

Living Pain Free 11/11/23

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. To speak with Dr. Darrow, call 866-870-KRLA, that's 866-870-5752. Ask for a copy of Dr. Darrow's book, Stem Cell and Platelet Therapy. Now here's Dr. Darrow with his co-host, Nita Vallens.

Nita: Hi Dr. Darrow.

Dr. Darrow: Hello, Nita Vallens, you look gorgeous today.

Nita: Oh, you're so sweet.

Dr. Darrow: Well, I just tell the truth.

Nita: Aww, so what are we going to teach our listeners today about regenerative medicine?

Dr. Darrow: Well, this has been something I've been working on for over 25 years doing regenerative medicine. They didn't use to call it that way back in the day. It used to be called Prolotherapy. And that was meaning to proliferate new tissue growth.

So what we're doing is regenerating tissue. I don't know who came up with that name, but it's a great name. We use today something much more advanced, stem cells or platelets, PRP, platelet-rich-plasma. And wherever my patients have musculoskeletal pain, injuries, arthritis, anywhere from the top of the head to the bottom of the feet are areas that I generally, can help by simple injections with cells from their body, replacing them into areas where we need to stimulate new growth.

There are still guys out there that are doctors who do mainly the old Prolotherapy, which is a concentrated sugar solution, Dextrose, which can irritate the tissue, create inflammation, and then stimulate a response in the body to sequester or draw fibroblasts, those are cells that grow collagen to the area where the injections are done. And this is done naturally in the body. Any time we

injure ourselves, when we get swollen or inflamed, God created a nice system for healing. So when people sprain their ankles, they don't run to get a surgery, right? They just let it heal, and it can be very painful, but they let it heal.

And what we're doing is a similar reproduction of the natural system of creating inflammation, that's the old style, the Prolotherapy. Now, with using stem cells or PRP, platelet-rich-plasma, we still create the inflammation, so people get a little bit stiff afterwards, but in addition to that, these cells that we're putting in actually stimulate new tissue to grow and create areas of new tissue.

And that can be anywhere around the body in the joints, the ligaments, the tendons, the cartilage, yes, even though I fight with my surgeon buddies, I love them, because they do the hardest work in medicine, but I don't like the surgeries they're doing that I don't think should be done anymore.

I think we have much advanced therapies today that are much more conservative. It's very rare that anybody gets hurt from getting injections, but it's really common that people get hurt from surgeries. It happened to me on my shoulder when I was a med student.

All of you listeners out there know my story, fourth year med school, I was doing orthopedic surgery and I injured my shoulder weightlifting. And instead of just letting it heal, I had my boss, what is his last name, I remember his first name was Gerald, I can't remember his last name, my God, it's so many years ago. A great guy. I used to go into surgery with him all the time.

So he operated on my shoulder right away, and it just came out bad. It was swollen, my whole arm was full of fluid. I had a high fever, I was terrified. And I had four years of misery after that, until I learned about Prolotherapy back in the day. I injected my own shoulder, the next morning I woke up completely pain free with full range of motion.

So I'm going to give out the phone number. We love to get your calls in here today. And we love our callers. So if you want to talk to me live right now, and ask questions about your body, whatever hurts, or your friends or family, Nita, you're a paper shuffler today.

Nita: Yes.

Dr. Darrow: The phone number to the studio is 866-870-5752, I'm going to repeat it slowly for you, grab your pen, write it down. If you're

driving and you're hearing this, pull over to the side of the road, take off your Bluetooth so we can hear you. Give me a call right now, the phone number is 866-870-5752. And for anyone who calls in, I will mail them, postage free, a copy of my book, Stem Cell and Platelet Therapy, Regenerate Don't Operate. It's got the forward by the lovely Suzanne Somers, God bless her, she's in the heavens now.

Nita:

So sad.

Dr. Darrow:

Yeah, we're very sorry to see Suzanne go, she was one of the greatest proponents of natural medicine that has been on this planet. And she has helped so many people. And she saved so many people from horrific outcomes with – you know, I'm going to call the modern type of medicines, instead of traditional types that help people naturally.

And this book has I think about 250 studies on Prolotherapy, on stem cell therapy, on PRP platelet-rich-plasma, and these studies show why surgery is not the answer anymore. Yes, we do need surgery for terrible things that happen, if you break a bone, and the bone's sticking out through the skin, you'd better get to a surgeon. But if you've got a meniscal tear in your knee or a rotator cuff tear in your shoulder, neck pain, back pain, surgery is the very last option in most cases, and I get terrible cases that come in every day, new patients that have failed surgeries, where they got worse because of the surgery.

