

Hey Everyone, I'm Ron Nedd, Welcome back

Another episode of east Glendale advice givers, the podcast where each week we search for the best solutions and answers for you, from Glendale's brightest.

Today I'm going to talk to Dr Yoshi Rahm about a topic that many people are curious about, but few really understand, that's stem cell therapy. Dr Yoshi became a doctor, because of what he saw his brother go through, and he'll tell that story in this interview. He focuses on more alternative and natural approaches because that is what his patients demanded from the day he opened his doors. Then when his mother in law came down with a severe health condition which typically results in death in 2 or 3 years he immediately sought any treatment that could possibly help. He investigated everything out there and then he found out about stem cell therapy and after his investigation he decided to give it a try, the results for his mother in law were better than another other option that he could promise. So now, when its appropriate he'll offer it to patients that could benefit from it. Join me for a truly Enlightened conversation with Dr. Yoshi and gain a better understanding on stem cell therapy.

Good morning Dr Yoshi

Good morning

Pleasure to be here, I'm looking forward to this and I think a lot of the people who are interested in this topic are looking forward to hearing what you have to say.

Yeah great, I just want to give a little shout out to everyone who is going to be listening to this and my whole purpose is to educate and hopefully help someone.

(1:37) Excellent. So, lets start off with your motivation for getting into the health care field, what was it that was the driving force behind you going in this direction rather than becoming an engineer or a steal worker or an actor?

Actor sounds fun. No, I have a huge passion just for healing people- helping people heal themselves, I should say. And it comes from the fact that my younger brother, who is 3 years younger than me, he actually had spinal meningitis when he was an infant and he ended up actually becoming very very very sick, he was in a coma for about a week. He ended up having approximately 20% of his brain removed.

(2:27) For people who don't know spinal meningitis is an infection of-

The brain and/or spinal cord, but in his case, it was mainly the brain. [Ok] And he came out of the coma and he had to relearn everything that he had learn- he was an infant, so he did it well, but he also had seizures for the rest of his life. He ended up actually passing a couple of years ago, but he was able to live a quite fruitful life. Now backing up to that though, to his younger years, the surgeons had wanted him to have a shunt placed, basically that drained the CSF or Cerebral Spinal Fluid that's in the brain and place a shunt from his brain down to into his abdomen to drain the fluid because this fluid was backing up, which can cause very serious conditions, including death and the problem is when you do that in a kid, they're going to need it every time they have a growth spurt, so over the course the next couple decades that would have required a lot of surgeries. And coming back from a brain surgery is hard and so my parents were wonderful in the fact that they sought other opinions and they ended up taking him to a D.O or Doctor of Osteopathy. Who was able to drain do some manual therapy and drain that CSF

from his brain and a totally natural way. He would see my brother for once a week for a long time, but they were able to get away with not having to perform any surgeries, at all. So, I grew up kind of understanding that there were these other alternatives to conventional western allopathic medicine which we obviously need, it saved my brother's life. He needed that brain surgery, they needed to get rid of that infection and there was probably no alternative type of therapy that was going to save his life at that point in time, however after that acute or sudden sickly situation going the alternative route really served him. So, it was a great marriage between the conventional western and alternative modalities and so I grew up wanting to pursue health. And choosing to go to a D.O school and becoming a doctor of osteopathy was what I wanted to do and I actually did not apply M.D. schools, for those of you who don't know, because especially of a lot of people in California don't know, there are two types of physicians in the US and their pretty similar with a difference; M.D.'s which most people know about and then there's D.O.'s who get the same exact training that M.D.'s get, but then they also get an extra 200 hours in manual therapy. So, we have a little bit of better understanding of, I would say, the muscular-skeletal system, nervous system, as well as manual modalities that might be able to alleviate some more physical symptoms

(5:36) Ok so when you say manual, you mean spinal manipulation (Correct)

And other joints? (Yes)

(5:40) So similar to what my degree is which is a DC degree Doctor of chiropractic, except we don't get the surgical and pharmaceutical training that is obtained in medical schools or osteopathic schools (correct)

(5:55) So your kind of in between medical and chiropractic, because you're able to do what medical doctors do and you're able to do a similar thing that chiropractic does. (correct)

So that clarifies that, so what explains how you went in this direction, because of what your brother went through and what you saw as far as the help that he received from the osteopath that helped him out (exactly) (6:20) Ok, now you opened your practice how long ago?

