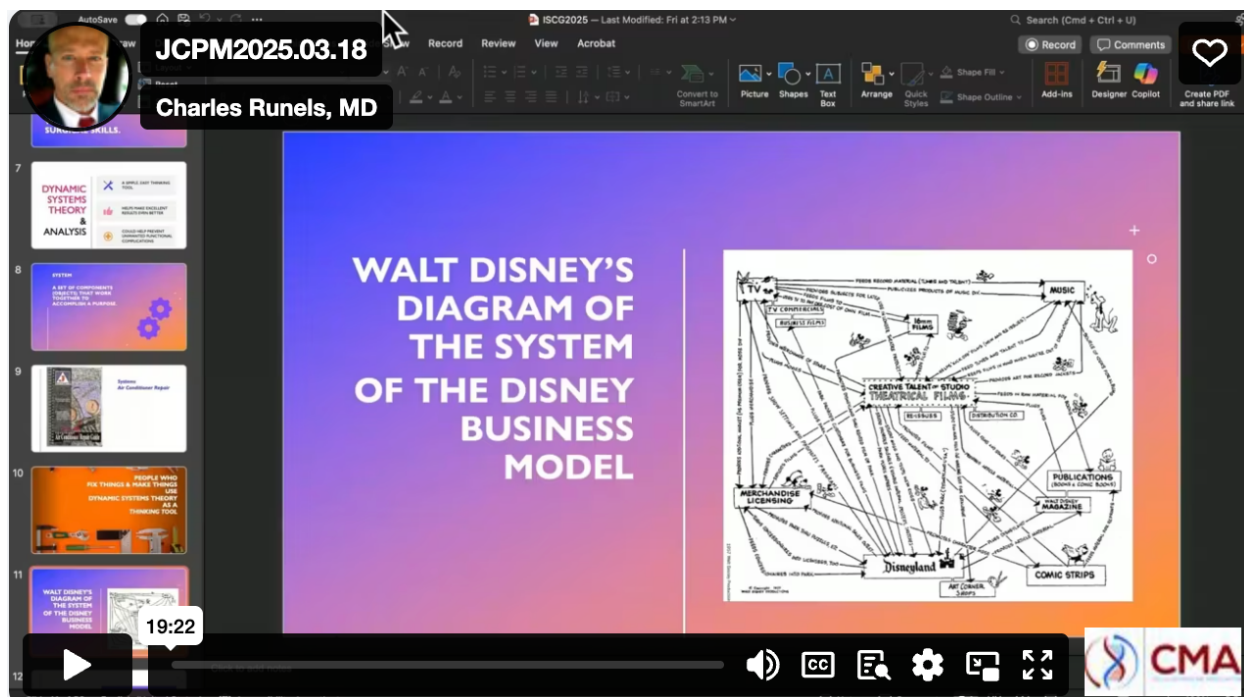


JCPM2025.03.18

The following is an edited transcript of the *Journal Club with Pearls & Marketing* (JCPM) of March 18, 2025, with Charles Runels, MD.

>> [The video of this live journal club can be seen here](#) <<



Topics Covered

- **PRP for Plantar Fasciitis: Does it Work?**
- **Which Works Best for Alopecia: Microneedling or Injection of the Scalp?**
- **Which Works Better: PRP or HA for the Knee?**
- **Systems Analysis Applied to the Female Orgasm**
- **An Email to Write**
- **References**
- **Useful Links**

**Charles Runels, MD**

Author, researcher, and inventor of the Vampire Facelift®, Orchid Shot® (O-Shot®), Priapus Shot® (P-Shot®), Priapus Toxin®, Vampire Breast Lift®, and Vampire Wing Lift®, & Clitoxin® procedures.

