, because if you're in pain, you've hit the right dial. This is Living Pain Free with Dr. Marc Darrow. And we talk about musculoskeletal pain. What does that mean? Muscle pain, joint pain, tendon pain, ligament pain, disk, back pain, neck or knee pain, hip pain, arthritis pain. And basically, we're talking about orthopedic pain, like if you have stiff joints, tendonitis, dull aches, even if you don't know the problem, if you are in pain, then give us a call right here in the studio at 866-870-5752. And when you phone today, not only do you get to speak with Dr. Darrow, you get his latest book for free, Stem Cell and Platelet Therapy is the title, subtitled Regenerate, Don't Operate.

And there's 264 scientific studies contained, and the foreword is written by Suzanne Somers. And there's even some research on hair growth, and some solutions in there, if that's your issue, just as an aside. And you can also find out much more about the treatment and Dr. Darrow by going to the website, www.lastemcells.com, that's www.lastemcells.com you can email Dr. Darrow off of every page on the site and watch him performing the treatments on videos.

So, a lot going on here today, Saturdays at 10:00 is when we're here, and again at 1:00 p.m. And the number to call us again, write this down, 866-870-5752. That's our number right here in the studio. And here's the thing. If you're not in pain, but your husband or your wife is in pain, your kid, your parent, your friend, your

neighbor, orthopedic pain is very common. So, give us a call and Dr. Darrow will hear you out, and see what's going on. What do you think?

Dr. Darrow: I love it. I love helping people heal. I've been doing this kind of work, since my residency at UCLA a long time ago. And something I just lucked into because of my own injuries. And I was basically, the first couple of my injuries, I was healed overnight. And I've been working on my own body, I know people think that's kind of crazy, but I inject myself. And it's pretty easy to do when you know where you're supposed to go.

What's that crackling noise? Is someone eating chips?

Nita: Oh gosh. I wish. Who's got the potato chips? Get in my studio right now. Oh my gosh, I don't hear a noise.

Dr. Darrow: I'm going to go to a cool question here.

Nita: Okay.

Dr. Darrow: It's AVN of the hip. AVN means avascular necrosis, that means bone death. And it happens commonly in the hip when people eat steroids. Steroids meaning Prednisone, a lot of times doctors give oral steroids to people when they're having back pain or neck pain, which is something I don't do. I don't like seeing people ending up with avascular necrosis of their hip. And that's what can happen. I've had it happen with two of my doctor friends already.

Which surprised me. I said, why did you take the steroids, when you knew this could have happened. And they said well, I was in so much pain. And there's better ways to get rid of pain than that. Regenerative medicine is the best way that I know of to get rid of musculoskeletal pain, and I've used it on both my knees, both my shoulders, my elbows, my right wrist and other people have been doing my neck and back. When I said doing, that was a long time ago. They've been pretty good lately.

But avascular necrosis is something that is - once it starts, I'm not saying you can fix it, but we can usually get rid of the pain in the joint, okay, because once the necrosis starts to occur, the cartilage often can wear down around that area. And we can grow back the cartilage using regenerative medicine, platelets, stem cells, things from your body, and help regrow or proliferate new tissue to grow and secure that joint again.

So, if you're one of those people that the doctor says you've got avascular necrosis in a joint, that may be true, but that doesn't

mean you need a joint replacement because of it. So, this person says I have AVN, and I've had one hip replacement, and a shoulder replacement. And now they want to do the other hip. I prefer to do stem cells. What are your thoughts?

Well, my thoughts are we work on avascular necrosis joints all the time, not a big issue, and there is hope with it. We don't guarantee anybody success. So, don't come in here thinking there is a magic wand that we're going to use on you. I'm always very, very honest with people. Some patients get mad at me, and they go why aren't you being my cheerleader? And I said because I have to tell the truth. Nothing works on everybody. This works on a lot of people, but I'm not promising results.

Stem cells are pretty amazing, and platelets are pretty amazing. So, I would certainly before I did surgery, I would do PRP, platelet-rich plasma or stem cells, which we can get from your own bone marrow. So, people seem to like that quite a bit.

So, yes, there's a lot that can be done. And you know you mentioned something in the beginning of the show, Nita, about how you can - you don't need to know what your diagnosis is, to come into the office to see what we can find out.

