

Living Pain Free 11/26/22

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, how are you today? This gorgeous day.

Nita: I'm great. How are you?

Dr. Darrow: Living it up as always. You got to be living it up. If you're not living it up, what are you doing?

Nita: I don't know, maybe you're in chronic musculoskeletal pain. Oh, ho, ho, ho, what a topic that could be!

Dr. Darrow: You hit me with that. Let's talk about that. How do we heal people, Nita?

Nita: We heal people with regenerative medicine.

Dr. Darrow: Yes.

Nita: What does that mean? I'll let you say. You're the doctor.

Dr. Darrow: Yeah, PRP, platelet-rich-plasma injections. We take your blood and spin it. Or we can get your stem cells and inject those, and it's an amazing, amazing procedure, that I've been doing for over 25 years. It's hard to believe I've done anything that long. It gets better and better.

I learn new things, almost every single day. It's amazing. A lot of this work has been intuitive for me. Back in the days when I started there were really no classes or anything to be trained on this. So I was the guinea pig. And as everybody knows who listens to the show, Nita, you certainly know. You had this done on your neck.

Nita: Yes, twice.

Dr. Darrow: Twice, at different times. And we healed you up. And I've worked on my -- let's see the first thing was my right wrist, then my right shoulder, then my knees, what else have I done. I've done my elbows, my broken ribs on my back. I've used this every time I've been injured, and being a little bit, what do they call people like me, Nita, in psychological terms that are hyperactive. ADD?

Nita: Well, hyper-aroused, well it could be you know a word.

Dr. Darrow: I'm active, and I do sports pretty hard.

Nita: Well, you're high energy, that's all, I mean it's not anything pathological.

Dr. Darrow: I hope not. There's no medicine for me.

Nita: It's just you.

Dr. Darrow: It's just me exactly. But I've been very fortunate, because the work I do is something I've been able to do on myself, and I'm very fortunate, because I don't know what I would have done sports wise, had I not known about this type of work. I was introduced to it during my residency at UCLA, way, way back. And it's been working on me ever since. So I don't like getting injured, but I do that I heal very quickly. Every single time I've used this on my body, I have healed. Sometimes it's been overnight. Sometimes it's taken several treatments. I don't know why that is. It's always the question that people ask me. How soon, doc will I heal? How many treatments? I don't know.

I have some individuals that come in with an MRI or an x-ray that shows nothing, and I think it's going to be easy fix them, and it can take a while. And then vice versa, most of the people that come in who have been to an orthopedic surgeon, who are ready for surgery, we've healed without surgery. And their MRIs and their x-rays are abominable, and it looks terrible, but I've learned over the years not to really trust those images.

So it's always a learning curve in medicine for all of us. We keep -- all of us docs, and everybody, nurses, you PTs, physician assistance, nurse practitioners, acupuncturists, I don't care what type of work you do in medicine, it's all good. I'm open-minded, and I think we all keep learning. We all try new things all the time and see how they go.

Nita, would you mind me asking a question, until we get callers? Actually, I'm giving out the cell -- not the cell number, I'm going to give out the studio number.

Nita: Okay.

Dr. Darrow: So we can get some callers in, that's a little fresher and more fun with the repartee that we get with people that call in.

Nita: Yes.

Dr. Darrow: When you call about anything that's happened to you or is happening to you, or your parents or friends, and you can use a fake name if you'd like, and not be shy. Or you know what, you can go to my website too, and that's www.lastemcells.com that's www.lastemcells.com there's a spot on every page of my website, which is humongous to email me. And I answer emails all day, all night long.

But in the meantime, if you want to call now, and I hope you do, we have fun with our callers, the phone number to the studio is 866-870-5752, 866-870-5752. I'm wondering, I played with a new guy yesterday, well a couple people I played with before, and they brought along a guy named Larry. I don't know if Larry's listening, he said he was going to call in. And he said he has a memory where he remembers everything, let's see if he remembers the phone number I told him. We'll see.

I said how do you remember everything. He said phone numbers, I do it backwards.

Nita: Oh, that's hilarious.

Dr. Darrow: Yeah, everybody's got their way. I do see a call coming in --

Nita: I just want to make sure people realize that when they call the show today, they get your latest book for free.

Dr. Darrow: Yes, it's Stem Cell and Platelet Therapy, Regenerate Don't Operate, it's a couple hundred pages of studies. There's about 259 studies, which show why, how and the scientific basis of regenerative medicine of platelets and stem cells, and Prolotherapy. Actually, also as I'm looking at it now, it has a chapter on PRP and hair growth, and the Vampire Facelift, which is injecting the face to stimulate new collagen growth, and make people look younger again. And the hair can grow back on top of the head also.

Oh, here's Steve. Let's go to Steve. Thank you for calling in, Steve. This is Dr. Marc Darrow, you have left-knee issues -- oh, you're a former patient of mine. I hope that's good news.