I've had people come in that have had three surgeries. And they came in saying, should they get a fourth? And my answer is a pretty, pretty responsive of please don't do the surgery. Let's try to help you naturally, simple injections, you walk in, you get injected, you walk out.

So I'm going to give out the phone number again, call me now, we can answer your questions, 866-870-5752 and you can call the office, you get a free consult with my staff at 800-300-9300, that's my office number, 800-300-9300. And if you want to watch these procedures, you can see videos of them on my website, write this down www.jointrehab.com that's www.jointrehab.com. Every page on that website has a spot to email me, and I get to every email every day.

And I respond quickly. And if there's things we missed on the show that we didn't talk about and you want to email it, or if you're too shy to call in, go to jointrehab.com, that's the website, and you'll see tons and tons of articles and information about how PRP and stem cells work. And how surgery can fail you.

And look I'm not saying every surgery's a failure, but there's way too many that are, and why go through something that's invasive and dangerous when you don't have to anymore. This is to me the way to heal. So that's up to you, how you want to do it. And there are some people that just love getting surgeries. I don't – I try to talk them out of it, but you know, I can't talk everybody out of everything. And it's the old story of Galileo. Nita, do you remember Galileo in 1663?

Nita: Yes, I was there.

Dr. Darrow: You were probably there, and you reincarnated back again, because you didn't get it all. So he was an astronomer, and he said the Earth is round, when everyone else said the Earth is flat. Do you know what they threatened to do him?

Nita: Cut his head off.

Dr. Darrow: Well, that would have been the last part of it, but yeah, inquisition. He was allowed to say, it upset the – the culture of what science was at that time. And they didn't want to be upset. So yeah, they threatened to torture and kill him. And he had to recant, I guess it was for a while. I don't know what happened later, but it's the same thing with medicine. You know medicine is diehard dinosaurs to me.

It's very hard, very difficult to get people to change, to get doctors to change. And I've been on the forefront of regenerative medicine for over 25 years, people say I'm the granddaddy of it. I'm not really, because there were guys doing it back in 1900. It's just that I may be the guy who's done the most in present time and gotten the word out. I get people who email me from all over the world every day. And I answer all those emails.

You can email me too, go to the website, www.jointrehab.com. And Nita and I are looking for your calls right now.

Nita: And we have Theresa.

Dr. Darrow: Okay. Let me give out the phone number once more, at 866-870-5752. Theresa, Dr. Marc Darrow, God bless you for calling us up and getting the show rolling. We love our callers. And I understand that you have hip joint pain; is that correct?

Nita: Theresa, are you there? Theresa?

Dr. Darrow: Theresa, don't be shy. Theresa, are you with us. Well, Theresa, you can call us back if somehow you got disconnected, and you can get

back into this later. The phone number to reconnect with us 866-870-5752, you can talk to me live. I see another caller coming in.

Oh, that's Theresa. Her call was lost.

Nita: Okay.

Dr. Darrow: So Theresa, can you hear me now?

Theresa: Oh, sorry, so sorry, yes.

Dr. Darrow: No problem.

Theresa: I can hear you.

Dr. Darrow: And don't feel bad if you have to yell at us, so we can hear you. We love hearing you.

Theresa: Okay, no problem.

Dr. Darrow: So I understand, you told the call screener that you have hip joint pain. And who told you, you have hip joint pain.

Theresa: Well, I've been going to the doctor for this pain that's kind of intermittent, so I've had a couple of MRIs and you know the doctors, they're not into the preventative stuff, so what I was told is it's more degenerative and over use.

Dr. Darrow: Okay.

Theresa: Which I don't – I mean, I try to walk at least three times a week, so I don't really think it's overuse, it's just I don't know what. But I'm interested in knowing about stem cells for more preventive and to keep me mobile longer, preventing any surgeries.

Dr. Darrow: Okay. So I'm glad that you're looking the same way I look, we have parallel views here of avoiding surgery and healing naturally.

Now, the most important thing I have to tell you is this, just because someone told you, you have some degeneration in your hip, because they looked at an MRI, does not mean that your pain is coming from that joint.

Theresa: Um-hmm.

Dr. Darrow: Is what I'm saying registering. I know people go, what?

Theresa: Yes, well, because I've done a lot of research, there's so many nerves that run through the back out towards down the hip and the leg and

so forth. Because my pain actually sometimes also, and I don't know if it's related, wakes me up at night, because I'm a side sleeper, and my hip hurts, and it expands down my anterior medial thigh.

Dr. Darrow: Okay. First of all, on the radio I can't examine you. And the most important thing is to do an examination. I don't really give a hoot what your MRI says.

