

Living Pain Free 7/8/23

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 Joint Rehab and Sports Medical Center 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 through his studies at UCLA. And Dr. Darrow uses stem cell and platelet-rich-plasma therapy to heal your body. He teaches about the use of stem cells, PRP, and Prolotherapy. Today's program could open up a new life without pain for you. Now here's Dr. Darrow with his co-host, Nita Vallens.

Nita: Well, hi there Dr. Darrow.

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

Nita: Why thank you. And you, with your hat on, on your Facebook, and live and it's all very exciting what technology offers us these days, right?

Dr. Darrow: Isn't it amazing, fake hat, fake golf shirt and ready to hit the course. I'm going to blast out of here, right after the show.

Nita: All right. If I didn't have to work, I would be there to watch you.

Dr. Darrow: Well, you could even ride, if you don't know how to play, no worries. So anyway, we're going to talk today about how to heal your musculoskeletal pain. That's your orthopedic pain. And for anybody who calls me right now, I'm going to give out the phone number right now, and get this going, because we love the dialogue, and we love to get stumped by new conditions that patients, or people who are not patients, who want to be patients.

The phone to the studio, right now, live, call us, it's 866-870-5752. I'm going to repeat that a couple times, so you can grab your pencil and paper, it's probably best to get off the road, and take your Bluetooth off, so we can hear you. And the phone number to call me right now and talk to me, to learn how to heal your musculoskeletal pain without surgery. The phone number, 866-870-5752, 866-870-5752.

I will send you a copy of my book, Stem Cell and Platelet Therapy, Regenerate Don't Operate. And what does that mean? And by the way, I'll pay the postage too.

Nita: Cool.

Dr. Darrow: Regenerate means to grow back the tissue, and rejuvenate it, instead of cutting tissue out and destabilizing the area. As my listeners know, I had dumb shoulder surgery, when I was in medical school that really jacked, and I had four years of misery, after that should surgery.

And then I learned about regenerative medicine, I injected my own shoulder, I woke the next morning, completely pain free with full range of motion. And as a caveat, it doesn't work like that. As a matter of fact, most of the time, it doesn't. But it was sort of wake-up, a spiritual wake-up call for me, that I was not going to be doing orthopedic surgery, and that I was going to be doing regenerative medicine.

And since those old days, that was back in the 90s, I've injected both my knees with amazing success, both my shoulders, and they both at different times have been literally locked up with frozen shoulder, where I couldn't lift them.

What else have I done? I've done my elbows from weightlifting in excess. I've had other docs, my buddies do my neck, and my back with great success. And like I said, I am on my way to the golf course after the show. I can run. I ran last night with my Husky, up in the mountains, and I'm in good shape. I'm 75 years old. I hit that magic number, and it doesn't stop me from doing sports.

And I have to tell you, 30 years ago in my 40s, I couldn't do anything, because I was so miserable, my body was so beat up. I had been a gymnast. I had surfed, wind surfing, a lot of sports, they were high impact. I was injured all over the place. And today, 40 years later, or is it 30 years later -- 30 years later, I'm in better shape now, than I was then in terms of the musculoskeletal system.

I'm still six feet tall, 170 pounds, I could lose two pounds, right, Nita.

Nita: Oh, I don't know, you look pretty svelte to me and happy birthday, by the way.

Dr. Darrow: Yeah, you too, Nita, it was just your birthday the day after mine.

Nita: Yeah, our birthdays are a couple days apart, although I am much younger. But we do have Gary holding on.

Dr. Darrow: Oh, excellent. Gary, Dr. Marc Darrow, what can we do for you? What's going on?

Gary: Hi, hello.

Dr. Darrow: Yeah, I'm with you buddy, what's else?

Gary: Yeah, my question is how unusual is it -- a little unusual to fracture a vertebra, a lower vertebra when you don't fall from a height, I fell on the bus.

Dr. Darrow: Why, yes. I can tell from your voice that you're not ten years old, so how old are you?

Gary: I'm 81, three years ago I fell on the bus, and I didn't fall from a height. Is it a little unusual to fracture a lower vertebra --

Dr. Darrow: No.

Gary: Without falling from a height?

Dr. Darrow: It's very common. Nope, very common. And as a matter of fact it happens to a lot of people who have osteoporosis, which is -- they call it a disease, it's just demineralization of the bones, from lack of hormones. Testosterone, estrogen, and progesterone need to be recycling in the body to keep the bones remodeling. So the old bone is taken away, and the new bone is put down. So at your age of 81, you most likely have osteoporosis, which we think is a female problem, but it's not, it's male or female.

And what I do, I supplement the hormones, we check your blood, and we get your hormones checked, and we would supplement your hormones, and be able to regrow some of the bone. So a lot of people have vertebral fractures, which can be very, very painful. I can often help the pain. But sometimes you need to have a sort of a glue put in there, by an orthopedic or a neurosurgeon to help that, because the bones can collapse.