Nita:

Right.

Dr. Darrow:

But most of the people that come in have a phony diagnosis, or a false diagnosis, or a wrong diagnosis, because most doctors don't examine the patient with their hands. I know that sounds crazy, but most of the people that come into my office, who have had a failed surgery, when I ask did the doctor touch you? They go, no. Why would they touch me? They did an MRI. They did an x-ray. And they told me I need surgery. Well, I don't think that's the best way to practice medicine, because you can find out what's going on, meaning find out where the pain is being generated from by touching the area, and examining the person, moving the joint, or the tendon, or whatever it is, and touching it, and finding out where the pain is being generated from. That makes the most sense to me.

Looking at an MRI, or an x-ray is not accurate in most cases. So, I know a lot of you folks have had MRIs or x-rays and the doctor said you've got this or that, herniated disks, hip arthritis, blah, blah, blah, but then when those people come to the office, I find that is not really the problem.

So, don't get a surgery, until you know you need one. How do you find out? It's tough. You've got to go to a doctor who does regenerative medicine to find out, because most docs do not even

examine the body. They just slap up an image on the light board, and say you've got this or that, and go right to a surgery. And I'm against that.

So, I'd like to give out the phone number to the studio right now, and then I'll give out the phone number to my office, so grab your pen and pencil. I'd love to talk to you. The number to me right here, right now live is 866-870-5752, I'm going to repeat it, 866-870-5752. I'd love to hear from you and talk to you about your issues, or the issues - the pain that your parents have, your family, your friends, and we can talk about what's going on, and help you heal, teach other people how to heal. You can help teach your doctors how to heal.

When I was in training at UCLA, we didn't really think there was such a thing as healing. We thought there was medication and surgery. Now, we know that we can actually regrow the tissue in your body, and help you heal that way. If you want to call the office and find out more details about your situation, the number to my office, and there are people waiting by the phone is 800-300-9300, I'd love to have you call to the office if you'd like to, 800-300-9300.

And Nita, do you have anything you want to add before I take more questions here?

Nita:

I do, because when you call today, you get Dr. Darrow's latest book, Stem Cell and Platelet Therapy, subtitled Regenerate, Don't Operate. And I have to say that after you published this book, and you sent me my copies, I was thrilled, because it's got a lot of research, and we know this is a new paradigm for a lot of people who think it's just drugs and surgery still.

And regenerative medicine is the least invasive of those options. So, that's that I'd do.

Dr. Darrow:

That's right. We always want to do conservative medicine, meaning surgery is the most invasive, and people don't always come out of it in a way that they expected. So, it can lead to a lot of problems. I've seen a couple people die on the table from anesthesia, I think it was anesthesia, and it can get kind of scary. I know you folks don't want to do surgery, but you think there's no other answer, and you've seen an orthopedic surgeon, or a neurosurgeon, something like that who says the only thing they can do is operate. But it's time to wake up. There is a new paradigm in medicine, as Nita mentioned, I've been doing this work for 20 plus years and keeping people from going under the knife. And let's hope that you will be one of those if you're having pain, and you don't need to think about doing surgery.

Nita: And let me give the phone number one more time, 866-870-5752, that's 866-870-5752, and think of all the people you've healed in that 20 plus years that you've been doing this work. Now, audience, I ask you, wouldn't you like to be one of those people. Give us a call, 866-870-5752.

Dr. Darrow: You know a lot of people who are new listeners don't know that the way I got to regenerative medicine was through a surgery on my shoulder, when I was in medical school, that really botched it up. I'm not blaming the surgeon, because I loved him. He was my boss. And he was great professor, a great teacher.

But my shoulder came out bad, and it was much, much worse after the surgery, than before the surgery. And it wasn't until a few years later that I learned about regenerative medicine with an injection to my wrist at a convention of doctors. And I awakened about 24 hours later, and my wrist was about 50 percent better. I then did my shoulder, and it healed 100 percent overnight, after I injected it with regenerative medicine, back in the day, I say.

Nita: That's amazing. Overnight is amazing. Speaking of shoulders, we have Kevin in LA with a right shoulder problem.

Dr. Darrow: Hey Kevin, Dr. Marc Darrow. How are you today?