Steve: I am. I'm a very happy former patient. A couple years ago, you did work on my shoulder, I had tears in the labrum, bicep and rotator, and I had three treatments of stem cells and PRP. And then I ended up going ahead and having the orthopedic surgery, because that was it had gone about as far as it could go with the treatments.

And my surgeon was thrilled with the fact that even though he told me it would be fixed in nine months, before I'd be playing golf again, I was out in three, and everything was going great.

Dr. Darrow: Well, why don't he meet me on the course later today and show me your stuff.

Steve: I will, except my knee is so messed up, I'm having a hard time turning. I know you play at Mountain Gate. I play at Braemar. So we're neighbors.

Dr. Darrow: Yeah, yeah. Well, I'll take you to Mountain Gate. You take me to Braemar.

Steve: Fine. Sounds good to me. Anyway, so I'm just turning 70, and like you, I'm very active. I play golf three times a week.

Dr. Darrow: Wow.

Steve: And I like to be competitive. About six months ago, my left knee started hurting, and I couldn't actually bend down to sight a putt. And I knew something was going on, but I just tried treating with the typical anti-inflammatories, Meloxicam, Advil, and such.

Dr. Darrow: Sure.

Steve: And it's not gotten any better. I went to my doctor, and got an MRI, and he came back with moderate arthritis, which he said didn't surprise him in somebody my age.

Dr. Darrow: Sure.

Steve: Fluid, it was called --

Dr. Darrow: An effusion, yeah.

Steve: Small effusion, fluid with a Baker's cyst. A grade one MCL sprain without a tear, peri edematous edema (phonetic).

Dr. Darrow: Okay. What's that first word peri what.

Steve: Peri edematous.

Dr. Darrow: Oh, edematous, yeah, yeah, okay.

Steve: Whatever. It sounds good when you say it.

Dr. Darrow: It just means it's not fluid, that part is just the tissue is swollen, yeah, no big deal.

Steve: So anyway, my doctor says you know there's no surgery to be done for this, you know, there is a mild tear somewhere, but he said it was not enough to be causing the issues I'm having. And they go right to, let's just start injecting you with cortisone.

Dr. Darrow: Okay.

Steve: And I'm a little reluctant with cortisone, because I understand you're not supposed to do it that often. And he's talking about, well you know, we'll try it, and in six months, if it works, great. And we may have to do it again. And who knows maybe we'll do it every three months after that. And I'm thinking to myself this sound -- this doesn't sound right to me.

Dr. Darrow: I would go to your computer right now and all of you other people listening also, and just Google cortisone and then cartilage, those two words, and you'll never get a cortisone shot.

Steve: I know. That's why I'm calling --

Dr. Darrow: Yeah, it destroys -- the steroid destroys the cartilage.

Steve: Yeah.

Dr. Darrow: You get away with doing it once or twice, but that's getting away with it. It's not really good for it, and it's not at all good for it, to be honest with you. And that can cause meniscal tears and all kinds of other things. So I wouldn't do it. And the way to do it in my book, as you know, is to inject it with something that's going to grow the tissue back and regenerate it.

The MCL sprain is absolutely nothing. That's something that people get all the time. That's in the middle or the medial part of the knee is the medial collateral ligament.

Steve: Okay.

Dr. Darrow: So if that's where -- is that where the pain is in the middle part of the knee?

Steve: Actually the pain is at the back of the knee on the left side.

Dr. Darrow: Okay, so that could be --

Steve: That's from the rotation from the golf swing.

Dr. Darrow: It could be for sure. And it also could be, it depends how big that Baker's cyst is. When you come in, I will look immediately with the ultrasound to look inside and see how big that cyst is. Some of them are so small that there's nothing to do about them. And some are so big, yeah, it'd be wonderful to just take them out. We do it under ultrasound guidance, so we stay away from the popliteal artery and nerve and all of that.

Don't ever get a shot in your knee without ultrasound guidance. Because it can be very dangerous.

Steve: You know, I'm (inaudible) about that as well, I know when you were doing the treatments on me, you definitely had the ultrasound, and you were --

Dr. Darrow: Well, you want to know where the needle is going, not guessing where it's going.

Steve: Yeah, especially if they're going to shoot me with cortisone --

Dr. Darrow: Well, it doesn't matter. You just don't want a needle going in the wrong place.

Steve: Yeah.

Dr. Darrow: But you're right. Yes, you want it to go in the right place. And it's so interesting, because many years ago, before we had ultrasound guidance, we were wondering why certain areas of the body didn't get better with treatment, one of them being the hip. The hip joint is really teeny. The shoulder joint is real teeny. The knee joint, there's ways of getting into it that are a little easier, but even so, it's been found that at least one-third of the shots into the knee that are done without guidance, we call that blind injections do not even get into the joint.