Gary: Yeah. I had what you call a compression fracture of the lower vertebra.

Dr. Darrow: Yep.

Gary: And I walk with a walker.

Dr. Darrow: Well, if you want to come into the office, I'll take a look at it, because I can often help with that. The phone number to call the office is 800-300-9300, I'll repeat that for you. The office number is 800-300-9300. And there are people that can answer your phone call right now, if we're busy there, you can just leave a message and they'll call you right back, okay.

Gary: Thank you.

Dr. Darrow: So, Gary do you have any pain in your body, other than in your spine?

Gary: Yeah, when I bend down too much, I get pain. And my goal is to walk without a walker.

Dr. Darrow: Okay. Well, I think that's a goal that you can probably get. I have to examine you first and see what's going on.

Gary: Yeah.

Dr. Darrow: So give the office a call, let's see what's up with you. I'd love to check you out. All right?

Nita: Thanks for your call, Gary.

Dr. Darrow: God bless you, Gary, thank you for calling in so quick.

Gary: Thank you.

Dr. Darrow: So the number to call us at the studio right now is 866-870-5752, and by the way, what Gary has, compression fractures in the spine, is super common, all right. It's something that is you're not replenishing your hormones, there's a high probability you'll get that as you get older.

So my history, when I was in my 40s, again, when I had all these injuries, I was feeling real crummy, and I was at a medical convention, and I saw a man, who was all pumped up. He was a bodybuilder, you could tell. And I went up to him, and I said, why do you look so good? And he said, why do you ask me that? And I said, well, I don't feel good. And he said, are you kind of depressed and are you low energy? And I said, yeah.

He said your testosterone is low. And I didn't know what that even meant at the time. So I had my testosterone checked, and it was very low, and I immediately went to get a bone density test done, and I had close to osteoporosis, what's called osteopenia. And at that point, I did a lot of homework. And I actually did a fellowship in hormones, to really learn about it. And I started taking testosterone, and most of my bone mass has grown back over the years. So I don't really have that fear of breaking bones anymore that I did when I was young.

So there's a lot of things that traditional medicine doesn't really tell us. They give people these biphosphates, these medications, that when they have osteoporosis, or osteopenia that actually led to more bone fractures. So traditional medicine is something I know.

I was trained in it at UCLA, and you know I know it backwards and forwards, but it is not enough. And it's not the answer for most of these things. You've got -- doctors have to study more and more, continually to keep up on how to heal the body, rather than just use these medications and do surgeries, when they shouldn't be done. And I get kind of peeved about it.

I know the medical system is slow in advancing, but it's the doctors to keep learning more and more, and you know, I'm just going to say it like this. The doctors that I know, even my best friends, I'm going to call dinosaurs, meaning -- I'm serious, and we fight.

Nita: I know.

Dr. Darrow: We fight, they go I'm stupid. And I go you're stupid. So, you know, you've got to go somewhere in the middle and learn all of it. And they're reluctant to keep learning. So that's my statement about the medical community.

Nita: Okay.

Dr. Darrow: So we've got a call from Kevin. Thank you for calling in, Kevin. This is Dr. Marc Darrow and we're on the show --

Kevin: Hi Marc.

Dr. Darrow: Living Pain Free, and for calling in, Kevin --well, we've got an echo going, Alex.

Kevin: Yeah, I'm moving and all that, and I hope that we're good at this point. Hello.

Dr. Darrow: Okay. Hang with me, Kevin, I've got a little bit more to say. For calling in today, I'm going to mail you a free copy of my book, Stem Cell and Platelet Therapy, Regenerate Don't Operate, and I will pay the postage, so thank you so much for calling in. And for those of you that do want to call in, actually you can call in now, the call screener will pick up your information, but the phone number to the studio right now to talk to us is 866-870-5752. I'm going to repeat it, 866-870-5752.

And for those of you that want to watch me doing these injection procedures of stem cells and platelets to regenerate the body and regrow the tissue, and rejuvenate it, the website is www.jointrehab.com www.jointrehab.com, that's jointrehab dot com. There's hundreds of pages there of information that will teach you how to save your body from surgery, how to heal after injuries or arthritis, or all these wild medical conditions that hurt you. And

it's phenomenal, it's a phenomenal, I work on it every day. And I think it's amazing. And I think you'll think it's amazing, too.

And if anybody wants to call the office directly, the phone number to the office is 800-300-9300.

So Kevin, you have lumbar and neck pain, that means low back and neck, cervical pain. What's been going on? How long has it been going on? What did your doctor tell you about it?

Kevin: Okay, first, I'm Kevin, Keith is maybe on the line, but I'm Kevin. And I have lumbar problems, I've got cervical problems. I've been dealing with the problem for about two years. And I've had lumbar pathology for about 20 plus years, and I didn't know about my cervical pathology until about a year ago.