In 2011, currently we practice integrative medicine or family physician, so there is myself and Dr Ann Kuo and we are both family physician, so we see everyone from young people, newborns, to the elderly and for all kinds of conditions. But we do practice it with an integrative aspect and so we're able to draw upon other healing modalities from chiropractors, so we won't always perform these other modalities necessarily, but we have a much better understanding than most M.D.'s do. So, we know when to refer appropriate (i.e. to a massage therapist, to a cranial psycho-therapist, to a chiropractor, to an acupuncture, etc. etc.) And we practice with functional medicine approach, which is really trying to find the root cause for diseases or medical conditions that come. I'll usually give some explain like, "you don't have arthritis because you have lack of Tylenol floating around in your system" there is a reason why you have that arthritis and so we try to figure that out.

(7:27) That's a good point because I can't remember whether it was my brother or someone else that used to always say "you don't get headaches from an aspirin deficiency" (exactly)

So that was very good and a lot of this came about because when you opened your practice in 2011, you were mentioning to me that you found out there was a lot of demand for a holistic approach from the people that were coming in.

Yes, I put my website together- because I was interested in more alternative or integrative approach or functional medicine approach- but I put my website together, really saying that and then it turned out

that 9/10 who were coming to me in the beginning of my practice, were really coming to me for that alternative or holistic view point and so I said to myself, real quickly, I better get a lot of extra training and I spent that first year or two in practice, taking tons or additional courses. So, I really went through medical school, went through internship, residency, and then I went through a crap ton of other certifications, just to gain more knowledge about how the body really works. I would say honestly, I use 5% of what I learned in medical schools and residency and most of how I practice medicine is what I gained and what I've learned since I've graduated as a resident.

(08:56) That's great and you work with Dr Morovati to some extent?

Yeah, Dr Morovati, he's a wonderful chiropractor and a wonderful person, wonderful human being as well. I just love his philosophy, he's close by. Our offices are very close to each other, about a block or two away from each other. I refer to him.

(9:09) Yes, I found about you, through Dr Morovati when I interviewed him on the podcast and it seems that you both have a similar view of how people should be treated, which is nice because it gives you someone to work with and someone close by that you can talk to, that looks at things the same way. Whereas a lot of times, your peers almost will either shun you or not quite agree with your approach or feel that you should do things just the standard conventional and that does not help at all.

Yeah and its interesting, because anyone going into the health care field typically really is there because they want to help people. But Also, we only know what we know, and we don't know what we don't know. Doctors typically if they don't know something or understand a recommendation that another health care provider suggested to a patient, the first response "well, don't do that" because we want to cover our butts, but that doesn't serve the patient. Ultimately, its always about the people walking through this door, that's who we want to serve. Sometimes I can't serve that person best, sometimes Dr. Kuo can't serve that person best. Sometimes that might be for Dr. Morovati or vice versa or for some other health care practitioner.

(10:40) Absolutely. Now what are the types of services and type of care that you've added to your practice to meet that demand that you found as far as people wanting more holistic type care?

General principal of how we practice medicine here, tends to be, sometimes we just get people that want to get their drug, their prescription, and kind of a pros vs cons conversation, that's fine if that's what the person is looking for. Most people though again, are wanting alternative approach and so generally we're going to recommend more life style modifications, working with movement, and nutrition of course is a huge piece of that. And then we're going to move on to using more natural remedies; minerals, vitamins, maybe get into herbs. And then generally move more on to the allopathic or conventional medicinal modalities. So, during the course since 2011 we've added in IV Nutrition as a possible modality to use at times, we have electromagnetic field therapy, we do prolozone therapy, which is where we inject into joints or soft tissues; Ozone homeopathic remedies, some minerals, vitamins- can be a great modality to help aches and pains. Often, in conjunction with manual therapy, sometimes not needed- really depends on the person. One of the more interesting things that we've added in recently in the last year is stem cell therapy.

(12:10) And we're going to get into detail on that, but I want to go back to the first one, which was Nutritional IV Therapy?

Is that like large doses of Vitamin C, and I think there's another called Myer's Cocktail? (Yes)

So those are the types of things that you do?