Kevin: Thank you, doctor. I have a question. I did an MRI, the MRI says you know right - one of the muscles, you know caused you know my arm goes up, this tear about two-thirds, 70 percent.

Dr. Darrow: Yes.

Kevin: And I was wondering if stem cell will heal it, or if I do the surgery, do I need a surgery by the way, and when I'm doing the surgery, if I do the surgery, the stem cells during the surgery, would it help to act combined with the surgery?

Dr. Darrow: Great questions. So, the answer is number one. Why would you do a surgery if the surgeons is going to put stem cells in at the same time? Okay, that makes no sense to me. Why not just do the conservative route, which is get it, walking into the office, getting an injection of stem cells, and then walking out. Why go through a surgery which is not a conservative procedure, it's a very invasive procedure, and a lot of people like myself who had that came out bad.

So, that's number one. Number two, these tears can often heal by using either platelets or stem cells, okay. So, I would have to examine your shoulder, and the number to our office, if you want to

give it a call to get more information is 800-300-9300, you can call them right now. And I think there's good hope for your shoulder, hearing what you're saying about it. And I certainly wouldn't do a surgery.

Kevin: Yeah, even 70 percent or 75 percent tear, it still will have a chance you know with stem cells will regenerate it, and will heal it?

Dr. Darrow: Yes, there is a chance. But I can't tell you over the radio what's going on with you, because I need to examine you with my hands, and move you around, see if you're a good candidate.

Kevin: Okay. So, doctor I will get your phone number and I will contact you. Thank you very much for your time. I appreciate it.

Dr. Darrow: Yeah, I mean we have people - new patients that come in every day, who are ready for a surgery, and they don't get that surgery, and they heal up. Not everybody, but most, okay. So, I need to examine the patient, and see what I think is going on. And then have a discussion with them about what their goals are. Some people want surgery, and God bless them, they ought to do it. People should get what they want. I don't like it. I cannot remember the last time that I advised a patient to get surgery, it's that long ago.

Nita: That's a long time.

Dr. Darrow: Steve, Dr. Marc Darrow, you've got a shoulder also. Let's hear about it. How long has it bothered you?

Steve: Well, it's fairly recent. I have - first I want to tell you; I've been listening to you for a long time.

Dr. Darrow: Thank you.

Steve: I've referred three people to you, two family members and a friend. And they've all been helped.

Dr. Darrow: Wow. That's good news.

Steve: And I also called you once. I had a problem with my foot or my ankle, ankle I should say. And I told you the story and how I hurt it, and you said, well, you know, Steve, I think it ought to get better if you just rest it for another two weeks, and it did. So, that was...

Dr. Darrow: Well, that's the best healing. Time is the best tincture.

Steve: Well, I'm calling about my shoulder, I would call it a clicking.

Dr. Darrow: Yes.

Steve: It seems like the bone is kind of rubbing in a strange little way, but it only happens when I'm laying down, and like at a certain angle, doing maybe a crossword puzzle or something, but it's very irritating, but when I sit up, it stops and I'm wondering if it might be related to any drugs I could be taking. You know, the other thing I'm going to complement you about. I was put on statin drugs because my cholesterol high.

Dr. Darrow: Yes.

Steve: And I developed this real ridiculous pain in my right arm, and it developed into my right shoulder, and my left shoulder, different than what I'm talking about now, but I heard you say something about how statins can cause muscle pain, and so I made an appointment to see my doctor, and then I decided not to - to stop taking the statins before I went in to see him, and by the time I got in there, the pain had all gone away.

Dr. Darrow: Excellent.

Steve: So, I don't take statins anymore, but I am taking another medication, and I don't know if a medication might be the cause of it, or maybe I should try some exercises, or do you think I should come in and have you look at the shoulder?

Dr. Darrow: What is the medicine you're taking?

Steve: It's called Zetia, Z-E-T-I-A. But I'm also taking - what do you call that - red yeast rice, yeah, that's some kind of a natural supplement but my cholesterol has gone dramatically from those two things.