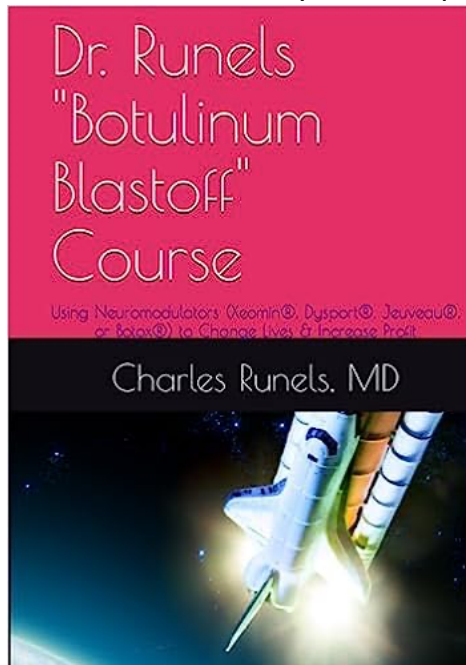
Transcript

We have some welcome research, I think, to answer some questions regarding joint injections and hair. Then I have a preview I'm presenting later this week in Fort Lauderdale at the [International Society for Cosmetic Gynecology](#). I will give you highlights of that talk relating to systems analysis and how it might affect the outcomes of your procedures, surgical and nonsurgical.

PRP for Plantar Fasciitis: Does it Work?

This first study concerns plantar fasciitis, and if you haven't learned how to treat it yet with PRP, I highly recommend you do so because it's an easy procedure.

It's not fun to receive. If you do this procedure for someone, I recommend that you have some Pro-



Nox or give them some Lortab or both because it hurts. But this is another probably a half a dozen studies now, and this one's a review, a meta-analysis that shows, yes, this is something that works.¹ For some reason your podiatrist is not likely to offer it. Not sure why, but they seldom do.

We have two people in our group who have courses about it. Karen Rea and Jeff Piccirillo have hands-on and online courses that teach you to do this. And it's a very simple thing if you're a family practitioner or primary care doctor, and you're going to see people who do this.

The other thing is, if you're running a weight loss program, which many of us do now that we have the new drugs, walking is necessary, and most of us think that's necessary to be healthy and maintain your weight. Yet, most overweight people have knee and foot problems, so this ties in beautifully with your practice, and another study shows that it works.

¹ Aleid et al., "Efficacy of Platelet-Rich Plasma versus Corticosteroid Injections in Recovery from Plantar Fasciitis."

Which Works Best for Alopecia: Microneedling or Injection of the Scalp?

Then, the next one, this is the second time we've had this study or a study evaluating this problem, and what they looked at was microneedling versus injection for alopecia.

What would you think?

I predicted years ago that injections would probably work better, but ***I was wrong***. This is the second study I know about that showed that microneedling gives thicker and increased numbers of hairs versus just injecting.²

Of course, the catch-22 is that it's difficult to microneedle the scalp if they have any hair at all.

You could argue, "Let's just shave your head, then we can microneedle everywhere, and then let it grow back."

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I remember my uncle doing that when I was a kid. He always said if you wanted good hair, you needed to shave it every now and then and let it grow back in. He did it, and it seemed to work for him. He had this little massage thing that was his hair growth program.

But unless you shave the head, it's hard to maintain positioning with the rim of the microneedling device flush against the skin because the hair interferes with it. So, usually, I wind up doing a combination of injecting and microneedling. Most of us do, but it looks like, once again, we have evidence showing that that's worth adding in.

Which Works Better: PRP or HA for the Knee?

First, they showed that PRP works better than HA for injecting the knee for osteoarthritis.

And the people who had the most pain with the injection had better results as far as pain control on follow-up.

The old saying, "Pain is gain," is true. In this case, the people who hurt the most see the best results.

And all these studies had the same almost ubiquitous request and complaint, but seldom is there an answer: when you do the meta-analysis and the review articles, it's apples to oranges because people use different methods to prepare the platelet-rich plasma. As clinicians, it's less important for us because we see the results. Our patients are happy, they're glad they gave us money, and they're happy to send their friends and family. And so, it's of less concern to me as a clinician that my PRP might be different than yours if mine is working.