So once we had ultrasound, all of a sudden people are healing much better. And we're like whoa, well the reason was we weren't doing it right. So ultrasound's been amazing, and I love doing it. The nice thing also is you can watch on the screen and see what's happening. You can watch that needle going in, and taking out that effusion, you'll see the fluid just go away.

And if there's a Baker's cyst, you'll see that disappear also.

Steve: Will this -- will this help, I mean when we did stem cells on my shoulder, the inflammation came down quite a bit which I think was part of why I was having the impingements I was. Will that work the same way on the knee?

Dr. Darrow: It should. I mean there's no promises in medicine. Everyone says, tell me what's going to happen, I want a guarantee, and I go sign this document that says there's no guarantees, please. There's no guarantees with anything in medicine. I've seen people take a pill and die.

Steve: Yeah.

Dr. Darrow: You know, surgery, I've seen people die, get infected, you name it. So we never know what's going to happen, we just have a lot of experience and go on our experiences, doctors to tell patients what we hope is going to happen, but there is no guarantees, but yes, it should -- it should heal your knee up. Your knee is not that bad, anyway. It sounds like you can bend it and get around. And are you still playing golf, but it hurts?

Steve: Yes.

Dr. Darrow: Okay. So your knee is probably fine, okay.

Steve: Okay. Yeah, I mean I'm finding that I'm not about rotate as much as usual, I think on my follow through, I'm a little afraid of --

Dr. Darrow: Tweaking it.

Steve: Torquing it too much.

Dr. Darrow: Yep, yep.

Steve: So I tend to back off a little bit, which is not my normal style. Should the Baker cyst be drained?

Dr. Darrow: It depends how big it is. If it's big, I'd drain it at the same time that I injected the front of the knee and aspirated the front of the knee.

Steve: And would this be stem cells or the PRP?

Dr. Darrow: Well, we'll take a look at you and see how bad it is, or how good it is, I should say.

Steve: Yeah, okay. All right. Well, good to know.

Dr. Darrow: God bless you, Steve, I appreciate your call. We're going to go to Larry, who I did play golf with yesterday.

Larry, Dr. Marc Darrow, how are you today?

Larry: I'm doing okay. I'm actually at the range right now.

Dr. Darrow: I'm jealous. You don't give up, do you? So I just want to give Larry a pitch. Larry, is the originator of the 61 Club, which is a nonprofit organization that helps disadvantaged kids get on the golf course, where they wouldn't have the money to do it.

Larry, how long have you been doing that?

Larry: Well, you know, it's interesting. We started a long time ago, but the project that we're currently working on out in San Bernadino that's gaining a lot of traction, started about seven years ago in partnership with the school districts.

We're just working to change the way people think about golf, especially young people, which have limited access to the golf course.

Dr. Darrow: Sure. It's a great, great game for youngsters. It keeps them off the streets, it keeps them off of drugs. I've never seen -- you know, this is me personally, I'm not saying it's the way it is, but you don't usually see kids doing drugs, who play golf. Do you find that also?

Larry: Yeah, the thing that we -- I'm sorry.

Dr. Darrow: Do you find that it helps straighten out these youngsters when they start playing golf. It's a real clean sport, it's like swimming or something.

Larry: Yeah. But what's interesting about golf, and just the whole golf environment. You know, golf at its core is a game of honor, right?

Dr. Darrow: Yes.

Larry: There's -- you know, it takes all kinds to fill the freeway, like this friend of mine Tom (inaudible) said back in the old days, so there's all kinds of golfers, but generally speaking the -- the environment, the golf course environment is an environment of respect. And so the more you can get kids into that environment, the better. And then over time, you know, the fundamental lesson we teach them is that there's no referees or umpires on the golf course. You're responsible for what happens.

Dr. Darrow: That's true.

Larry: And over time that starts to seep into just everything that they do. Now, we fight against access to all their friends, and most people in

the community think golf is whatever, right. Like all the myths, it's not for them. It's only for rich people. It's lame. It's too boring, all those things. And I tell the kids that anyone that says golf, it's just because they're probably not good at it, and they don't know how to play.

Dr. Darrow: Well, that's correct. It's not -- it's not the kind of thing where you just go out and you know you're amazing in one minute. It does take some training; the golf swing is you know it's honestly it's a very difficult swing. To me, it's like I call it similar to ballet. There's moves to it, to get a nice swing, and to be able to hit the ball where you want to go. To me it's magical and mystical.

Larry: Right.

Dr. Darrow: Because there's so many things that you can do with that golf ball, that you can't believe. And I actually hit a hole in one, by bouncing -- slicing the ball into the woods, it hit a tree, and I'm looking in the woods, and the guys on the green that get to the green, go hey Marc, your ball in the hole.

Larry: Right.