Dr. Darrow: I hear you. So, you're not going to like what I have to say. Red yeast rice is the mechanism of action as Lipitor or the statin drugs. And it's not monitored because you don't really know the correct dosing. And it does lower cholesterol, but I'm going to bet you, you don't need to have your cholesterol lowered to begin with, and red yeast rice can cause rhabdomyolysis, muscle pain, just like the statin drugs.

Steve: Oh, well I appreciate you telling me that, because I frankly, I stopped - I mean I cut my red yeast rice thing in half, but only a few days ago, so I haven't seen the improvement in my shoulder, but do you think that might be causing this clicking in my shoulder?

Dr. Darrow: I don't know the answer to that, to be honest with you, because it sounds like it's not the bones - you know, it doesn't sound like arthritis. It sounds like you may have a scapular impingement. The scapula is the bone in the back, the wings. And a lot of times people

will get that little clicking when they're lying down. So, that's something I'd have to examine you and figure out what is going on. I don't have the answer over the radio. I'm not psychic.

Steve: Yeah, okay, well then maybe what I'll do. I think I'll stop taking the red yeast rice for a couple weeks, and if the clicking doesn't go away, then I'll come in and see you. Does that make sense?

Dr. Darrow: That would make sense, yeah. I mean as long as your doctor knows what you're doing. I'm not your doctor. I'm your buddy.

Steve: Yeah, right. Yeah, right. Well, you know I like my doctor very much. You know he's a terrific guy. I dislike the fact he's my age, and he's talking about retiring, I'm going to have to find another doctor. But you know when I told him about how the statin has caused me the muscle pain. He said, oh yeah, that happened to me 25 years ago. I don't take them either.

Dr. Darrow: Well, you know the truth of the whole matter, underlying it is we found out that cholesterol is really not the cause of heart disease anymore.

Steve: Oh, I hadn't heard that story before. Okay.

Dr. Darrow: Yeah, look it up. Look it up, unless it's super, super high. Most people that are on statin drugs don't need them, and actually it blocks the production of your sex hormones, which you don't want to do.

Did you get that echo, Nita?

Nita: Yeah, I don't know what that was.

Dr. Darrow: That was wild.

Nita: That could have been Steve. I'll let Steve go, and you can talk to him off the air. Thank you for your call, Steve. So, yeah, I think it was his - go ahead.

Dr. Darrow: Anyway, my point is this, most - almost all people on statin drugs shouldn't be on them, according to me. I'm not saying what the big is, is, but according to me, I would never put anybody on it. And the bottom line on it is, people have the same death rate, whether they're on that medicine or not. Whether their cholesterol is high or low. Less heart attacks, but the same death rate. So, what's the point? No reason to take it.

Nita: Interesting, absolutely. Okay, well, give us a call, 866-870-5752, that's 866-870-5752, you get Dr. Darrow's latest book for free, Stem Cell and Platelet Therapy, Regenerate, Don't Operate. Remember we're here Saturdays at 10:00 and again at 1:00 p.m.

Do you want to talk about what's going on in the office, besides this? Okay.

Dr. Darrow: Yeah. The Vampire Facelift, that's something you'll never forget. It's a non-surgical facelift, where we're just - it's very similar to the work that I do on the musculoskeletal system, but it's on the face. And it actually regrows the collagen in the face and makes people look younger, basically overnight.

So, that's a real simple treatment. We just draw your blood, spin it, and then inject it into the face, numb up the face, and inject it. And it could be done with your stem cells, also.

And what else are we doing, Nita? What am I forgetting? Hair.

Nita: Hair.

Dr. Darrow: We do a lot of injections into the scalp to regrow hair. And people go is that real? It's actually been studied quite a bit, and there's a chapter in the back of my book, I'm looking at the book now, all about hair regrowth, and it's something that you may want to take a look at. It's not going to help someone like Dr. Phil, but it - and we actually do it on men and women, a lot of women actually have hormone imbalance, or low thyroid or something like that, that can cause their hair loss.

So, about 50/50 on the people that I do it on the people that I do it on, in terms of gender. So, yeah that's a great treatment also.

Nita: Oh, I hear music.

Dr. Darrow: We're going to the break.

Nita: We are.

Dr. Darrow: Hang with us, folks. We'll be back in a couple of minutes.