Dr. Darrow: Okay.

Kevin: But I've got essentially no disk between L5 and S1, and multilevel disk problems in the cervical region between 3 to 7, with severe to moderate central canal stenosis and a bilateral foraminal stenosis in the cervical.

Dr. Darrow: Okay.

Kevin: So about a year and half ago, I started getting some foot pain, I was very active, I'm 52. Playing tennis on my -- what is this thing, I don't know what this thing. I run marathons, go snowboarding, do all these sorts of things, and I've got this weird feeling -- what turned out to be nerve pain.

Dr. Darrow: Yep.

Kevin: I've seen tons of orthopedists, lots of neurosurgeons, rheumatologists, there were muscular specialists. They all have varying [inaudible]. Some say you need to replace disks in your spine. Some say, yeah, you've got a lot of pathology there, but it doesn't associate with your clinical symptoms.

Dr. Darrow: Okay.

Kevin: So yeah, you could do the surgeries to deal with the pathology, but I doubt it's going to help, you know the problems you're describing. And so I'm like, well, I don't know what to do, because everybody is all over the place with this thing.

Dr. Darrow: Well, let me tell you the first thing, Kevin. Everything you've told me, and I have to examine you, first, to really be specific and to know what I'm doing.

Everything you told with all of the multi-varying opinions, probably means I can help you using platelets or stem cells. All right? When they get flustered, that's when my work really works. Because if they think they don't know what's going on, that means, I usually do know what's going on. That doesn't mean I'm smarter. It's just that I'm trained differently. They're trained to look at your images, you know, which show spinal stenosis.

Nita: Rick, are you there?

Dr. Darrow: Do you have neck pain? I guess Kevin's gone. It was Kevin ghosted us, he got cut off.

Nita: That's okay.

Dr. Darrow: But anyway, I'm going to talk to Kevin, he's probably still listening.

Nita: Okay.

Dr. Darrow: So, Kevin, you didn't mention neck pain, and the fact that you have spinal stenosis, and they want to replace disks, to me is idiotic, absolutely insanity. And anybody can have spinal stenosis, but that doesn't mean they have any problems from it, okay. It's just a diagnosis.

I don't go by diagnosis. As a matter of fact, the first thing I do when a patient walks in, is I get rid of their diagnosis, because it's usually a dinosaur diagnosis, that's my new term, Nita, I just made it up.

Nita: I like it.

Dr. Darrow: Meaning, they're going to look at your images and tell you what's going on. Images don't tell you what's going on. They can be of assistance, but they can be what's called a red herring. They can show you things that are not the issue at all.

And for someone to say they're going to replace seven disks is insanity to me. What are you going to be left with? Most of those operations that I've seen, the people that come in after that, that are still miserable, they didn't work. And we had a patient call in, actually it wasn't a patient, it was the wife of a patient, crying whose husband died from a neck surgery. And she wanted to know why.

And the surgeon walked into the waiting room, and said I did everything right, and walked out, and never told her what happened. So, no, I'm going to tell you, I don't like these surgeries. I love the surgeons, because they do hard work, but I don't like the surgeries.

And I had one on my shoulder that screwed me up. And I had to heal it myself. I injected myself. So any rate, Kevin, I think you need to come in and find out what the bottom line is here. I use my hands to figure out what's going on and move you around. I don't use the images, although I get the images, I don't use them to decide how to treat you.

I'm going to give out the phone number again, 866-870-5752. And if this isn't Kevin getting back on the line, we will go to Rick. Okay, let's go to Rick, we can always go back to Kevin, if he calls back.

Nita: Okay.

Rick: Hello.

Dr. Darrow: Yeah, Rick, this is Dr. Marc Darrow, you have a friend with a supraspinatus tear in his shoulder, is that correct?

Rick: Yeah, I have a friend who has severe spinal stenosis in her neck. And she's had many diagnoses done, physical therapy, gone to pain doctors, she's actually had a PRP shot, but when she goes to the -- she no longer goes to the physical therapy. But when the physical therapist does massage on her neck, the pain goes away for a couple hours.

Dr. Darrow: Okay.

Rick: She has no pain when she looks forward, but when she turns her head left or right or up, she has severe pain. So what is a medical condition that would have -- that a massage will get rid of the pain, but nothing else will, it's like inflammation, tightness of the joint. Is that -- have you ever heard of that?

Dr. Darrow: Of course. I've heard of everything; I've been doing this for over 25 years. But it's rare I hear of something or haven't had it myself. One of the cool things if you want to say that is I've had mostly everything my patients have, it's been a rough road, but I fixed most of it myself. I can inject myself with platelets or stem cells and heal the tissue, okay?

Rick: But she's had -- she's already had one PRP shot, and it hasn't worked yet. But why does the massage get rid of the pain, and nothing else will?