Yes, and if someone comes into us and they have a severe gut problem or they're not able to absorb the nutrients that they put in, because what we put into our hatch (i.e. mouth) is really important. Good nutrition is important, but some people are in an unfortunate circumstance where they might not be able to absorb that nutrition. So that would be one example where doing some IV Nutritional Therapies that might include high dose vitamin C, or minerals, or vitamins added in, or glutathione- which is one of the body's main anti-oxidant. It can be wonderful in that regard, maybe for someone suffering from chronic fatigue syndrome, chronic Lyme disease, there's a lot of conditions- a lot of auto-immune conditions especially, can really benefit from IV Nutrition.

Even with something like Ammonia, you don't want to mess around with Ammonia, but I've known people who have gone in and got the Vitamin C, that just helped them come out of it very quickly.

Yeah and that goes whether if you end up using an antibiotic or not, the IV Nutritional Therapies, they can help you recover a lot faster. If not if not combat that initial infection alone.

Yes, I know a lot of doctors use that and I know how valid of a therapy that is. A lot of people don't realize that they could get something like that and its very simple to do and it's not hugely expensive.

It's cost effective, that what's you want. **(Right)** You always want cost effective.

(14:14) Absolutely. Now you mentioned that you got into stem cell therapy about a year ago. So how did you get into that, because you gave the explanation of your brother's story and how that influenced your direction and going into a natural approach, an osteopathic approach. What caused you to look into stem cell therapy?

You know, it's an interesting story, I'm a physician, so I know a decent amount stem cells, but I honestly did not know that much about it a little over a year ago. That's when my mother in law, whom I totally adore- mostly because she takes care of our kids, just kidding- I actually really adore her, she was diagnosed with idiopathic pulmonary fibrosis or IPF for short, that is basically a slow scarring of the lung tissue, typically over about a 3 to 5-year period and then you suffocate to death or you get a lung transplant. Which you want to avoid organ transplants as much as possible

(15:14) I want to avoid surgeries as much as possible, even when you are mentioning about your brother- and this is a phycological thing for me, but its also a realistic thing from when my mother was in the hospital before she passed away, the risk of infection or doctor error or problems coming from being in the hospital or having surgery are very high. So, it's not just an opinion that I don't like surgeries, its realistic that those things can cause problems, so you're correct, if there is an alternative way of dealing with something that doesn't require hospitalization or surgery- it reduces a lot of risk.

Oh absolutely, its interesting, its been documented over 100,000 people die every year in the US due to doctor error, medication-prescription error, nursing error. 100,000 people is a lot of people in the US, that's approximate 2,000 people every week. So yes, our allopathic medicine has this potential to save

lives absolutely, but there's also real down side, potential down side. Its always a risk vs benefits, avoid surgery, whenever possible.

(16:37) Definitely, so you were saying that that was one of the things you were looking at as a way of helping your mother in law because of the idea of a lung transplant down the road. First, you don't know if she would be able to find them in time? A set of lungs? And the other thing is the risk involved, so continue you on what that caused you to do as far as your study and your approach.

I should mention that probably around 2015/2016 they came out with heavy duty medications, cost approximate 8,000 dollars a month for IPF and both are shown to likely prolong that typically 3 to 5-year death rate and draw it out another couple of years. A medication that would prolong life, which is great, when you got nothing else- that's wonderful. Also, of note though, its 8,000 dollars a month and non-benign medication, so they come with a list of potential side effects as well. So, what I did, I basically shut myself in my office for a week, I did all kinds of research- just looking of what we could do for IPF and I was open to anything; I would have put her in drug trials, I would have sent her to some other doctors, I would have done hocus pocus voodoo medicine. At the end of the day when you have a loved one and you just want them to live, you'll pretty much do anything within reason. It became very clear to me I had to consider stem cell therapy, for her- that it was probably going to offer her the best chance at living a longer life, a more robust life. We did intravenous stem cells, umbilical cord stem cells, that was around the middle of August 2017 and within 36 hours, she woke up and said she could breathe better than she had been able to breathe in the prior 6 months, her O2 saturations improved. Then she hit a baseline, so it did not completely reverse her situation, but we also had the previous CAT scan before the stem cell therapy and then a CAT scan at the very end in December 2017, that showed a complete stabilization of her lungs. So that was interesting, because that showed that the scarring had not progressed, which is a huge win. So yeah, it's not like she grew new lungs, which would have been lovely if that had happened, but also not realistic, but we had totally halted the progression which is incredible.