Nita: We will. You're listening to Living Pain Free with Dr. Marc Darrow. I'm your host, Nita Vallens. Grab a pen or a pencil, write down this important information coming your way, and we'll be right back. S

[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 we're taking your calls right here in the studio to speak with Dr. Darrow at 866-870-5752, that's 866-870-5752. When you call the program today, you get Dr. Darrow's latest book for free. It's called Stem Cell and Platelet Therapy, Regenerate, Don't Operate. And it explains regenerative medicine to you, if this is new paradigm for you. Also, you can go to Dr. Darrow's website at www.lastemcells.com that's www.lastemcells.com. You can email him off of every page on the site and watch him performing the treatments on videos.

And what else do we have for you here? Ah, the office, if you've been listening for a while and you want to call the office and just make you appointment, people answer the phones 24/7 at 800-300-9300, that's 800-300-9300. And remember our topic is orthopedic pain, muscle pain, joint pain, knee pain, stiff joints, dull aches. We had somebody with a cracking noise in his shoulder earlier. So, a million different things can be going on, right Dr. Darrow?

Dr. Darrow: Yeah, let me get a question in here, Nita, if you don't mind.

Nita: Sure.

Dr. Darrow: Let's see, we haven't talked about knees today. So, here's one on knees that just came in. My issue is my knees. I have some arthritis, but I cannot do a squat at the gym. Good. You shouldn't be doing squats. People hate me when I tell them that. Too painful. I am 62, active gym, cross-fit type three times a week. Only survey was a meniscus tear 14 years ago. Can you help me? Probably.

So, let me talk about squats. Squats are fine, lunges are fine, but don't do a lot of them. I get people that come in of this nature, whose knees are absolutely destroyed by these types of exercises. So, you've got to be careful. The best way to do a squat is stand up against a wall and keep your feet in front of your knee, and have your femur, that's your thigh bone, no more than about 45 degrees down.

Okay, so you don't want to get a lot of weight on your back, and squat down all the way. It's just too much pressure. But I have been able to help these people using platelets and stem cells. So, that is the good news. The bad news is once damage is done, no matter what we do, it can still be a weak spot. And if you want to continue doing squats and your knees are already trashed, you're going to see me very frequently. We're going to be best friends. And that's fine with me, but you have to consider what you're doing to yourself.

Most of us athletes don't want to quit. It's very difficult to quit a sport, or to quit a certain type of exercise. But we have to consider long-term what the issue is. The body is in a sense a mechanical device. It is biological and we can regrow tissue. But you can also wear out the tendons and the ligaments, and the muscles where they attach, the enthesis, where they attach to bone, and the joints, like this person with their knees.

So, can I help? Yes, I can help. But you may have to cut down some of the intense activity. When the person says they're a cross-fit type person, that means that they're willing to go - go the long mile, you know the hard way to build up muscle and stay in shape. And there are better ways. We're finding out that less is more with exercise these days.

And I've got - you know, I've got to really admit it. I'm as bad as everybody else. I keep going when things hurt. I fight with myself not to exercise, because I want to do it all day, all night long. I just love it so much. I have been able to use stem cells and platelets on my knees, thank goodness, they healed me up. But I wasn't doing heavy squats. I have one patient, who is a 28-year-old man, who came in with I'm going to call them tree trunk giant muscular legs, and as soon as he walked in, I should say he limped in with a swollen knee, I said you do heavy squats man. And he goes yeah, I do. I love feeling like this. And I said, well you can keep doing them if you want, if you want to have keep visiting me and getting treatments, but I don't think you're going to want to do that. You're going to have back off and go to lighter weights, and less active squatting.

So, you've got to be careful, you know the body is something that can wear out, regenerative medicine can regrow the tissue, but why have to do that, if you can help yourself. Always do the things most conservative, and in a case of someone who is an over-achiever in the gym, the thing that you can do is back off, and lot of people come in first, and what they say is, I'm not going to stop what I'm doing. Can you help me? I go yeah. And you're going to be visiting me quite a bit. And they go, I don't mind. I'll do it.

We have someone who has become a very good friend of mine, a patient named George Chung. George, if you're listening, which I know you do, God bless you. He is a - one of the top skiers and bikers that I know. And he doesn't quit. He just keeps going, but he visits me every few months. When he first came in with very arthritic knees, he was in miserable pain. We got his pain better, but he kept coming back. And I said, you don't need to come back, your pain is gone.