Dr. Darrow: I'd have to -- I'd have to examine her. You know, in medicine, like everything else in the world, there is no stock answer. I've got to examine her, see what's going on. I would probably massage her myself and see what happens, if she was having pain that day.

Rick: But is it like inflammation or tightness --

Dr. Darrow: It could be, yeah. It definitely could be. But I don't like to do could be's, I like to do the examination myself with my own hands and find out what is going on.

When she is in pain in the neck is that what the problem is?

Rick: Well, she's been diagnosed --

Dr. Darrow: I don't care about the -- forget the diagnosis.

Rick: She has no pain when she looks forward, but when she bends her neck --

Dr. Darrow: Okay, so it's neck pain. It's neck pain.

Rick: Yeah, neck pain.

Dr. Darrow: I'm going to bet you anything, she's got ligament laxity in her neck.

Rick: Ligament what?

Dr. Darrow: Laxity, you know like a sprain, like a sprained ankle.

Rick: But she's had it for years.

Dr. Darrow: That doesn't matter. I've had people that have had it for 50 years, they come in, one treatment they're better.

Rick: Okay, well I talk to her about --

Dr. Darrow: But I'm not going to tell you, that's what it is. I need to examine her.

Rick: Oh yeah, right. My question is a real short question. My friend has bunions. Bunions is where the calcium up in the toe.

Dr. Darrow: Yes, that's arthritis.

Rick: Is that -- can it be fixed by PRP or injections?

Dr. Darrow: Well, it's not going to get rid of the deformity, that's a cosmetic deformity and get rid of the pain.

Rick: But he has minimal pain, but he walks crooked, because bunions is a build up of calcium in the joint right?

Dr. Darrow: Yeah. I'd have to see it, I might be able help keep it from continuing on, but if that person has a giant lump there, that's calcium, I can't get rid of that. If it's a small one, then sometimes, when we inject PRP or stem cells, the inflammation that we start will bring in white blood cells that will chew up the deformity and get rid of it.

But I'm not saying anything right now. I've got to do an examination. But there's another question.

Rick: Yeah, thanks for your advice. Thank you.

Dr. Darrow: There is another question that wasn't answered, which is why --

Rick: That's all thank you.

Dr. Darrow: The question that wasn't answered is why did that PRP shot not work in the neck. And there's tons of reasons.

One is sometimes one injection is not enough. Another is you can have a bad doctor, who doesn't know what they're doing. Another one is that the person could be on anti-inflammatory medicines that block it. And too much activity will not allow something to heal. So there are a lot of reasons for failures with regenerative medicine with PRP and stem cells.

I think anyone who wants to get this needs to ask their doctor a few questions. One is, how many of these injections have you done today so far, all right?

The next is, how many of these have you done yesterday? How many the day before? How many last month? How many last year?

I always tell every single patient who wants a referral. I don't care if it for kidney disease, heart disease, whatever it is, go to the doctor who does the most, all right.

Now, I have to toot my horn a little bit here, because I do this all day long, every day of the week. All right? I do the most of anybody on the planet from what I've been told, and I love it. That's why I do it. I can't wait to get up in the morning and get to the office. And I don't like leaving the office at night. I leave late. I love what I

do. Because it's magical. I love watching people heal. Sometimes when I meet people at a cocktail party, they go hey, Marc, what do you do? What do you do for a living? I go, I watch people heal.

Does everybody heal? No. Do most people heal? Yes. If you want to get an idea of what my track record is, go to Yelp.com, Y-E-L-P dot com, and look up Marc Darrow, MD, and you'll see, there's a lot of people that don't like me. They didn't get what their expectations told them they should have. Even though they have to sign something saying there's no guarantees, and it may take a few treatments. They come back and they go, yeah, I signed that. Yeah, I knew that, but I had better expectations.

Well, too bad. You know, I'm not the keeper of who is going to heal and who is not going to heal. That's something that I think is a spiritual thing, and an attitude thing. Some people come back and they're 25 percent better after one treatment, and they're complaining. I think that's great. It shows that another treatment may get them 50 percent or 100 percent.

But you know what, I get a lot of grumpy people that come in, because they're in pain. And they have expectations that can't be met. So anyway, that's my ranting, right now.

Rick, is that enough for you. You got the idea?

Rick: There's no simple answer why massage why works, and nothing else works?

Dr. Darrow: No. There will be --

Rick: Well, does the massage get rid of the inflammation or tension?

Dr. Darrow: Not necessarily. It could put things back into alignment, and it could just feel good. I'll tell you what. You drag your friend in that has the spinal stenosis in the neck, and you can watch me do what I do, and then you can help figure it out.

Rick: Okay. Thanks for the advice.

Dr. Darrow: God bless you, Rick, I appreciate your call. Thank you so much.

Rick: Thank you. Goodbye.

Nita: Thank you.