(19:35) And its better than the drugs that had come out, because those only slowed down the progression, they didn't stop it (Correct) And you weren't spending 8-9,000 dollars a month to do that.

Correct, now I should mention, and I want to be totally honest. She ended up starting one of the medications in January 2018, part our reasoning was "well, give it a try, see how you respond- if you can tolerate it, maybe you do that along with the stem cell therapy." We got a report in June, just about a full year after initial diagnosis, again lungs totally stable. Now we're continuing to do stem cells, every 3-5 months, so she's received a few rounds of it, but it's just incredible. She also had a brother who died of IPF, and he within 2 years of diagnosis {might be off on my years} he had a transplant, then a year later he died. From the lung transplant, from complications, of the lung transplant. It was either that within one year he had the diagnosis and the transplant, then one year later he died. He was looking at diagnosis to death in 2-3 years, again apologize for not knowing the specifics on that, but here my mother in law is and now it's a year later after diagnosis and she's completely stabilized. It was really after those first few weeks or first few months, where we saw that she wasn't getting worse. I said this is something I have to learn more about and have as an option for people who it makes sense to.

(12:17) Absolutely. Alright, then what is a stem cell? And why is it viewed as having so much potential as an alternative treatment as opposed to the conventional treatments?

First of all, there is a lot of stem cell therapy research going on now a days, and it's amazing- the world is going to explode in terms of stem cell therapy applications over the coming few years and I would anticipate that within 5-10 years, insurance probably will cover it because it does have such profound potential to heal, I will say, I say this to varies people but its as close to a silver bullet as I've seen in medicine, which is a very such a strong statement I don't say that lightly, but I've never seen anything else with such a truly healing potential.

What a stem cell is, when the sperm and the egg come together, they meet they basically form one cell and then they'll split. Those first few cells that double, and double and double, 2 cells, 4 cells, 8 cells, 16 cells- those are the embryonic stem cells. Those cells can literally turn into anything in the body, which makes sense, because we start as those cells and I'm sitting here in front of you and vice versa. We're this amazing intricate, human being. So embryonic stem cells, can literally turn into any cell in the body. By the time we're 9 months old or the first day we're born, we come out, and we still have some stem cells there floating around there in our umbilical cord and even the amniotic sac, but mostly in the umbilical cord. We use when we do umbilical cord stem cell therapy, we're harvesting those stem cells from the umbilical cord that would have been thrown away in the trash.

(23:10) These are.. That was a controversial thing about stem cells, several years ago people were concerned about where the umbilical cord stem cells were coming from. These are the ones that where the children are born, and they're not born by cesarean section, they're born naturally?

They are born by c-section, so they're healthy moms and healthy babies, who have been screened for all the major communicable diseases and are negative for all of those, and they are scheduled c-sections. So, there is no emergency c-sections, they are scheduled from healthy moms and healthy babies. They're not embryonic stem cells, that's a big ethical thing as well, people were worried about 'are we killing babies or abortions'. This is not embryonic stem cell therapy that we do, you can't do that in the US, its illegal. Its really this amazing product, that would have been thrown in the trash, and now we're able to use it. These stem cells that are present in the umbilical cord, those are also the mesenchymal stem cells, specifically, those are able to turn into almost any tissue in the body, especially musculoskeletal tissue.

(25:25) What are mesenchymal?

Mesenchymal, all cells are covered with proteins on the surface of their cell body, cell wall. We give a name to each one of these proteins. Mesenchymal stem cell is the name we have given to the cells with this particular protein on the surface and again, those are the work courses. These specific cells with these specific proteins on the cell wall, those are the ones that can turn into the cartilage, that can turn into the muscle, that can turn into bone. I'm going to keep going with that, there's a little bit of a misconception that the stem cells that we're injecting are doing all of the healing, they are not doing all the healing. Because it's a very small amount of stem cells that we put into the body, if you put into the joint for instance, in hope that it regenerate cartilage, well those stem cells can turn into new cartilage cells. However, it's also with all the other healing growth factors, all the other healing molecules that come along with those stem cells. Those are what able to really cause your own body to regenerate itself, which is different than injecting these cells that are just going to turn into new cartilage in this example. Its really more that we're injecting these cells into the diseased area and its causing our own body to say 'oh, we need to turn on this cartilage making ability again.' It's a beautiful system.