And he said, well, I'm going to be coming back, because I know that what I do causes arthritis and I'm not going to quit. So, we see him from time to time, and we give him what I'm going to call prophylactic injections at this point. Because he's still not having pain, but he's still working out like a monster. And that's what he wants to do, and he's allowed to.

So, George and I have become very, very good friends. So, anything from you, Nita, or should I go to another...

Nita: Well, yeah, I love that story, because it says like okay, like we're looking for quality of life here, that's why we want people out of pain, right. But quality of life might be that you continue doing your sport, even though you risk having pain or whatever. So, a lot of choices here.

Dr. Darrow: And we do see people you know that come in with severe meniscal tears, ACL ruptures, MCL, LCL issues. So, yeah, we can get them better, but then the question is, how often do they want to come back and visit? How much do they need to keep doing their sport or their activity? And a lot of people do things that are like a sport. It could be gardening. And people say well, I don't do any sports, but I garden. And they're such maniacs in their garden, that they can cause arthritis. I know. It sounds crazy.

Nita: I never would have thought about it.

Dr. Darrow: We all have things we love.

Nita: Yeah, oh yeah.

Dr. Darrow: A lot of gardeners come in with knee, and back and neck pain, wrist pain, finger pain, you name it. We work all over the body, and we can grow back tissue anywhere on the body, where there's pain.

Nita: And our number if you are in pain, and you want to talk to Dr. Darrow right here in the studio, give us a call, 866-870-5752, that's 866-870-5752. Check out the website at www.lastemcells.com that's www.lastemcells.com. You can see Dr. Darrow performing

the treatments on videos, and you can email him off of every page on the site. There you go.

Dr. Darrow: I guess, let me take another question.

Nita: Oh, the free book! You get a free book today, Stem Cell and Platelet Therapy, Dr. Darrow's latest. Now, you can take your question, thank you.

Dr. Darrow: Yeah. You get a free book, if you call us up.

Nita: Yeah.

Dr. Darrow: 866-870-5752, we love talking to you. This question is about - it's titled back pain. It's very short and simple. The person says I've been having chronic back pain for about five years, I'm sorry to hear that. I'm hoping you can tell me more about stem cell therapy, yes, of course.

So, typically people who come in with back pain, have had an MRI, and it has shown things like facet arthropathy. That means arthritis in the facet joints, herniated disks. I've got herniated disks in my neck and my back. A lot of people have them, but it's not the cause of any pain. And they don't get that, because once they see a doctor who does surgery, the doctor typically says you've got pain, yes. You've got a herniated disk, or you've got degenerative disks, and we need to do an operation to replace the disk and cut out that bad disk. And that's not generally the case. It's usually the ligaments that are sprained.

I had an old friend come into the office yesterday as an example, and he had a flare of low back pain, which he gets once in a while. He's very, very active. He does kettle bell exercises; I don't know if anyone has ever seen that.

Nita: No.

Dr. Darrow: You swing a kettle bell up in the air, and then you bend down, and you bend up, and I touched his back, and he said I've got terrible disks in my back, and I can feel my disks hurting. And I started laughing. I said, Michael, this has nothing to do with your disks. I said and you would never know what the cause was anyway. So, it was the ligaments. And I injected them and in a few seconds he said I think I'm feeling better.

So, be careful, don't jump to a surgery, because you think that an MRI, or a surgeon tells you that an MRI shows something. My friend, Michael, has a ligament sprain. Those are easy to fix. They

parade around and they hide as herniated disks, arthritis and other things, when it really isn't even the issue. So, should we go to Salvador with his fingers?

Nita: Let's.

Dr. Darrow: Salvador, Dr. Marc Darrow. How are you today?

Salvador: I'm fine, thank you. We got a little rain this morning. It's looking pretty nice now, with the sun coming out.

Dr. Darrow: Good. So, what's up with your fingers? How long have they hurt you for?

Salvador: Well, I'm 33 years old, and I'm like - I was kind of negating the pain. And I would say like for the last maybe one or two years, I just kind of sort of like, okay, I'm stop typing now, and hoping that it will go away, but - so, in my job I'm required to type a lot. So, I would say it has been for two years, and it's just very - this pain, the joint pain, and then - yeah, I'm pretty - very uncomfortable, but I guess I just always negate it, and it's not until I heard your show, that I'm interested in just making a call to see what I learned.