Dr. Darrow: So I'm going to give out the phone number and then we're going to go back to Kevin who lost the call.

Nita: Right.

Dr. Darrow: So if you guys want to call me now, please do. I'd love to talk to you. Oh, it's on the break. Kevin, you hang with us, the phone number to call in after the break, call in right now, and we'll catch you after the break is 866-870-5752.

Nita: And you're listening to Living Pain Free with Dr. Marc Darrow and we will be right back after these messages. I'm your host, Nita Vallens. Stay tuned.

[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 are taking your calls right here, right now, 866-870-5752, 866-870-5752. Hi there.

Dr. Darrow: Hi, there, hi Nita.

Nita: Hi. Dr. Darrow, how are you?

Dr. Darrow: I'm living it up, also if you want to call the office to get an appointment or to get more information that we neglected to speak about, there are people at the office now. And the phone number there is 800-300-9300, I'm going to repeat it for you, it's 800-300-9300.

And to really educate yourself, if you call in, we're going to send out a book that I wrote, called Stem Cell and Platelet Therapy, Regenerate Don't Operate. And it's all about how regenerative medicine of stem cells and platelets can regrow the tissue in your body that is injured or arthritic that you're having pain with, and you don't want to have a surgery. I'm not a fan of surgery. I'm just going to lay that out real flat. If you're calling me to get a surgery, don't. I love the surgeons, this is not a statement against the surgeons.

It is definitely a statement against the surgeries. Meaning, there are way too many surgeries, that flat out should not be done, in my humble opinion. How do I know that? Because I get new patients

in every day that have had these surgeries, meniscal tear, rotator cuff tears, neck surgeries, back surgeries, where the surgery made the people worse. I know you can't believe that if you haven't had a surgery, but those of you that have had one that has failed, you know what I'm talking about.

I'm not saying they all fail. I'm just saying you're taking a big risk. And a lot of these things can be healed with simple injections of platelets and stem cells. So you know, if you're in your right mind, why wouldn't you do something conservative, rather than invasive.

I made the mistake, I had a shoulder surgery before I knew about regenerative medicine. And it jacked me up for about four years, until I injected my own shoulder, and healed it up overnight. So that was a wake-up call for me to be careful.

All right. We're back with Kevin, your call was lost, Kevin, I'm going to do a quick rundown of what you've told us so far.

You're a very active 52-year-old male, you play tennis, you do marathons, you've degenerative disk disease in your neck. Your neck and your low back have been bothering you. You have no disk apparently L5-S1, that's the low back. And guess what, buddy, you don't need a disk. Not having a disk or degenerative disk disease does not mean you have pain. So don't get the two confused. Okay. They often go hand in hand, and they often do not.

So what I need to do with you is get you into the office, the phone number there is 800-300-9300, and put my hands on your body, and examine you, and move you around, and see what is really going on, not what the images tell you is going on. The images are wrong often in telling us what is going on. They give a diagnosis that is often wrong, okay. I know it's hard for people to believe that, but I've been doing this over 25 years, and that's my experience.

I know traditional medicine. I studied orthopedic surgery, and I am sorry to say, and happy to say that the way they do it is not the way I like it. And they don't like what I do either. So I'm not saying I'm God. I'm not saying I know more than them. It's just different, it's different ways of healing and I don't their way. And they don't like my way.

Kevin, are you still with us, or are you lost again? Are you with us, Kevin?

Kevin: Yes.

Dr. Darrow: Yell, at us, so we can hear you.

Kevin: Hello, can you hear me?

Dr. Darrow: Barely, scream.

Kevin: All right. Let me try this. Is this better?

Dr. Darrow: Yeah, uh-huh.

Kevin: Yeah, you know, I've had lower back pain, you know, for 20 plus years, and I managed to get along without it. Operating at 80 to 90 percent capacity. And then you know all of sudden I'm feeling this weird pain at the bottom of my foot, and I'm like wow, I've got to get this fixed, because after a day I couldn't stand on it. It felt like it was going to tear apart. And I went to a foot doctor, who says, oh, plantar fasciitis, he throws a boot at me, I said no, no, I can't put that thing on, the second I put it on, my foot was on fire.

Dr. Darrow: Okay.

Kevin: I've had, you know, injections in my tarsal tunnel twice, steroid injections to my lumbar region twice, steroid injections to my sacroiliac joint, which actually helped, and now I'm on a CIMZIA TNF blocker from the rheumatologist and that seems to be providing some benefit. But I've been on disability for about a year and a half, after being a very active person and didn't suffer any falls or any traumatic accident, you know --

Dr. Darrow: Yeah, yeah.

Kevin: I'm just -- I'm at a loss, and the next step is a surgery, or you know something like what you --

Dr. Darrow: Well, I don't think that's the next -- no, no, Kevin, I don't think surgery is the next step.

Kevin: Okay.

Dr. Darrow: But you're not going to know it, unless you come and see me.