(26:04) So, it's a complex that's going, its like we discussed the other day about Vitamin C- Vitamin C is not ascorbic acid, Vitamin C is ascorbic acid with rooting and riboflavin and all the other things that go along with it and you find, in their naturally occurring environment; things like oranges or whatever, it has its entire complex and that is what Vitamin C is. Some people over the years have refined it down to its ascorbic acid, which isn't. Same thing with the stem cells from what you're saying, it's not just the stem cells- it's the stem cells and varies other factors that go with it that cause the type of reaction that are so positive.

Exactly, it's a beautiful example. I had mentioned the other day to you about it being it a symphony. I love the orange analogy, that you just gave with the vitamin c and I love the idea of a symphony, you don't just need one player in a symphony, you need multiple players to create that beautiful harmony, that beautiful sound. That is what the stem cell therapy really has the potential to do. These are human, natural human cells and we're putting it into the diseased area, very specifically. It's that amazing symphony that we're literally injecting to the area of the body that needs it most.

(27:40) Excellent. We're talking about the umbilical stem cells, but there are other types of stem cells too that could be used in therapy, what are those?

Great question. I think what most stem cell clinics in the US are currently using are adipose, where they get it from the fat- its like a little mini liposuction that they do, or they get it from your bone marrow- so they typically go into your hip bone or pelvic bone, pull out some bone marrow and spin it down and aspirate or suck off that little layer of stem cells. Then there's also a third one, I'm just going to throw it out there, which is PRP or Plater Rich Plasma, where you basically just go in and get a blood draw and then spin it down. We do PRP in our office, as well. There are very few stem cells that you get from PRP, its mostly the growth factors you're able to collect. You're able to get this amount of blood, spin it down, suck off just the growth factors and then reinject into the area you're hoping for regrowth. I had Dr Kuo do it for my hair- my head, so I'm hoping! We'll be seeing in 6 months or 3 months, if my little balding spot on my head, gets some new hair.

I'll be checking back to see, we may need to do another Podcast episode, if that works well. I think a lot guys will be wanting that, absolutely. {LAUGH}

There is the PRP, the fat cells or adipose and the bone marrow. Now these are good therapies, they are therapies that work you get stem cells out of those. Fat cells bring the literature over the last couple of years, looks like the fat cells are a little bit better than bone marrow stem cells, a lot of people are doing the adipose or fat tissue stem cell therapy nowadays. The issue is that- and I'm going to go back and use my mother in law as an example, she was 67 at the time (she is 68 now), if she had had- if I had sent her to some doctor to do adipose stem cell therapy, from her own fat, the issue is that those stem cells are 67 years old. As we age, not only does the stem cells quantity in our body diminish, the quality of what ever stem cells are still there- get worse. Her stem cells were 67 years, what do you think is going to perform better a 9-month-old from newborn vs a 67-year-old, it's pretty clear in the literature as well. I'm at much bigger propionate of using the umbilical stem cell cord and ultimately it came down to, I wanted to give my mother in law the very best option. It would have been so much easier for me to send her to some other doctor who has been doing this a long time, I would have loved to have done that, because it takes the burden off of me. However, again, it was very clear to me that she was probably going to have better chances of receiving umbilical stem cell, than her own.

(31:03) Absolutely, and for the adipose stem cells.. Do you go after surface layer fat or do you go through fat that surrounds the organs, is one of those better?

No yeah, they literally get it from the belly, it's like a little mini liposuction. They don't take enough for you to notice, on the down side.

(31:28) It's a good way for me to justify not exercising not so much, as I should be.

Alright, when you're doing stem cell therapy, how do you determine how is needed, how often its done and where it's going to be injected, is there specifics on that? Because I know that's developing technology and therapy, but I would assume that those things would be pretty well set at this point?

Yes, like you said it's a developing field, for sure. Most stem cell therapy in the US is done for musculoskeletal issues, so knee cartilage that is degraded or meniscus that is torn.

(32:01) Meniscus is the spongy thing in the knee?