Theresa: Okay.

Dr. Darrow: I know that goes against the community of medicine, the culture of medicine. And you know, we're trained, I went to UCLA for my residency, we're trained, get that MRI, get that x-ray, right?

Theresa: Right.

Dr. Darrow: And what I found is they weren't accurate for finding where the pain generator was. So I'm like my grandfather who was born in the 1800s, who was a doctor. He didn't have MRIs. What did he do? He touched the body to find out what was going on. I do the same thing. It's not like I'm psychic, or anything. Maybe I am. I know I'm very intuitive. And touching the body and moving it around will tell me in most cases where pain is coming from, all right?

Theresa: Okay.

Dr. Darrow: So be careful. Be careful not to jump –

Theresa: I want to tell you I'm on my third mattress, also I mean because it's – it seems, I mean from going from sitting to standing, it bothers me, so I have a standing desk at work, which works out great for me.

Dr. Darrow: That's great. That's wonderful.

Theresa: But then when it comes to nighttime sleeping and turning, that's where there's some issues also. So I'm not sure.

Dr. Darrow: Okay. Okay. Let me ask you a personal question. Well, let me talk a little bit here, because I've got a lot of information. I've kind of heard your story, and thank you very much, I'm grateful for that.

I'm going to ask you a couple pointed questions. Are you overweight?

Theresa: Yes.

Dr. Darrow: Okay. So when you said it's that part of your thigh, anterior lateral thigh, I think is what you said, there is a nerve that comes down from your abdomen, right across the groin, which is called the lateral femoral cutaneous nerve, all right. Write it down, because you're good at looking stuff up, lateral femoral cutaneous nerve.

Theresa: But it's more medial, actually.

Dr. Darrow: I want you to look it up, I'm not going to tell you what's going on over the radio. I'm just giving you ideas.

Theresa: Okay.

Dr. Darrow: Look that up and see if you think that applies to you. If it does it's nonsurgical thing right off the bat. Number two, I've got to do range of motion of your hips, and see you walk, and see if it's the joint at all that involved. And it probably is not. Many, many, many, many people have arthritis and have no pain, okay.

Theresa: Right.

Dr. Darrow: And I see people ready for hip surgeries all the time, and I examine them, and I go your pain is not coming from your hip joint, so why are you going to amputate.

Theresa: Right.

Dr. Darrow: And they go well, I've seen three or four surgeons. They all say the same thing, they looked at the MRI or the x-ray and they said I needed a joint replacement. I go well you don't. It has nothing to do with your joint. Okay. There's a lot of stuff in that neighborhood that can be a pain generator.

It can be one of the attachments to the greater trochanter, okay, that's on the side of the femur, which is the ball that kind of sticks out. Thin people can feel it on themselves. If you have a lot of cushion on it, you can't feel it. And there's 14 muscle attachments to that. All right?

Theresa: Wow.

Dr. Darrow: It could be any one of those.

Theresa: Okay.

Dr. Darrow: So there's just tons of different things that are possible. Don't get snookered by traditional doctors who just look at an x-ray or an MRI to tell you what's going on.

Theresa: Okay.

Dr. Darrow: I'm not saying not to get those. People come in, who have heard me on the radio, they go, I didn't get an MRI, because you think they're bad. I don't think they're bad, I think they're great. But that's not how you diagnose.

And I'll tell you what's happened a few times, is I have gotten an x-ray or MRI and found cancer.

Theresa: Right.

Dr. Darrow: So I do like to get them. Cancer can cause pain too, right?

Theresa: Right. Okay.

Dr. Darrow: So I like to get those images. Once in a while you find a fluky thing like that. So you want to check everything out. I like to do the traditional format of medicine. That's how I was trained at UCLA. But then I like to go a lot of steps further. I want to find out where the pain is being generated from.

Theresa: And then, I'm just remembering but I kind of blocked it out. They told me it be early spondylitis.

Dr. Darrow: Nah. I don't think so.

Theresa: I don't think so either. All right.

Dr. Darrow: By the way, spondylitis just means arthritis in the back. I don't think that's what's going on here. But again, I don't know until I examine you. So I'm going to give you the phone number to the office, it's 800-300-9300, come in for a consult, let's check it out. I can probably tell you in two minutes what's going on.

Theresa: Okay, sounds good to me.

Dr. Darrow: We're going to look for the pain generator.

Theresa: Okay.

Dr. Darrow: All right.

Theresa: Thank you.