Kevin: Right. Can I ask a question about this foot pain, which is really what, you know, got me to where I'm at now.

Dr. Darrow: Listen I inject plantar fascia's all the time, not a big deal, use an ultrasound. And by the way, don't ever go to a doctor who doesn't have an ultrasound to look inside to see where that needle is going.

Kevin: Oh, right, right, right. No, I've had PRP injections to the knees and my Achilles tendon before, and they were about 50 percent healthy and the other was kind of okay, didn't really do much.

Dr. Darrow: Okay.

Kevin: You know, like you said some doctors don't know what they're doing, or they didn't do it right, or your body was in a state, where it couldn't accept the --

Dr. Darrow: No, the body accepts it. You may have beat it up too soon.

Kevin: Well, right. So yeah, I'd like to see about getting fixed without surgery, and I've been doing that for a year and a half, and I haven't gotten hardly, you know, much progress.

Dr. Darrow: Well, you're on the path of healing. You have to keep -- you have to keep on that path, until you get what you need that works.

Kevin: Right.

Dr. Darrow: Don't give up.

Kevin: Well, I'll give your office a call and hopefully, we can come to an understanding that what you can offer will --

Dr. Darrow: I would love to see someone like you, that's hurting all over the place, and help you get better.

Kevin: Yes.

Dr. Darrow: And once again for everybody else, the phone number to the office is 800-300-9300, if you want to call there and get more information.

Kevin: I will. I will definitely do that.

Dr. Darrow: Kevin, God bless you, man. I think there's good hope ahead from what you're telling me.

Kevin: I hope so. All right.

Dr. Darrow: I mean to be disabled at the age of 52, that sucks, man.

Kevin: Oh, yeah. I know good and well about that. So it's a struggle, and I'm hoping to get to the other side at some point.

Dr. Darrow: All right. Looking forward to it. Looking forward to seeing you.

Nita: Thanks for your call, Kevin.

Kevin: Yep, thank you.

Dr. Darrow: Thank you so much. God bless you and for those of you that want to speak to me right now, and I will -- if you do call in, I'll send you a free copy of my boo, Stem Cell and Platelet Therapy, Regenerate Don't Operate. It's got about 250 scientific studies on regenerative medicine of platelets and stem cells, and it's a couple hundred pages long. And it will give you the science.

People always say, as a matter of fact, when I lecture to doctors, always a couple orthopedic surgeons get up, and they go, where's the science. I didn't create, I gathered the science for you, and I hand them a copy of the book. The science, I'd like to know where their science is, I really would.

Nita: There you go.

Dr. Darrow: Yeah, I really would. Where's their science when they have people coming to me all the time that are injured from the surgeries. What science is that? No, there's plenty of science on regenerative medicine. And why don't they read it? It's in their journals. I publish my research, you know, I don't see any research on orthopedic surgery like this. But you know, who knows? Maybe, I'm not reading their research.

Anyway, the phone number to get a hold of me right now, sorry, I'm all pumped up here.

Nita: I think it's great. Because you know people just -- not enough people know about the new paradigm of how to do something without jumping into surgery, when it's an elective surgery.

Dr. Darrow: Yeah, you know, speaking of jumping into surgery, I get a ton of people that have ACL ruptures in the knee. By the way, I inject the entire body, I'm not limited to knees and hips and shoulders. I do the whole spine, you know, from neck to lumbar. I do muscle tears. I do costochondritis, ribs, a lot of people have rib pain, you know they take a deep breath and it's painful. And that's a very simple thing to heal.

There's really nowhere I don't inject. I'm not going to inject things that are different disease states, because you don't do that. I do musculoskeletal. I get calls all the time, can you heal my blindness? No, I don't do that.

Can you heal muscular -- multiple sclerosis. No I don't do that. Can you heal pain from an infarct or a stroke? No, I don't do that. But the stuff that I work on is simple. I'm a simple guy. It's musculoskeletal. It's the muscles, tendons, ligaments, the joints,

things like that. And those are the kind of things that regenerative medicine works on really, really well.

So once again call me, try to stump me. Give me something I can't answer, I'd love it. The phone number to the studio right now to talk to me is 866-870-5752, and if you want to watch me do videos, I've got videos of injecting different parts of the body, see if it's something you'd want to do, rather than a surgery. The website is www.jointrehab.com www.jointrehab.com and there's a spot on every page of the website to send me an email, I answer every email every day. I do emails between patients. I do emails first thing in the morning. And I do emails typically till about midnight. I love communicating with people and to wit, my lawyer side just said to wit. Do you know what that means, Nita?

Nita: Well, it's a conjunction a connect word, to wit, and like now you're going to explain something. Which is way better than asking me a joke. I'm in. Go ahead -- to wit --

Dr. Darrow: I forgot what I was going to say, because I was listening to you. What was I talking about, Nita? Bring us back with our senior moments.