Correct, that gives us our padding and/or in shoulders or hips as well. That's where I don't know the exact percentage, but I'm guessing 90% of stem cell therapy from musculoskeletal condition like that. Then you run into other issues that its done for which could range in almost any other situation potentially, my mother in law it was the IPF, now when you inject it into the joint or soft tissue, its going to act on that area locally, so it's a great modality because when I inject for example, its really going to stay there and do the healing there. When you inject it intravenously, like we did for my mother in law, it actually will literally go into the blood system, which supplies the whole body. Now, the first small blood vessels after intravenous injection, happen to be in the lungs. It is used intravenously more for lung conditions, than any other conditions, so it kind of worked to our favor, that's why I wanted to do it for her, try it on her at least. But after a few days of the stem cells getting lodged in the lungs, they kind of free themselves from the lungs and then they actually go all over the body. One thing I should also mention, when you do it intravenously after that first pass effect, where they get lodged in the lungs, our body sends out little SOS signals, when we have a diseased area. In a gut situation for example, where someone might be suffering from Ulcerative colides or Crone's, and I mention this because there's definitely animal studies that show this, the stem cells will literally home into that area. Because of those little SOS signals their body is sending out from the gut, the stem cells know its this amazing symphony and they know to go there. They're not going to pinky finger, because they're not needed at the pinky finger, they're going to the gut, because that's where they are called to go into action.

(34:23) Excellent, so they know there is something going on because they are getting like 'hey, over here' so they go over and visit that area?

Exactly and you asked about the quantity and that's where a lot of doctors have a lot antidotal experience, it really depends on how severe is the disease that we're going after. That's even if there's a deterioration in the knee joint, for example, if it's a very severe deterioration you're going to need more stem cells, if it's a mild deterioration you're not going to need as much. You know there's some specifics in terms the exact amount of dosing, we have a pretty good sense of how much is going to be effective, if its going to be effective. Because its an emergent field, there's no set, kind of standard guideline to follow.

(35:20) That makes sense, now we talked about pharmaceutical approaches and the fact that there are sometimes potentially very serious side effects? Have there been any side effects noted from stem cell treatment yet?

I loved that you asked that question, no is the answer. That's why I love it, its not a cheap treatment, by any stretch of the imagination, but there are no down sides to it. There's literally not one recorded down side or side effect from stem cell therapy. After you get it intravenously injected, you might feel a little bit of a hot flash that last a minute or two. Obviously, anytime you're sticking a needle into somebody, there is always the potential that you might cause a little bit an infection or little bleeding or little bruising, but that's not a side effect from the stem cells- it's a side effect from the needle. Outside of that little hot flash that you might get if you get it intravenously injected, there's no documented ill side effects, which is just incredible- I mean how many things could you say that about, even most herbs. People think of herbs being really safe, but they could cause side effects too, anything in the wrong dosage is poison. I love that question, because I can say that there's virtually a 0% chance, now in theory is there a chance, yeah maybe there's a 0001% chance.

(36:56) I would think that the only chances, I shouldn't say the only chances, I would think that some of the chances would depend on what the source of the stem cells was and how thoroughly it was checked or they were checked like if it was from another person or if it was from an infant, if they weren't checking to make sure that the mother didn't have something like- wasn't a drug addict or if she didn't have hepatitis or different things like that could get into the fluids or the cells or something that could be carried over that there is that potential. We were discussing that last time, is that it's important to make sure that when you're getting stem cell treatment, that the doctor that's doing it that their source for the stem cells, comes from a place that goes through proper protocols for checking all that stuff.

Absolutely, completely necessary, I mean we're talking about stem cells and its so important to get good quality and that includes certainly using a blood lab, because that's who collects this- it makes sense its coming from the umbilical cord. Using a lab that goes through all the rigorous guidelines that they should be going through and its FDA cleared to do what they are doing. Also, clean source absolutely necessary and the other aspect is quality- quality matters with stem cells. This is emerging market, there's money to be made in it for those selling any kind of stem cell therapy, which is not necessarily a bad thing, but a lot people- a lot companies are hopping on board and probably cutting some corners in terms of quality. You want to know as best as possible, as best as science makes possible currently is how many stem cells are there before being frozen, because that's what happens is once they spin down these stem cells they get put in liquid nitrogen and they're stored there until they are injected, or they are shipped on dry ice and then we store them on liquid nitrogen. Probably the bigger question is how many of those stem cells or what percentage of those stem cells are still alive, when we do thaw them out right before putting them in a person, that was also part of my research when I wanted to give my mother in law stem cells, I wanted only the stuff that was going to give her the best chances. So, I vetted a lot of companies, I ended up settling on one, there was another one I really liked, but these two companies I believe are head and shoulders above most other companies- and I'm not going to mention the names of them, because I might switch companies. Ultimately, all I care about is giving my patients and my mother in law the best quality and because this is an emerging field there might come up a third company that I think is going to offer a better-quality product. Ultimately, my job is to always vet these

companies, so we can give you the best bang for our buck, if we deem stem cell therapy to be appropriate.