Dr. Darrow: And if you have more questions, just call the office at 800-300-9300, the staff will give you a free consult right over the phone, also, and give you more information. And then you can go to the

website, www.jointrehab.com and watch videos of me doing hips. And areas surrounding the hip.

Theresa: I got that already. I'm going to check that out.

Dr. Darrow: All right. And we're going to send you a free copy of my book, Stem Cell and Platelet Therapy, Regenerate Don't Operate. I'll pay the postage, and then you can read more about what these procedures are like, and how to save yourself from a surgery. I don't want you getting a surgery, unless you need it. And from what you're telling me, you do not need a surgery.

Theresa: Perfect. Thank you. I appreciate it.

Dr. Darrow: God bless you, it's nice talking to you, Theresa.

Theresa: Thank you, doctor.

Nita: Thank you, Theresa.

Dr. Darrow: All right. So we're going to Antoinette about her knees, this is Dr. Marc Darrow. The show is Living Pain Free. And our host is Nita Vallens. And thank you all for listening. And thank you Nita, for being a great host and everybody else.

Nita: You're welcome.

Dr. Darrow: Are you guys talking?

Nita: I just said, you're welcome.

Dr. Darrow: Okay. I hear background noise.

Nita: Oh, no. There just me.

Dr. Darrow: Antoinette, Dr. Marc Darrow. Your knees, what's going on?

Antoinette: Yes. I've been having a problem with my knee for about five years.

Dr. Darrow: Which knee is it.

Antoinette: I've talked to an orthopedic specialist, and I've been taking cortisone shots for five years, every three months.

Dr. Darrow: Okay.

Antoinette: And I ended up not being able to walk in July of last year in the hospital.

Dr. Darrow: Okay.

Antoinette: But I managed to get home without the knee surgery, or any other – other than the cortisone shots. I’m wondering what to do, and how I should proceed. Should I take stem cells, or should I – what should I do?

Dr. Darrow: Well, I’m glad you asked.

Antoinette: Because it’s not leaving.

Dr. Darrow: Okay. I’m glad you asked. Number one, I want everybody who is listening, including you Antoinette to get to a computer and put in the words “cortisone” and then the next word “cartilage”. You’ll never have another cortisone shot.

Antoinette: Correct. That’s what I don’t want to have now.

Dr. Darrow: Because most likely if you’ve been getting cortisone every three months, you have barely any, if any, cartilage left in your knee. Because it kills it.

Antoinette: Okay.

Dr. Darrow: It dissolves it away.

Antoinette: So what can I do next?

Dr. Darrow: Well, I have to examine you. I mean, there’s no way I can tell you over the radio what’s going on with you. I’ve got to examine you. Are you overweight by chance, Antoinette?

Antoinette: No, 140.

Dr. Darrow: Beautiful.

Antoinette: 140 pounds about five-seven.

Dr. Darrow: Perfect. I love that. Did you have information from a doctor saying you have arthritis in your knees?

Antoinette: No. I’ve been having the cortisone shots which temporarily helped me to walk. But I’m still not walking the way I should.

Dr. Darrow: Okay. I don’t have an answer for you, until I examine you. And if you want to get an appointment for a consult the office at 800-300-9300. That’s 800-300-9300. The first thing we’ll do, is we’ll look with an ultrasound, inside the knee, see if you’ve got fluid there, see what’s going on. And I can tell you more definitively after I look at

the ultrasound with you there. And move your knees and touch the areas and find out what's happening.

Antoinette: Okay. If it's arthritis, then what?

Dr. Darrow: Well, we have to talk about it. But I mean the treatments I do are stem cells and PRP. That's to help regrow cartilage, if it's in the knee.

Antoinette: Okay. Do you think that repair would an avenue to exchange.

Dr. Darrow: Well, to me repair is a lot better than surgery, where you're taking things out. Now, typically what happens, I don't know if this is your case, Antoinette, if you have what a doctor calls end stage arthritis. That's to them, that's not to me. I don't believe in that.

But traditional doctors use that term all the time with my patients. They go you've got bone-on-bone, you've got end stage arthritis, let's just keep injecting you with steroids, it will kill the cartilage, but who cares, because we're going to amputate the joint and put in a fake joint. Well, if that's the path you want, keep getting steroid shots. It's not the path I want.

Antoinette: Well, that's what to stop, to start with stem cell, would that – if you do diagnose it, that it's possible, would it better to get off the steroids --

Dr. Darrow: It's always better to get off of steroids, no matter what you do. Hang with us Antoinette, we're going to a short break and then we'll let you ask some more questions. The phone number to call in is 866-870-5752.

Nita: And you're listing to Living Pain Free with Dr. Marc Darrow. And we'll be right back.