Dr. Darrow: And then there's shots that should go in the hole that end up in the trees. And it's the beautiful walk you can take, I think. It's just a really fun time. And you're with buddies, and you make friends, like you and I never met before, but we were like best friends by the end of the game. And I just wanted to thank you for calling. We have other callers, Larry, so I appreciate it. Do you want to give out your phone number, in case people are interested in this?

Larry: Sure, I mean they could -- they could go 61golf.com, that 6-1-g-o-l-f-dot com. And they could just say, hey about you guys on Dr. Darrow's show, or they can call 888-272-1078, and they can reach us there. I appreciate it, doc.

Dr. Darrow: All right, man. I really appreciate your call. I think you mentioned you had a knee problem, didn't you on the golf course.

Larry: Well, yeah, yeah. I heard you talking about the meniscus, and think that's probably what it is, because it's something that I think I did a long time ago, and it's right in the middle of the knee. And I get around just fine, but every now and then if I torque it or you know get it an angle, it feels like somebody's sticking a knife in my knee.

Dr. Darrow: Well, I'm going to do for you, since you're a good man, doing good things for people and I'll take care of you for free, how's that?

Larry: Wow, that's so cool.

Dr. Darrow: All right. Man, God bless you, you live it up.

Larry: I appreciate it.

Dr. Darrow: We're going to go to Andy, after I give out this phone number to call the studio. And the number to call us and talk to us live right now is 866-870-5752, if you call in, I'm going to give you a copy of the book, that I have in my hand, which is all about healing. It's all about regenerative medicine, how to heal your musculoskeletal pain with stem cells and platelets, rather than doing the surgery that you don't need to do. And I'm just telling you people, I get way too many patients, who come that had a failed surgery, it didn't work. They never should have done it, and they're worse off, and we can still get them healed up, not always, but most of the time, by using PRP, platelet-rich-plasma, and stem cells.

So Andy, this is Dr. Marc Darrow. You have a knee issue also. Today is knee day so far. What's going on?

Andy: Yeah, I know. Thanks for taking the call. My father-in-law, Dennis turned me onto you. And we were talking about shoulder issues he had, and I was talking about my knee. And I've got a little bit of a recurring knee issue for about a year and a half now. And previously I got an injection of product I think it was Exosomes by a manufacturer called Direct Biologics, and it really did a great job. And I didn't know if you had heard of the product, or if you have any thoughts on it.

Dr. Darrow: Yeah. I do. Exosomes are fine, but when we inject you with stem cells there' exosomes in it, so you're getting more of a benefit, than just exosomes alone.

Andy: But what's the difference?

Dr. Darrow: Well the difference is exosomes don't have stem cells in them or platelets. So it's like -- let me think if an analogy. What kind of work do you do?

Andy: Oh, I have an office job, I'm in the computer business.

Dr. Darrow: Okay, computers, okay. So if you have a job that takes 10 people to do, you know that you need 10 computers and 10 people to get the job in a day, and you have one computer, and you're going to do it alone, and you'll get one-tenth of the job done. Would you want to do it your way, or do you want to do it the 10 ways.

Andy: Got it. Interesting.

Dr. Darrow: Yes, so exosomes are fine, but they're just one piece of the puzzle, and you get that when you do stem cells. Okay, you get a lot of different healing factors with the stem cells that you do not get with just exosomes. I'm all for exosomes. I'm not putting them down, it's a great thing, but it's just not as complete.

Andy: How much more effective would you say the stem cells are compared to the exosome product?

Dr. Darrow: I don't know of any study that --

Andy: Is it ten times.

Dr. Darrow: I don't know of any study that compares them. So I wouldn't want to jump the gun making up a story that I don't know the answer to. I just wouldn't exosomes, personally, yeah. I personally wouldn't waste my time. But look there's a lot of exosomes being injected all day long all over the world, so I'm not against. It's just personally I wouldn't do it, because every time you get injected, you know, it is a little bit of a traumatic experience for the patients, it's not a big deal, but why get the job done quick, right.

Andy: Yeah. Makes sense.

Dr. Darrow: And well, there's a lot more we can talk about, you get a hold of me through the website at www.lastemcells.com Andy, if you want.

Now you said your father-in-law had a shoulder problem. What happened with him?

Andy: He, I think it was through just some working out, he got some bone spurs, and I guess because of the muscle was rubbing on the bone, I'm not sure much more than that. But that was something that he and I were talking about when we were kind of complaining about body aches.

Dr. Darrow: Has he had any treatment for it?

Andy: I believe he has actually.

Dr. Darrow: Is he all better, did he get a surgery, what happened?

Andy: He did not use surgery, I don't think. I think he did some physical therapy and that seemed to work.

Dr. Darrow: I always tell people when they ask, when people come in, they go what should I do. I go do the most conservative thing you can do.

If it's physical therapy, great. If it's massage great. You know, whatever it is that's conservative, do it first, see if that works. And surgery is at the other end of that -- you know that paradigm, which is extremely invasive, with potentially terrible side effects that I've seen.