(40:05) Absolutely. So, if someone is going to see somebody, because somebody might listen to this that doesn't live locally and that wants to take advantage of the potential that comes from stem cell therapy, if they go to see a doctor as a potential for doing that, what are the best questions they should ask to make sure they are going to get the highest quality results, not only from the doctor but the stem cells that are being used?

Ask the doctor if they know; A, where are they getting from, what blood bank are they actually getting it from. B, ask them if they have been shown data, third party data, on the viability of the stem cells after the thaw (that's probably the most important right there) C, has the blood bank been cleared by the FDA, because if they're cleared by the FDA you know they have good safety precautions, so there's that aspect and if they could give you the third party data on the post thaw viability, that's the other major aspect.

(41:18) Now could they also ask the doctor, what company he's using and then, maybe doing their own research?

Absolutely, I would highly recommend that, more knowledge is always better.

(41:31) Definitely. Because to be perfectly honest, in any emerging field a lot of times you have people jump in that aren't the most ethical, that are going for the money, that may use SUGAR WATER and call it stem cell. You want to check into things; like the doctor, whether they've had any complaints against them from the board, and how long they've been doing. Just to make sure, especially with something that's that involved. (Yes) If its somebody doing something simple, its still good to check them, but if somebody's got a serious condition they're trying to get help- you want to make sure they're getting the right kind of help (Yes to all of those) Now do you do anything differently here along with your stem cell treatment to make sure its going to get the best results possible?

Yeah, I'd like to think so. I'm huge on overall health of the body and so if someone wants to come in here and pay us for stem cell therapy, and they just want to get it done with, fine- we can do that. But what I prefer, and what I had my mother in law do, basically go through a detoxification program first, because what I want is I want her body to be as clean as it possibly can be, so that when we inject those stem cells and growth factors into her, her body is going to be able to turn around and do the healing that it needs to do. So, we really maximize it, as best as we know how, and our protocols will change over the months and years as we learn more and more on how to maximize someone's health, but it's a huge thing. Typically, for the average person we love for them to go on a 10 day or maybe even a 21-day detox, I would- this is a tall ask, but I would love to see someone do a 3 day water fast beforehand, if they could tolerate it (or even a 4 or 5 day water fast), there's some literature emerging that may suggest that could really prime the body and make it receptive to that stem cell therapy, as well as turn on your own stem cells that are already there. We all have stem cells even the oldest ones of us have stem cells, we just don't have enough often times. Then, we do add a few supplements here and there- I'm not even going to name names of what we give because that will also change over time as well, and it varies from person to person. Nobody is the same. We don't give one protocol for everyone, we don't have this pre-stem cell protocol that we just stick to, we really individualize it. But, huge fan of priming the body, again, this is what I did for my mother in law, we changed things around a lot, and I believe I

have no proof of this- but I believe that that made her stem cell therapy that much more effective. We do have proof that she's stable almost a year later, which is just incredible.

(44:32) Absolutely, and it makes a lot of sense to approach it that way. I know my brother does, when he puts people on diets for weight loss, a lot times he will have them do a liver detox before doing that, because of course the liver is what cleans the whole body and if you have a lot of junk going on in the body, it's going to adversely affect it and make it harder for your body to do any of those things like losing weight or healing itself and so on and so forth. It's a very smart approach that you have on that and you use nutrition other than with stem cell therapy as far as with your patients?

Yes, definitely I mean when we're going for optimal health and that's what we're going for with everyone who walks through the door, there's almost always A, nutritional opponent... Now some people are way more ahead of the game on that front, some people are not ahead of the game on that front. We really meet people where they're at, figure out where they're at and really work with the person because that's so important, I work with them wherever they're at from a mental state, because we can't just give orders, if I just shout off some orders, give people 10 things to do, maybe they'll do a couple of them, maybe they'll do all of them, but how long are they going to do that for. So, I'm really a big fan of individualizing treatment, meeting people where they're at and really going as far as they want to go on the healing front. Teaching them, giving them the tools.