Dr. Darrow: Good. Have you seen a doctor about your fingers yet?

Salvador: I have not.

Dr. Darrow: You may want to get an x-ray, which we can order for you if you like, and see if you have any arthritis that's brewing from all your activity. It may not be. It may just be the overuse, because you type for a living, and when a lot of people come in who have something like that, you know they have wrist pain, elbow pain, forearm pain, finger pain from overuse. I say you have to slow down what you're doing. They say I can't. I have to continue for my job. But that typically is not the truth.

The Worker's Comp in California at least allow people to be put on a different job, if they're having pain from what they're doing. So, you should talk to your boss, and see if you can do something else for the company. Okay. That's the easiest way to see if your pain can go away.

Salvador: Yes.

Dr. Darrow: If you can stop doing it for a while, maybe the pain will just disappear, and you're going to be a happy man. If can't stop, or you do stop and the pain continues, come see me. Let's see if we can use

some PRP, or stem cells and thicken up the tissue around the joint, and make you feel better.

Salvador: Got it. So, step one, I'll go see my doctor and order an x-ray. And then step two depending on that result I may either talk to my boss or come to your office and see how you can support me.

Dr. Darrow: Sounds great, Salvador, God bless you man. Good luck.

Salvador: Thank you my man, appreciate you.

Nita: Thank you Salvador, appreciate your call. Our number here in the studio...

Dr. Darrow: 33 years old, and it still happen.

Nita: I know.

Dr. Darrow: That's too bad. Okay, you were going to say the number to call us is 866-870-5752, please call us, let's talk to you. Let's figure out what's bothering you or your family, or your friends, and see if we can help, see if we can use regenerative medicine of platelets and/or stem cells and heal the area.

Nita: Great idea, 866-870-5752, we're here Saturdays at 10:00, again at 1:00 p.m., and when you call the program today on that number right here in the studio, 866-870-5752, you get Dr. Darrow's latest book, Stem Cell and Platelet Therapy, Regenerate, Don't Operate.

Dr. Darrow: Shall I take another call here?

Nita: Sure, another question? Absolutely.

Dr. Darrow: I love tripping you up, Nita. It's so much fun.

Nita: I know. I know, I love it too actually. We have to stay in the fun zone. If we want people to pain free.

Dr. Darrow: That's right, we've got to laugh.

Nita: We've got to laugh. We've got to laugh. And actually, while we wait for these two calls to cue up, if you want to take a quick question, so for it.

Dr. Darrow: Yeah. This one is on plantar fasciitis. And you can kick me off if I get boring, or if the other people are ready.

Nita: Okay. Stop right now, just kidding.

Dr. Darrow: So, here's a question on plantar fasciitis, and the person says if one PRP injection and for those of you that don't know what this is, that is platelet-rich plasma, it's using platelets from your blood, it's a simple procedure, we draw the blood, we spin it in a centrifuge. We throw away the red cells that hurt, and we use the platelets, and we inject them. So, if one PRP injection doesn't help for plantar fasciitis, when can I have the second one? You can have it the same day, if you wanted to.

Usually, we wait a couple of weeks, and there's a flare of inflammation after we do the injection. If someone is in a rush to heal, or they're from out of town, let's say someone flies in from Europe, we would probably inject the bottom surface of the foot, where that spring ligament attaches to the calcaneus, we'll probably do it like three times in one week.

The most I've ever done on myself was for a knee injury. I injected myself with stem cells four times in one week. I had 35 ccs of fluid in my knee, and that knee is doing pretty darn good today. So, I'm doing real good. I can run, I can play golf. And I wanted it fixed quick. So, I did four treatments in one week. Most people, we have them wait for a couple weeks and see what's going on, but it's up to the patient.

Let's go to Steven in Thousand Oaks, your wife has back and shoulder issues, tell me about it, Steven.

Steven: Hello.

Dr. Darrow: Yes, Steven, this is Dr. Marc Darrow. What's going on with your wife.

Steven: Hi Dr. Marc, how are you?