And I always once the knife goes in, it doesn't come out, the damage can be done. I'm not saying surgery ruins everybody. It helps a lot of people. But I've seen I'd say probably 50 percent of the cases, that I see, the surgeries come out bad, maybe not right away, but down the road, a while, let's say you take out some meniscal tissue in the knee. You know you're waiting for another surgery, because the knees are going to probably be injured again. Shoulders with rotator cuff tears, the same thing, anywhere in the body. So I tend to stay away from surgery. That's the last, last, last option. And if physical therapy on your father-in-law's shoulder God bless him, I'm glad that happened.

I inject all over the body, and not just the major joints, but muscle tears and tendons and ligaments, and you name it, from head to foot. There's the break, hang with us Andy, we'll get right back to you. This is Dr. Marc Darrow, Living Pain Free, regenerative medicine. Call us right now, you get a free copy of my book. The number is 866-870-5752.

Nita: Okay. And grab a pen or a pencil, write down this information coming your way. I'm Nita Vallens, your host, 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. I'm your host Nita Vallens. And the star of the show Dr. Marc Darrow, and we are taking your calls at 866-870-5752, that's 866-870-5752. And you want to call the program today, and get Dr. Darrow's latest book called Stem Cell and Platelet Therapy, Regenerate Don't Operate. And this is the definitive book on this stuff. It has 264 scientific studies, 264.

Dr. Darrow: That's a lot and what do the studies tell us, Nita, how to use regenerative medicine instead of having surgery. And it gets into all problems that surgery creates.

Nita: Elective surgeries.

Dr. Darrow: Well, yeah, elective, but you know what there's a big question, what does elective mean? There's way too many surgeries that are done, where the surgeon says it's an emergency, and it really isn't. I'm not putting surgeons down, okay, I love surgeons. And I'm very grateful they go through all the training and go through all of the -- I'm going to call it misery, it's not easy being a surgeon. You know, you can really hurt people.

There are mistakes that are made.

Nita: A lot of pressure.

Dr. Darrow: A lot of pressure, even without mistakes, there's just things that come out bad, when they shouldn't. My shoulder was one of them. I thought my surgeon, who was my boss at the time in med school, I was doing orthopedic surgery. I thought he did a great job. You know he was doing these all day long. But they came out bad, and it taught me a lesson, that I did not want to do this to other people. And I switched horses midstream, from orthopedic surgery to physical medicine and rehab, and doing regenerative medicine instead. That's a big statement. That was not an easy decision, because I loved doing the surgeries. But honestly, I saw too many bad results, and it freaked me out. I'm not -- again, I don't put down the surgeons, I just think that there's way too many orthopedic surgeries that are begin done, that do not have to be done, the culture of orthopedic surgery is definitely contra -- against the culture of regenerative medicine.

We're there to grow tissue back and heal it, and they are there to often patch things up, and put them back together, which is great. But all too often to take out tissue. And the common thing we see in knees is what they call a clean-out where all the loose tissue is taken out. I think that's a good cushion, they don't think so. They clean it out, and then later, there's less integrity to the joint. And at that point, it's very easy to get injured again and then have another surgery. And on the knee, I see a lot of people go through a couple of surgeries, then a knee replacement, that they never would have even thought about doing had they done regenerative medicine, platelets and stem cells to start with.

I argue with my orthopedic surgeon buddies, and we don't come to any agreement, so just know as a patient, or someone who is inquiring, you're going to hear different stories about what's right. I don't think anything is right or wrong, it's just in the way I think about medicine, be conservative. Do the things first that you can't get hurt with. And those are the soft medicines, you know, things

like acupuncture, massage, PT, all of those, try that if you can. And then move up the ladder to more conservative things if the first fails.

But you know we had Steve call in the first half hour. Thank you, I don't know if you're listening, Steve, but I heard you say something like you did some regenerative medicine and you finally had to do a shoulder surgery. Yours worked out great. So I'm very happy for you.

But when I hear people, and I hear them say this every day. I had to get a surgery. They're like apologizing to me. You don't need to apologize to me, you did what you did based on all the information you had, but it's probably based on the fact that a surgeon told you, you had to do it. And that's the word "elective" comes in. What does elective mean?

Nita:

It means, I choose.

Dr. Darrow:

It means the patient gets to elect, not the surgeon. Yeah, the "I" is not the surgeon "I". The "I" is you, the person that has the injury. So you get to elect.

And then the question is it an emergency, or is it elective? That's a big issue, because there that come in and they go this is an emergency, and I go no, it's not. So medicine is not cut and dry. It's not black and white. It's still the practice of medicine. And I would always say if you're about to get a surgery, get another opinion. But get the other opinion from someone who is not a surgeon. Okay, not someone who is in that culture. Not the doctor that refers to surgeons. Go to someone who is against surgery, see what they have to say about it. There's a lot of types of medicine that don't like to have surgery done. So, you've got to be careful.