(46:02) You're correct, trying to get somebody to do something, if they don't come to the realization them self that they need to do it, it's going to be like trying to force a kid to go to bed at night, when they want to stay up. (Yes, that's a great analogy) So, the educational aspect of things, is quite vital. It's a very smart way to approach it.

I think doctor in Latin means teacher, if I'm not mistaken **(Yes, the root of it)** That's what I view myself as a teacher to my patients or clients and the better job I do, the better you or 'they' (patient) will end up.

(46:50) Absolutely. Now I can see how busy you are, so I can imagine you aren't able to accept everyone who wants to see you as a patient, because of that you probably look for certain qualities in a perspective patient when you're deciding whether you can help them and whether you should accept them as a patient or not. What are those types of things that you need to see in a patient to make sure you're not going to be wasting your time or their time by having them come in here?

Number 1 committed person, someone who is really committed to their health. You know, there's plenty of other doctors who people could go to for this prescription or that prescription, if they just want something to hop on to for their depression, go to some other doctor. Because there's plenty of doctors, good hearted doctors who can do that for you. So, I'm really looking for people who want to be helped, that's the only thing- if they want to be helped, then we can work together.

(47:46) Well there's that aspect but there's another aspect too, which is if they're willing to be responsible for their results because you had mentioned before about somebody who is just going to come in and they're going to want you to do XY&Z, you won't get the best results if they think you're going to make the change in them, if they're not willing to make the changes themselves.

Totally true. I mean I still have patients that have been with me a long time- I have a lot of patients who have been with me since 2011, but some of them are so into and so proactive and willing to be open,

and willing learn, and willing to try new things and we can learn together. This is life, even you hit-kind of what you think optimal health is going to be, at some point you're probably going to take a step back and you're going to need more health. And I have patients who put minimal amounts of effort and you know, that's where they're at and I can't force the kid to go to sleep necessarily and I can't force people to do certain things. You are correct, I am looking for people to be committed but also be open to that process.

(48:48) Excellent. Now if somebody would like to learn more about you or your clinic or the services that you offer, where could they find that info?

Yes, check us out dryoshi.com. It's probably the best one, I also have another website Naturalkneetherapy.com, mainly for prolozone, PRP, stem cells for joints. But most of our good info is on dryoshi.com, you can even sign up for free 21-day email that I have put together. Its pretty much just me sitting there, I give you couple minutes of honest good health suggestions and the way frame it is how I love for every new patient to go through and start doing those or at least be familiar with those before they even come to us, because I think the 21 items can get the majority of people a majority better and I can keep you from you to even needing to come see us, fantastic, I've served you and I've served other people, that really does warm my heart. Feel free to go on there and sign up for that.

Good, well I'll put the links for those in the podcast notes. If somebody would like to schedule an appointment for a consultation or get questions answered, what number should they call? What are your office hours and where is your office located?

Office phone number is 818-957-6909. Our office hours are 8 to 5, Monday-Friday. We are located in North Glendale, one block away from Montrose, on Ocean Blvd.

Excellent. Is there anything else you'd like to say before we end?

No, thank you and again thank you to everyone listening to this or who will be listening to this. Thank you for investing your own time into this and thank you very much for having me on.

You're very welcome, this was wonderful information. Now before I leave I just want to take a moment to thank all of you who joined us this week, I really do appreciate the time you take to listen to this podcast and I thoroughly enjoy getting to introduce you to all the special people who agree to have a conversation with me. I hope today's guest shared some information that'll help you or someone you care about, and I will continue to do my best to bring you interesting local guest with useful advice. If you have any suggestions for guest, please email at ron@eastglendale.com. There are three things you can do to help me be able to continue to bring you interviews like this one: 1, listen to my other podcast episodes that cover topics of interest to you. 2, spread the word and share this podcast with others. 3, subscribe to the podcast. To automatically receive each new podcast episode as it comes, make sure you subscribe on iTunes, stitcher or google play, so you can continue on this journey with me, and go ahead and do that right now- so you don't forget. And if you want to leave a rating or review on iTunes or google play or send me an email, id love that too. See you next week!