Nita: Well, you were talking about how there on a musculoskeletal orthopedic level, there's nothing really that you could not inject.

Dr. Darrow: Well, there are some things I won't inject, I'm not going to inject anything. But I do the entire body. I think I was talking about -- about how pretty you are today, Nita.

Nita: Oh, yeah, right.

Dr. Darrow: Which, by the way, are you offended by that?

Nita: No. I just avoid you.

Dr. Darrow: You never know, do you?

Nita: I would have recalled that.

Dr. Darrow: Well, Nita, it's punishment time, you ready? What do you --

Nita: I think we should give the phone number again, first, okay?

Dr. Darrow: All right.

Nita: Okay.

Dr. Darrow: The number to the studio to talk to us live -- I'm having such a good time -- is 866-870-5752, 866-870-5752. And when patients -- when people come into the office for treatment or for an exam. They always say, how come it's so much fun in here? It doesn't seem like a doctor's office; do you know why? Because I need to have a good time. And so my staff does too. And we really have a good time.

So Nita, what do you call a sad strawberry?

Nita: Limp

Dr. Darrow: No. A blueberry.

Nita: Oh my God, that's a good one. That's a good one.

Dr. Darrow: I got more.

Nita: I can't wait.

Dr. Darrow: And if you don't laugh, I'm going to keep going. There you go, a fake laugh.

Nita: Oh, my God, that's so funny.

Dr. Darrow: You know, fake laughter does work good, because it makes you happy, and you start really laughing.

All right. So why are pirates called pirates?

Nita: Because the rates of the pi have gone high.

Dr. Darrow: They just arrrrrgh.

Nita: Oh -- oh -- oh -- oh -- oh -- oh... Okay.

Dr. Darrow: I got one even you'll get, Nita, ready?

Nita: Okay.

Dr. Darrow: How do you organize a space party?

Nita: You just invite a bunch of people.

Dr. Darrow: You plan it.

Nita: Oh gosh, that's really a good one.

Dr. Darrow: You're fake laughing, Nita.

Nita: No. That really was funny.

Dr. Darrow: All right. Why do cows read the most?

Nita: Okay. Say that once again I couldn't hear it.

Dr. Darrow: Actually, it's what do cows read the most?

Nita: What do they read, r-e-a-d?

Dr. Darrow: Yeah.

Nita: Newspapers.

Dr. Darrow: Cattle logs.

Nita: Oh, oh, I should have got that one -- I'm a catalogaholic.

Dr. Darrow: By the way, these jokes are not my fault. My patients --

Nita: Yeah, I know your patients bring them in. Maybe your patients don't like me.

Dr. Darrow: All right. Nita, we're going to go to a question now.

Nita: Okay.

Dr. Darrow: And take you off the hot seat.

Nita: Hot seat.

Dr. Darrow: Yeah, no more hot seat for Nita. Maybe later, but guess what if you call in, I won't even have to ask her anything else.

Nita: There you go.

Dr. Darrow: You ready, Nita.

Nita: Sure.

Dr. Darrow: I'm going to go to some questions, real questions. All right, so how do I get there? Let's see, let's see where are my questions hidden? They're right over here, okay.

So this is a statement -- avoiding two hip replacements and neuropathy. Let's see what this person says.

I have serious issues, lower back, left side, with major neuropathy. I heard you talk about a ligament sprain, and I am begging to think that could be the case, but of course you need to do your thing. I'm very limited with funds, and I work hard, but now I'm getting

limited, and wonder if you have any solutions, so I could come to see you. Let me know, and thanks, I listen to your show all the time, but I'm usually working and not able to call in.

Yeah, we get that a lot. We get people who come into the office, and say I listened to your show for 20 years, I'm sorry, I didn't call in, but I'm on the road or whatever when it's happening, or I'm at work.

We love your calls, call us. Anyway, so this is sort of a mish-mash question, I don't have a lot of answers to, because I don't know the answers until I touch the person's body and move them and examine them and see what's going on.

So serious low back pain, okay. That normally is from the iliolumbar ligaments that are sprained where they attach to the L4-5 spinous process and then attach to the pelvis, okay. And if you want to get terminology straight on this stuff, go to Google. I'm going to give out some words, go look them up, iliolumbar ligament okay. L4-5 spinous process, and then the person says they have left side with major neuropathy.

Now, I'm not sure what that means, because that's an overused term, neuropathy. Sometimes doctors will say anything that hurts is a neuropathy, but it isn't, and so I have to do my Sherlock Darrow routine, and find out what's really going on.

Many things in the body that cause pain are ligament sprains or tendon sprains, or what we call an enthesopathy, Nita's favorite word.

Nita: Yes, it is.