I'm going to give out the number to the studio right now. I'm going to give you -- I'm going to send you a free copy of my book which is called Stem Cell and Platelet Therapy, Regenerate Don't Operate. It's all about stem cells and platelets. And how to regrow tissue instead of cut it out. And if you call in right now, I'm going to mail you a copy of this book for free. And the number to the studio right now is 866-870-5752, that's 866-870-5752. If you do want to call my office, I'll give you that phone number also, there's people by the phones there, that's 800-300-9300, 800-300-9300. If we don't cover a topic that you're interested in, or you want more information.

And for those of you who want to look better, we do this same procedure, regenerative medicine on the face, it's called the

Vampire Facelift. And we just inject platelets and/or stem cells into the face and regrow the collagen. As we age, the collagen in our body dries out, the face sort of becomes gaunt. The disks in our back that cushion the vertebrae dry up, we get shorter, when we get older. The joints start to wear out. The tendons and ligaments dry out. It's easier to get injured, it's harder to heal.

So with the regenerative medicine the name is a great name of regenerating the body, instead of doing surgery to it, when you don't need it. And the regenerative medicine can be done on the face, it can be done on the top of the head to restimulate the hair follicles to grow, and it's an amazing process. I've been doing it for 25 years, and they say I'm the busiest guy in the world. I'm not so sure, but I know I am very busy. I don't even like, to my wife's chagrin, I don't like to take vacations. I like to be at my office. I love what I do, and I love -- people say, what do you do for a living. I go I watch people heal. It's a great life.

What do you say, Nita?

Nita: It is indeed. Shall we give the phone number again?

Dr. Darrow: Yeah, give me a call now, let's talk 866-870-5752.

Nita: What else is happening in the office?

Dr. Darrow: Just joy, happiness and healing. I'm going to go to a caller, Nita.

Nita: But while the call comes up, I thought you could talk about what your wife does.

Dr. Darrow: I already did.

Nita: Okay. Never hurts to mention it again for the latecomers to the show.

Dr. Darrow: You are right.

Nita: How about the website, www.lastemcells.com people can see you doing the treatments --

Dr. Darrow: Nita, you know what, I'm going to have to hit you up with a joke.

Nita: I think the calls coming in any second. I feel the call coming in. I feel it.

Dr. Darrow: I feel it.

Nita: See, there it is, the little bar turned green. Okay. Plus, I've got to say the website, you know, it's a long website, people.

Dr. Darrow: Okay. It's Marilyn, Marilyn, God bless you for calling, you just saved Nita. So you're calling about the Vampire Facelift. What would you like to know Marilyn?

Marilyn: Well, I had a dentist, I guess he was trying to take away all my wisdom, because what he did, he kept pulling wisdom teeth, on my left side, my left cheek, it's getting sunken in, because there's no teeth there, and I didn't know this was going to happen.

Dr. Darrow: Didn't you always want dimples? Now you got them.

Marilyn: Well, I'm a little too old to be called Shirley Temple.

Dr. Darrow: I don't if the Vampire Facelift will help you or not. We'd have to see you.

Marilyn: Okay. Well, I'm just so afraid of Botox, because I have neuropathy, and I'm afraid of something happening if I have Botox, what do you think about that?

Dr. Darrow: Well, you always want to stay away from Botox if you can help it. But I don't know the answer, because I haven't seen you. So you'd have to come in and see my wife, Michelle takes care of the faces. I do the rest of the body. So I'll give you the number to the office, it's 800-300-9300, you can set up an appointment with her. Okay?

Marilyn: Okay: Thank you so much, doctor.

Dr. Darrow: God bless you for calling, Marilyn. Thank you, Marilyn.

Nita: Thank you, Marilyn.

Marilyn: God bless you.

Nita: You saved me, thank you, Marilyn.

Dr. Darrow: No, she didn't save you. She postponed.

Nita: She postponed the inevitable, yes, I realize that.

Dr. Darrow: So, Nita --

Nita: Well, I think we should give the phone number just one more time.

Dr. Darrow: All right. It's 866-870-5752. You can talk to us right now, and save Nita from going on the chopping block, but I've got to sneak in a joke here for Nita, right now.

Nita: Okay. Okay. I'll just give the website one more time.

Dr. Darrow: All right.

Nita: [Www.lastemcells.com](http://www.lastemcells.com) now only can you see Dr. Darrow doing the treatments on videos, but you can email him off of every page on the site.

Dr. Darrow: Exactly. Do you know why I want to go camping every year? You'll never get this one.

Nita: I probably will never get this one.

Dr. Darrow: Because my last trip was so intense.

Nita: Oh. You camp out in a tent. I thought you had an RV, a giant RV.

Dr. Darrow: I wish.

Nita: I would go camping in an RV. But I'm not going to go -- I mean when I was a kid I camped in tents, but you know I'm not 20 anymore here, you know.