[Break]

Narrator: Whether you have pain in your back or joints, surgery may not be the answer. Instead of the dangers involved in cutting out tissue, consider healing and rejuvenating the area with stem cells, platelet-rich plasma or Prolotherapy, the treatments that are available to professional athletes are now available for you. Watch the videos at jointrehab.com or call the Darrow Wellness Institute at 800-300-9300, 800-300-9300, that's 800-300-9300.

Nita: Welcome back to Living Pain Free with Dr. Marc Darrow. We're taking your calls at 866-870-5752. I'm your host, Nita Vallens and right now we're speaking with Antoinette.

Dr. Darrow: Antoinette, Dr. Marc Darrow, hang with us here for a second, I'm going to give out the phone number again, so we can get some more callers. We love our callers. 866-870-5752. When you call, we'll send you out a free copy of my book, which is Stem Cell and Platelet Therapy, Regenerate Don't Operate. It's a 200-page book, 250 studies on how platelets and stem cells help to heal the body, and how surgery can hurt the body.

So I was just looking at this book at the break. And I was talking – in the beginning it's got an introduction or a foreword about my grandfather Edda who was a doctor born in the 1800s, and how I was forced by my mom to spend time with him when I was a kid. Because she knew I was going to be a doctor. And I knew I was going to be a doctor.

But I always would rather be playing baseball. So interesting thing about my grandfather, is he had many mentors, and one of them Henry David Thoreau, I'm writing about this in my book, and I'm reading it here. And I wrote one of his mentors, and his name was Ely, but he called himself Edda, which was the book of wisdom of the Vikings. And so he named himself Edda. We called him Edda.

And one of his mentors say, I'm reading this, if a man does not keep pace with his companions, perhaps it is because he hears a different drummer. Let him step to the music which he hears, however measured or far away.

Nita, do you remember who that was?

Nita: I don't.

Dr. Darrow: Do you Waldon's Pond?

Nita: Oh, yes.

Dr. Darrow: Henry David Thoreau.

Nita: Wow/

Dr. Darrow: Yeah, so my grandfather, Edda, loved Henry David Thoreau, and his teacher, Emerson, remember Emerson who wrote all the essays?

Nita: Yes.

Dr. Darrow: So I had very early teachings from a very wise man, my grandfather, about not following the herd. Always do what you think is right, even if it goes against what other people think. And that's how I've been in medicine. I was almost thrown out of medical school

because of the way I thought. I was threatened all the time. I didn't like chemotherapy for one thing. I thought, you know, healing cancer is possible to do it naturally. And I was told to shut up, or I'd be in trouble. And there were a lot of things like that going on with me, and I had to kind of keep my head up and down, at the same time. I wasn't going to shut up. Because when I went to med school, I started at the age of 41. I had been a lawyer for 15 years, and I had a big mouth.

And it was hard for me to shut up the way they wanted me to. And I always followed teachers in medicine, who did things a little bit different, who did things naturally. Even though at the time, I wanted to be a surgeon, and it wasn't until I had a bad shoulder surgery that I jumped ship and got into, you know, more of the natural medicine.

So we have to be careful. I'm not here to preach about what anyone should do, because everybody has to follow their own – you know, the beat of their own drummer. And for medicine, I choose what I consider to be the high ground, which is more of natural healing and I don't like, you know, just to be honest, I don't like surgery very much when it comes to orthopedics, unless it's really necessary. And I find that about 99 percent of the surgeries that I see done in orthopedics in my humble opinion should not be done, because we have ways to heal now, which is called regenerative medicine. And unfortunately orthopedic surgeons don't believe in it, but I tell them when I talk to them, and these are my friends.

I go, well I don't believe in surgery. And then we have a little discussion about them hurting people, and them saying what I do doesn't work, and I got how do you know it doesn't work. And they go, well I tried it once. And these treatments of stem cells and platelets, you know a lot of times they have to be done multiple times, we're growing tissue, okay.

It's not like this is definitive, I'm going in at Friday morning, at 7:30 for a surgery, and it's over. And guess what, people, I get a lot of the failures where it's not over after the surgery. The misery begins after the surgery. So be careful. Don't get a surgery you don't need. Don't get talked into it. Get on the internet. Read about surgery. Read about regenerative medicine.

And if you call up, we have a bunch of callers here waiting, we're going to send you a book that I wrote called Stem Cell and Platelet Therapy, Regenerate Don't Operate. And I will pay the postage too. It's got a foreword by Suzanne Summer, God bless her. And Antoinette I appreciate you so much. Antoinette give us a call at the office, you get a free consult by my staff at 800-300-9300.