Dr. Darrow: And if you have an enthesopathy, if you get a surgery, you just blew it, okay. And that's what a lot of surgeries are being done for, and they don't fix the problem, because it's only an enthesopathy or a sprain that's causing the pain, not the spinal stenosis, not the herniated disk, not the meniscal tears, not all of these things. Not the rotator cuff tears, not the labral tears. You can have those, and not have any pain. How do I know?

Because I read studies about it all the time. Doctors do studies on people that have no pain, and guess what they find. All that stuff. Don't get suckered into getting a surgery, because you have a diagnosis. Most of the things I treat, other doctors don't even know what they are. They missed the boat. I'm not saying I'm smarter. I'm just trained differently, okay.

So I always say to people, if you want to get rid of your pain, musculoskeletal pain, it's good to see a surgeon, and it's bad to get a surgery, and you need to see someone, you need to see a doctor who does regenerative medicine with platelets and stem cells, that simple. Who are you going to get a surgery, which is a major deal that people get infected from and sometimes die. I've seen it, I've been there right at the table. And it's sad, but it does happen, and sometimes there's no need to ever have the surgery. Find out, do your due diligence, do your homework. Go to several doctors but don't go to the same type of doctor, because you'll probably get the same type of a diagnosis. And it can often be wrong.

So let me see what's going on here. Here is a bone-on-bone shoulder. That's probably nonsense, but let's see what the person has to say.

Dear Dr. Darrow. I'm interested in your practice. I have a bone-on-bone shoulder issue. I've done a little research and understand this treatment is fairly new, meaning regenerative medicine. No, it's not, it's been around for 125 years, it just wasn't called regenerative medicine. There are studies going back to Europe, in the last 1800s of doctors doing this work.

It became very popular in the United States in the early 1900s. And Hemwall and Hackett are two doctors that were doing tons of it in Chicago in the 30s and were very successful. And then it kind of fell out. I don't know why. No one had interest in it. Then it kind of perked up in the 80s and now it's all over the place. You can find doctors doing this all over the country.

But be careful, if they're not trained well, and they're not doing it every day, don't go to that doctor, go to someone who does it all day long.

So anyway, bone-on-bone, let's deal with that. I haven't talked about that in this radio session here today. What does bone-on-bone mean? A whole lot of malarkey? Nita, do you know what malarkey means?

Nita:

BS.

Dr. Darrow:

Yeah, can you say "BS" on the radio, I didn't want to say it, because I thought you might beep, but yeah, a whole of BS. I get patients every day that come in. They go I've got bone-on-bone; I've got to get a joint replacement. I go, no you don't. And they go well, what do you mean? I go, the shoulder moves, sometimes you have a frozen shoulder, without any arthritis at all, bone-on-bone implies

arthritis. You can have a frozen shoulder from just tweaking your shoulder. And there's no arthritis at all, it's not bone-on-bone.

So because you can't move your shoulder, doesn't mean you have bone-on-bone. What does bone-on-bone really mean, not what doctors say, what does it really mean? It means there's zero cartilage, and you can't move it, that's bone-on-bone. Do I ever see it? Rarely, rarely, rarely. Sure, you can have some cartilage loss, and you can still move, and you're fine. And even with people that have bone-on-bone, I have been able to grow enough cartilage to help them, to reduce their pain.

So be careful what the diagnosis is. Be careful of the terminology that a doctor gives you. When I hear bone-on-bone, what I'm hearing is -- how can I put it, getting slimmed by a doctor. Do you know what that means, Nita, getting slimmed?

Nita: Yeah, like being conned kind of.

Dr. Darrow: Yeah, kind of like being conned. I'm not saying the doctor is trying to con you, but their culture is like that. Now, I had the same training. Why is it that I believe differently? Because I had a shoulder surgery in medical school, that made me worse. That opened up my eyes. It made me a lot worse.

I found out later, when I injected myself and it healed, that I never needed that surgery. And to wit, what happened to me? My entire arm was swollen after the surgery with fluid. And I had a high fever. I never needed that. Four years later of misery, I learned about regenerative medicine, and I injected my own shoulder. I woke up the next morning, completely pain free with full range of motion. Was it a miracle? To me it was. And it trained me, that I've got to start doing this on my patients, rather than sending them to surgeons or medicating them or things like that.

I do send patients to doctors for a second opinion, because I want them to have informed consent, meaning they should know every possibility and if they're that patient that wants a surgery, they should get it. Oh, I remember what my "to wit" was, the first time now.

Nita: Okay. Go for it.

Dr. Darrow: I get a lot of patients who come in -- oh, with ACL ruptures, and they don't need a surgery. We drain out the blood under ultrasound guidance, they heal up, we do some stem cells and they do fine.

God bless you, Nita Vallens and Alex, and Suzette and the whole crew --

Nita: And Spencer.

Dr. Darrow: If you want to reach me at the office, the number for the office is 800-300-9300; and the website is www.jointrehab.com.

Nita: All right. See you next time.