Dr. Darrow: All right. Nita, you'll never get this one. I hardly even get it, you ready?

I broke my arm in two places, do you know what the doctor told me? Stay out of those places.

Nita: See, oh.

Dr. Darrow: See, Nita gets joke after joke until she laughs.

Nita: But you know what's funny, I did break my arm in two places when I was 17. I was thrown out the windshield in a car going downhill.

Dr. Darrow: Wow, it made you look even pretty even prettier.

Nita: Well, they pronounced me dead at the scene, but I lived, I'm sitting here.

Dr. Darrow: So you've risen. You've risen.

Nita: I'm like the cat with nine lives. Seven to go.

Dr. Darrow: So Nita, what do you give a sick bird? You might get this one.

Nita: You give a sick bird tweets

Dr. Darrow: Tweetment.

Nita: I said tweets.

Dr. Darrow: You did. You're good.

Nita: That's half a point.

Dr. Darrow: It's half a point, but you didn't laugh. So we've got to keep going.

Nita: Do you have doggie jokes? I love dogs. You have three dogs or don't you or two?

Dr. Darrow: Oh, it's a three-dog nightmare. No, I have two Huskies, and Jensen our daughter has a little mini-Pincher Chihuahua that comes over all the time, used to live with us. What do you call, Nita, you'll laugh at this one, what do you call an empty can of Cheese-Whiz.

Nita: An empty can of what?

Dr. Darrow: Cheese-Whiz.

Nita: I don't even know what Cheese-Whiz is.

Dr. Darrow: It's like a cheesy whip. It's very good, not good for you.

Nita: I call it something to go on a cracker.

Dr. Darrow: Cheese-Was.

Nita: Cheese-Was, no, no, no.

Dr. Darrow: Okay. You didn't laugh.

Nita: Katie and I are both saying thumbs down, thumbs down, no.

Dr. Darrow: What's the award for being the best dentist?

Nita: New teeth.

Dr. Darrow: A little plaque.

Nita: A little plaque. That's a good one. That's a good one, we'll give you that one, that's a good one.

Dr. Darrow: You didn't laugh though, sorry. Who invented the round table?

Nita: King Arthur.

Dr. Darrow: Circumference.

Nita: That's hilarious.

Dr. Darrow: I'm going to go to a question and get you off the chop block.

Nita: You know, I was laughing all night long. Do you know what I was watching on TV, and I couldn't believe this.

Dr. Darrow: Tell me. Tell me.

Nita: Jerry Seinfeld has an old show on Netflix, it's called comedians and cars getting coffee. It is hilarious.

Dr. Darrow: Absolutely crazy?

Nita: Have you seen it?

Dr. Darrow: No, but I love that guy. He's so funny.

Nita: You've got to see it; I mean he even had President Obama in the car one time. It was hilarious.

Dr. Darrow: I think I did -- I think I did see that, yeah.

Nita: It's like ten years old or something, or maybe 12 years old. I just keep watching them over and over. And I always laugh like I'm going to cry. They're so funny some of them.

Dr. Darrow: I'm going to go to failed spinal surgery and get back on point.

Nita: Okay. Yeah, because see it's going to hard to make me laugh today. I watched Jerry Seinfeld all night.

Dr. Darrow: I know. You have not been laughing much. So I'm going to give out the phone number to this next question on failed spinal surgery. A lot of people have had that. The phone number to give us a call right now. We still have a couple minutes left, is 866-870-5752. And if you want to call the office directly, that's 800-300-9300.

So let's see what this person says. Oh, this is a long one. Kind of funny, it says failed surgery, and then it says a little background.

Nita: And then they wrote a novella.

Dr. Darrow: Started having spinal issues 2016, undergone more spinal injections than I can count, had L4-5 laminectomy 2017, that means of the

vertebra so that the nerve could breathe better that goes down the leg. Had a spinal cord -- SCS which stands for -- oh, a stimulator, a spinal cord stimulator, SCS implanted 2019, that can be something that's implanted so the nerves, so that you can't feel the pain. No help with that. MRI, CT scans showed severe degenerative L4-5, L5-S1, due to years of heavy dead lifts.

Careful guys, I'm going to tell you exercises that I don't like. One are dead lifts. One are squats, and one are lunges, that three different exercises I see where people end up with terrible back pain. Had a double fusion surgery August 21, to replace disks with cages, have done PT, additional injections have failed to help.

Symptoms now, pain on right side after prolonged sitting, or normal bowel movement. Had colonoscopy in September this year, no issues. Recent group of x-rays showed mild degenerative changes, both SI joints, hip joints, and the pubic bone, sacrum, coccyx, articulation normal. Could all these issues along with my recent spinal fusions have me out of alignment in pelvic muscle floor. I feel as bad as standing, but prolonged sitting cause very tightening. I see neurosurgeon again in December, not sure what his take will be on this.