And we're going to go onto Don, who's also got hip issues.

Don:

Hello.

Dr. Darrow:

So Don tell me about your hip, Dr. Marc Darrow here.

Don:

Yeah, they said I have neurosis of the femur.

Dr. Darrow:

Avascular necrosis?

Don:

Yes.

Dr. Darrow:

Okay.

Don:

The femur.

Dr. Darrow:

Yeah, I hear you. Are you having pain?

Nita:

Don, are you driving? Can you hear us?

Don:

Yeah, let me get you off the -- yeah, I think I've said enough.

Dr. Darrow:

Yeah, it's better if you pull off the side of the road, and focus and get off the Bluetooth. Anyway, what I'm thinking you're saying that you were told you have avascular necrosis of the femur, is that correct?

Don:

Yeah, both femurs.

Dr. Darrow:

Both sides, okay. Are you talking about the actual hip joint itself?

Don:

No, they're not going the joint, the bone.

Dr. Darrow:

Where in the bone?

Don:

The femur.

Dr. Darrow:

Well, the femur is the long bone, it's the thigh bone, what part of it?

Don:

Well, it's the very top, the ball.

Dr. Darrow:

Okay. That's the joint.

Don:

Oh, okay.

Dr. Darrow:

I was wondering because it's very, very rare to get it along the shaft of the femur. So yeah, that's a very common situation. And depending on the stage of it, I may or may not be able to help you. And stem cells are very good for that. It can still help regenerate more cartilage. And are you able to walk?

Don: Yes.

Dr. Darrow: Okay. Are you having a lot of pain?

Don: But if I'm working and my getting up and down, I can't even sleep because the pain, it's starts hurting in my knee, my back, butt.

Dr. Darrow: Okay. I've got to examine you. You've got a lot of complex things going on there.

Don: I actually -- I sent Julia my CT and x-rays.

Dr. Darrow: Okay.

Don: And --

Dr. Darrow: I appreciate that, but like I tell every single person, I'm not going to be able to tell you anything unless I examine you. I appreciate the fact that you have CTs, or whatever it is, that shows that you have avascular necrosis which sounds like a death sentence, but I take care --

Don: I had a heart transplant in 2019. And you know they had -- you know, I couldn't get on the list, and it took so long, and by the time I got on the list, all my organs are failing. And I'm pretty sure that's when all this happened -- started, that was 2019.

Dr. Darrow: Okay. All right. Well, God bless you, man. You've been through a lot. That's a lot to go though, I'm glad you sound good, you're probably doing pretty good.

Don: So Dr. Klapper (phonetic) is saying I need a hip replacement, but I have a lot of questions to ask him. I'm scheduled for December 6th, and I'm just not sure.

Dr. Darrow: Okay. Well --

Don: I saw the Mao Clinic, they're doing I think it's called decompression, and it's like a stem cell into your femur.

Dr. Darrow: Okay.

Don: Do you guys do that?

Dr. Darrow: I'm not sure what it is you're talking about, but can I talk for a bit.

Don: They do stem cell into your femur.

Dr. Darrow: Okay. May I speak a little bit?

Don: Yeah.

Dr. Darrow: Okay. So I want you to hear this. I treat people with avascular necrosis frequently. They get better. What avascular necrosis theoretically means is that there's no blood supply to the bone. That may or may not be the case with you. And depending on the amount of damage, if there is any, I have to examine you to find out. I'm not going to tell you based on your CT scan. I look at it, and it's important, but the most important thing is your examination.

I'm not even sure that your pain, that you're talking about is even coming from your hip joint. You know we just talked to Theresa about hips, I don't know if you were on the radio listening then. And I'm not sure that her pain was coming from her hip joint at all. And I'm not sure it's coming from yours either. You can have avascular necrosis and not have any pain.

Is this registering, Don?

Don: Registering?

Dr. Darrow: Is it registering? Are you understanding what I'm saying?

Don: Yeah.

Dr. Darrow: Okay.

Don: This has been going on, like I said, maybe three or four years.

Dr. Darrow: Oh, that's fine. I'm sorry it's going on, but that doesn't change anything it's there now.

Don: Okay.

Dr. Darrow: And the most important thing for you to do is get an opinion from a doctor who is not a surgeon. You can go to 50 surgeons; they're all going to tell you the same thing most likely. You need to go to somebody else.

Don: Well, I was waiting to talk to you, after you had a look at those x-rays and scans. So it seems like the doctors look at the white part of the -- of the x-ray, and they just -- their conclusion is, you know, there's neurosis of the femur there.