Dr. Darrow: Living it up.

Steven: Well, she fell at work and this has been going on for over a year. The doctors are looking at surgery right now, but we'd rather not go that way, if we could. But she fell and hurt her back, and then that started numbness up her arm, and now her shoulder is bad. And she just got a cortisone shot a couple days ago, and it's better now, but cortisone is just temporary. So, I was listening to you, and I'd love to have that book and read it, and I know she would read it also.

Dr. Darrow: Well, we'll send you a couple of them, then. Don't worry about it. So, a couple things right off the bat that you've said. You said that cortisone is temporary.

Steven: Right.

Dr. Darrow: And I want to let you know that cortisone is not temporary, because it causes permanent damage.

Steven: Oh, I didn't know that.

Dr. Darrow: What it does is thins out the tissue. So, we don't want to use that. Yes, it helps - yes, it helps get rid of some pain in most cases temporarily but it's not worth doing that. What you want to do is fix it. How do you fix it? You regenerate the tissue. You stimulate new tissue to grow using platelets or stem cells from the person's body. That's easy. It's very simple, you walk in, you get an injection, and you walk out. So, I think there's good hope with her shoulder, especially since the cortisone made it feel better, that lets me know that the solution of the steroid got to the pain generator. We can do the same thing with your wife's platelets or stem cells and actually heal it up.

I would never get surgery for that.

Steven: Yeah, it's not something we look forward to.

Dr. Darrow: The back pain, I'd have to touch the area and see if that's something we can fix.

Steven: Okay.

Dr. Darrow: If you decide that you want to bring her to the office, you can call there right now, it's 800-300-9300, my staff is on the phones all the time. If they're busy, and they can't pick up, you can just leave your name and number, they'll call you right back.

Steven: And what's your website?

Dr. Darrow: The website is www.lastemcells.com, www.lastemcells.com every page has a spot to email me. And that's where I'm getting a lot of these questions from is people that send those questions to me. And you'll see pictures, or I should say you will see pictures, but you'll see videos of me doing these injections. And you can see if it's something that you think your wife may like, or you can show her that also.

Steven: Yeah, I'll definitely show her.

Dr. Darrow: It's got a lot of research on it - yeah, and a lot of information, you can give it to your doctor and see if he approves. Most doctors don't approve, because they don't think this stuff is going to work. We get

questions all the time from people saying my doctor said it's not going to work. And well, that doctor doesn't do it, so how do they know.

Steven: Exactly, I agree.

Dr. Darrow: If the doctor did it, he wouldn't be doing surgery anymore.

Nita: There you go. Thank you for your call.

Steven: Awesome. I appreciate that very much, Dr. Marc. Thank you so much.

Dr. Darrow: God bless you Steven, and God bless your wife.

Nita: Thank you, Steven.

Steven: Thank you. You have a great day.

Nita: You as well.

Dr. Darrow: You too. Live it up, man.

Nita: Okay. Let's go to Leon in Fullerton.

Dr. Darrow: Hey Leon, Dr. Marc Darrow and you knee is going out. Tell me about it.

Leon: Hey, glad to talk to you doctor. My knee about three or four weeks ago kind of took a - I don't know what's going on, whenever I try to bend it you know like I'm stooping over to pick something up, or try to get down on the floor, it just about kills me. And it's like you know if I'm standing and I bend my (inaudible) it's just hurts like heck. It's not swelled up or anything.

Dr. Darrow: Well, it may not be swollen that you can tell, but it may be swollen on the inside. You may have what's called a...

Leon: Yeah, absolutely.

Dr. Darrow: You may have...

Leon: I went to my family doctor and they give me something it's in the ibuprofen family, it's a prescription and some glucosamine or whatever that stuff and that helps a little bit, but it's still, you know hurts, so I thought I would give you a call.

Dr. Darrow: Okay. Sorry, the show is over, go to the website, www.lastemcells.com email me from there, Leon, and we'll finish up the conversation personally. God bless you.

Nita: Thanks for your call. Thank you, Dr. Darrow. And thank you Alex, and Suzette and everyone behind the scenes. And listen to The Pet Show with our pal Warren Eckstein from 11:00 to 1:00 every Saturday. And we'll see you next time.