Well, the take generally when you go to a surgeon is what? Surgery. So this guy's already been -- had surgery a few times with failures. So I don't think surgery is the right way to go. I would definitely love to see this guy, or woman, but I do know if it's a man or woman, but I don't want to say, to give away their story.

So yeah, I would say who does regenerative medicine, go to someone who is an expert in it, who does it all day long. Don't go to someone who does it once in a while. Go to someone who does backs every single day. I could probably tell this guy or girl in literally 10 seconds, whether we can help. And typically the areas where a lot of this pain come from are from sprains from the iliolumbar ligaments or the thoracodorsal fascia where it attaches to the pelvis, or the quadratus lumborum muscle where it inserts on the pelvis. I have tons of people that have had failed surgeries like this. And sometimes one treatment with regenerative medicine can heal everything that's going on, and then they go why did I get these surgeries, I never needed them, and they hurt me. These are not fun surgeries to go through.

Thank God, I've never had one. And I don't ever want one. So if you're thinking about getting a surgery, please consider calling us at 800-300-9300, get someone with a different take a different point of view, somebody outside the traditional medicine box.

Nita: And if they want to talk to you right now, what's the number?

Dr. Darrow: Call us now, let's talk. 866-870-5752, I'd love to talk to you. I love saving people from surgeries. And it's a conundrum for people, because they go to a surgeon. They're told they have to get a surgery. The only way that can save them from sometimes -- I've heard the people say, the doctor told me I'd be paralyzed if I didn't have this neck surgery. And guess what happened to them after the surgery?

Nita: They got paralyzed.

Dr. Darrow: They got paralyzed. There is one guy, I told this story I don't think I've told it for years. He came in when I was working at the VA in West LA, on Canadian crutches. His legs were very, very weak after a neck surgery. He had some neck pain, and the doctor did a neck surgery, told him he would be paralyzed if he didn't do it. He wasn't paralyzed, but close to it. And then we did a test of his vitamins, it was found he was very low in B6 and B12. Guess what we gave him?

Nita: You gave him the vitamins.

Dr. Darrow: And guess what happened?

Nita: He got better.

Dr. Darrow: He got better, just from that. Is that insane? It's called traditional medicine. Watch out for traditional medicine. Go to people who think outside the box, if you're going to a doctor. I like to see -- I see traditional medicine doctors, but at the same time, I also talk to myself, an "alternative", it's not alternative, the type of medicine that I do has been around since the beginning of the time. It's just an alternative to the tradition of what's going on right now.

So we have to be careful. It's always good to explore and find easy ways and conservative ways of healing, rather than things that are invasive. So I'm very sorry this person had these surgeries. Is it still possible that I could heal them by injecting PRP or stem cells? Absolutely. Absolutely, it's possible.

Should I take another question before for the --

Nita: Sure. Absolutely.

Dr. Darrow: Oh, this one sounds terrible. Ankle fusion, amputation question. This is kind of a long question, I had a talor neck fracture dislocate Hawkins (inaudible) 2006, from a fall off a ladder. I get people

falling off of ladders all the time. They're terrible injuries. It's sad. This past February I did a lower ankle fusion, then had total ankle replacement done in March due to severe arthritis in the ankle. After the surgery, I had issues getting the skin to heal. Tried a wound vac, integration skin infusion, then had to do a lower calf flap surgery, oh boy, this person's gone through it. That person, you know I don't like should-have's, but they should have been getting hyper baric oxygen to heal that skin, rather than cutting it again.

Then some of the skin on the flap didn't take and regrow over the flap. So this is terrible. Hyper baric oxygen can heal those kinds of things. Finally it closed in early September, I went through rehab and started to get the ankle motion going back, moving again. Now here in November ended up with staff infection to the ankle, that's bad. Total ankle had to be removed. Now, I'm given two courses of action. I can either get a total ankle fusion with a rod through my heel, connecting foot to leg or have an amputation. Whoa.

Very active person loves motorcycling, golf, any thoughts. Well the thought is always the same thought with anything in medicine. Do the conservative thing first and that would be to see a doctor who do regenerative medicine, see if that's a possibility here. It may be. It may not be. I don't know. A lot of cases, I've seen, where I tell people not even to come in, because I don't think I can help, and they badger me and say they're not going to get the surgery, and we sometimes can help them.

So I'm sorry this happened, I'm sorry all these surgeries took place, and I don't know the answer. This is definitely a person I'd have to examine. God bless you all. If you want to call the office, the number is 800-300-9300, if you want to go to my website and watch videos of me doing these procedures, go to www.lastemcells.com thank you all. God bless you, Nita and staff.

Nita:

Thank you Katie, thank you, Suzette and remember to listen to our pal, Warren Eckstein from 11:00 to 1:00 on The Pet Show every Saturday. I'm Nita Vallens. We'll see you next time.