Dr. Darrow: Yeah, I hear you. But I'm not agreeing based on our conversation. In my humble opinion, my friend, you need an examination. Then I can tell you what's going on. If you want to write down the number, the office number, you get a free consult with my staff, 800-300-9300. I would do that and then get an appointment, you get a

consult come on in, and let me put my hands on your legs and hips and move you around, and see what's going on.

I may agree with your surgeon. I may disagree. I don't know.

Don: Okay. Okay, yeah, I've actually called like three times.

Dr. Darrow: Okay.

Don: And I'll call again. Can I call now to make the appointment?

Dr. Darrow: Yeah, there's people answering the phones now, but yeah, make an appointment. I don't -- I'm glad you sent in your CT or whatever it is, any imaging, but I don't really care about that. I care how you are, not how your x-ray, MRI, or CT is. I see terrible images all the time. And the person doesn't have problems. All right.

Don: Okay. Okay. And my surgery is supposed to be scheduled December 6th, I already backed out of going to [inaudible]. That was supposed to happen November 7th, and I just oh, I'm just not sure.

Dr. Darrow: Well, the first thing you do is get an examination, then decide what to do.

Don: Okay.

Nita: Thank you, Don.

Dr. Darrow: And listen, I'll be honest with you man, if I think you need a surgery, a hip surgery, I'll sent you to do it. I just don't find that very commonly.

Don: Okay, Dr. Darrow.

Dr. Darrow: I mean, I can't remember the last time I sent somebody to surgery. I know I have over the past 25 years, but I can't remember the last time, it hasn't been recent.

Don: Well, that's pretty -- that's pretty amazing.

Dr. Darrow: Well, I'm not saying people haven't gotten surgery behind my back, because I don't follow up on every single person forever.

Don: Sure.

Dr. Darrow: That's their choice. And I'm honest with people. If I think they need a surgery, I'm going to tell them. And by the way, your

surgeon's a good surgeon. He does probably the most of anybody in Los Angeles.

Don: Well, it was either [inaudible], and you know he's filling in [inaudible] and that's all he does these days.

Dr. Darrow: Yeah. At least, if you get a surgery, you're going to good guys. There's another great one I love in Santa Monica name Yune. He's very, very good. And these guys do these all day long. So they're the guys to go to if you're going to get the surgery.

Don: Okay.

Dr. Darrow: All right, man. God bless you, it's a pleasure talking to you Don.

Don: Do you think I could see you before December 6th?

Dr. Darrow: I'll get you in Monday morning, if you want. I don't care how busy I am.

Don: Okay. Okay, that would be great.

Nita: Thank you, Don.

Dr. Darrow: Actually, I'm going to look at my calendar right now, because I'm in front of the computer and I'll see what available.

Nita: Well, that's a good idea.

Dr. Darrow: Isn't that fun? Monday, oh we're busy, but who cares, we've got to take care of this guy. Don, do you want to come in, in the afternoon on Monday?

Don: Sure.

Dr. Darrow: Okay. How about 2:30 Monday.

Don: I have a video of a conference with Dr. Klapper, because I had all these questions to ask him.

Dr. Darrow: Okay. Well, then do that. Yeah, what time are you available Monday?

Don: I could come in earlier or later.

Dr. Darrow: All right. How about 11:00?

Don: What time?

Dr. Darrow: 11:00.

Don: Yeah.

Dr. Darrow: All right. Man, we'll see you then.

Don: Oh, okay, great. Thank you, Dr. Darrow.

Dr. Darrow: God bless you.

Nita: Thanks, Don. That's great.

Dr. Darrow: It actually is great that he'll see me first, and then talk to his doctor, afterwards, because he'll have more questions for the doctor, after he's done with me.

Nita: That's a good point.

Dr. Darrow: But I know -- I know the answers of the doctor, because I know the doctor, and he is a great surgeon. And I have a lot of respect for him.

Nita: That's good.

Dr. Darrow: Yeah. I'm writing this down Monday, at 11:00, Don. My staff will be mad at me, but I've got to help Don.

Nita: They'll get over it.

Dr. Darrow: They'll get over it, exactly. All right. So I want to mention a couple things. We've been discussing the musculoskeletal system, the joints, the ligaments, the tendons and cartilage regrowth, all of that with stem cells and platelets.

But we also use these treatments on the face, called the Vampire Facelift, which regrows the collagen in the face, and makes people look younger, and it is pretty amazing, I'm not into aesthetics myself, I'm just getting older and uglier, and that's fine with me.

Nita: No, you're not, not the uglier part, just the older part.

Dr. Darrow: Well, the boyish part doesn't get older, but yeah the body --

Nita: You're still 16.

Dr. Darrow: I am always 16, the puer aeternus. But we do this for the face, it's called the Vampire Facelift, it makes you look young. And we can also do it on the top of the head, if your hair is thinning. It can help regrow it. It's not going to work for somebody like Dr. Phil, or me,

that gave up their hair a long time ago, but if you're losing your hair, and you're in that stage, it works pretty well, to inject the top of the head, to regrow and stimulate the follicles to produce more hair.

So what else should we do here? I have another call coming in.

Nita: You didn't talk about what else goes on in the office yet.

Dr. Darrow: Tell me.

Nita: Well, the Vampire Facelift for one.

Dr. Darrow: That's what I just talked about Nita. You had your ears clogged.

Nita: Oh, okay, it happens.

Dr. Darrow: But just to repeat because if Nita didn't hear it and she was listening, maybe you didn't hear either.

Nita: With headphones, yet.

Dr. Darrow: The Vampire Facelift is a treatment we do using either platelets or stem cells into the face, into the skin, we numb it up, and it regrows the collagen in the face. As we get older our collagen dries out all over the body, including the face.

Anything else, Nita, that I didn't talk about that I did?

Nita: No, but we have Theresa back from earlier.

Dr. Darrow: Theresa is back?

Nita: Yes.

Dr. Darrow: Theresa, one other question. You got it. What's up?

Nita: Theresa, are you there?

Theresa: I'm back in the car, turned you back on, and I heard you talking about collagen and the hair, and that got my husband's attention. And I was wondering is that information in the free book that I'll be getting?

Dr. Darrow: Yes. Yes, there's a chapter in the back about hair regeneration.

Theresa: Oh, okay, great. And then the other question is, were you saying, because I haven't had the chance to call. If I call office, is the consultation.

Dr. Darrow: No, the phone consultation with my staff is free.

Theresa: Oh, okay. Got it.

Dr. Darrow: Yeah, for more details about the whole procedure, you know of coming in and what that's all about, call the office, you can get details on it.

Theresa: Okay, perfect.

Dr. Darrow: The website also has all that information, which is www.jointrehab.com -- yeah, bring -- drag your husband in too.

Theresa: All right, thank you.

Dr. Darrow: Grab him by the hair and drag him in.

Theresa: All right. Thank you so much.

Dr. Darrow: All right. God bless you. So I'm going to give out the phone number once more.

Nita: Sure.

Dr. Darrow: I'd love to talk to you. Anybody wants to call in, we have a couple minutes left. The phone number to talk to me live right now is 866-870-5752, Dr. Marc Darrow, I've been doing regenerative medicine for over 25 years, which is healing the body by stimulating new tissue to grow instead of cutting it out.

I was on the path to be a surgeon. I loved orthopedic surgery in my training. I did tons of it, and I found there were too many failures. And one of them was my shoulder. My boss did my shoulder and I'm not saying that it was his fault. It's just surgeries don't always work out. And then I was able to inject myself when I learned about regenerative medicine, and I healed literally overnight. I'm not telling you, that would happen for you. It often takes a few treatments -- man, I'm talking so fast, I need some water.

Nita: Do you want me to talk for a minute?

Dr. Darrow: No.

Nita: Okay.

Dr. Darrow: I can handle this, Nita.

Nita: Okey dokie.

Dr. Darrow:

If I cut out you can fill in. So I'm going to go a question right now, until we get other callers, if we do, and let's see what people have to say here.

Okay, failed meniscus surgery. Meniscus is a little cushion between the bones in the knee, between the tibia and the femur. And it's very readily torn and as we get older, athletes have it. Both my knees have medial meniscal tears. I have no pain. I run in the mountains all the time. I had a cardiac ablation I mentioned about three weeks. And so my doctor is not letting me run too fast, but I'm still sneaking out there a little bit, but I am walking everyday.

I walked, I think yesterday I walked 8,000 steps. Typically, I get in about maybe 4,000, and my knees are pain free. I have injected them, both of them, with stem cells, because I was freaking miserable for a while, I had a lot of fluid in both knees.

I did stem cells in both knees. They are healed up. The menisci look better, they're not completely healed, but the point is they don't need to be.

Okay, we're out of here. So, if you want to call my office, call right now for a free consult with my staff, 800-300-9300, and the website is www.jointrehab.com.

Nita:

And thank you, Alex, and Suzette, and stay tuned for Warren Eckstein, 11:00 to 1:00 every Saturday. Please listen to thepetshow.com. I'm Nita Vallens, we'll see you next time. -