If you look at the review I sent out this morning in an email about a paper we covered back in January, there was a nice review article about all the things you could do to improve your PRP with the same

² Biben et al., "Local Injection versus Topical Microneedling of Platelet-Rich Plasma for Androgenetic Alopecia."

centrifuge. Things like drawing the blood after fasting or after aerobic exercise—not even a lot of aerobic exercise—are things you could do with nutrition. It's the only nice review article I've seen on that topic.

So when you have that many variables, not just how we're injecting, how much volume, how we're activating, but how you're preparing the platelet-rich plasma and all the multitude of behavioral factors that could go on with diet and activity level around the time of the phlebotomy, it's one of those things where, because we're only 20 years in, give or take, we're still early adopters, and a lot of the details are left to be thought about. So, you truly are in a revolutionary place in medicine where most of your colleagues are still trying to figure out what PRP is or have a vague idea of it but still doubting that it's a value where the research has moved past them and now talking more about the nuances about how to best use it.

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So, for example, a few months ago, we covered a paper where one of the tertiary centers is now considering PRP standard of care for lichen sclerosus, but I don't think many gynecologists are aware of that position.³ And so it'll be another 10 years before most of your colleagues, maybe 20, are doing these things. Anyway, that's a common request and complaint in the meta-analysis, and with every one of those conclusions, it points out places where you can research if you wish to help move the science forward.

Let's see, I think that's all I had. What was this one? That's all the papers I had, and I'm still always trying to come in under 30 minutes these days. I have 18 to go. So let me briefly summarize what I intend to show at the International Society of Cosmetic Gynecology meeting this coming Friday.

Not the whole talk, although the whole talk is only about 20 minutes. But a couple of highlights, and you are family, and I want you to see what I'm showing so that you can help me think about it.

Hopefully, this will help you think about what you're doing. It's back to this idea about systems analysis. And even though these people call themselves the International Society of Cosmetic Gynecology and include quite a number of our members, they're really, on a superior, I think, wizard level when it comes to their surgical skills. And it's a misnomer because they're not like facial cosmetic surgeons that, at least in the clinic setting, are mostly dealing with making people look younger while keeping them natural, versus when they're in the ER, when they're putting faces back on.

But in the clinic elective setting, it's usually younger and natural, but not much about function. But half of their lectures or more at this meeting, which I highly recommend if you're a surgeon, they talk about function. So, if you've been in the group long, I've been thinking about how to use systems analysis because it bothers me that we have other parts of medicine that use systems analysis.

³ {Citation}

I bought this book to try to figure out how to fix my air conditioner. If you look at the title, it's called Systems Air Conditioner Repair because people who fix things know they need to think how the different components are working together. This picture has been an inspiration to me. I'd already had my business going, and I drew out what my business looked like for someone who was on a totally different level of business success. And he pointed out that Disney had a similar systems analysis of his business.

And so the components of the Disney Empire, or the major components, are listed there. It's music and merchandise and Disneyland and comic strips, but they're talking or they're working together as a system, which accomplishes more than any one of the components alone. You wouldn't sell much music without the film, and the comic strips sell the films, and the films sell Disneyland. This was before there was Disney World. And they're all selling merchandise, and the merchandise is selling back to here. And Walt Disney said he wanted his fans to be able to stand in any room of their house and turn around and see something with the Disney logo on it. That was his goal. So there was this systems approach to it. So I've read some... These are my favorite of a collection of books about systems. My two favorites are here. This one has more to do with systems medicine.

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This one is just, it's a best-seller because people recognize systems thinking helps, which is what I'm getting to. And Meadows, Dorothy Meadows, I think is her first name, she came out with four characteristics to know if you have a system versus just a pile of stuff. First, you have parts. And I'm getting how you can use this to think about your business, even your life. Do you have parts? Do the parts work together to create an effect that's more than they could do individually, and do the parts affect each other? So there's a cumulative effect, but their individual parts are communicating with individual parts, and the effects are persistent.

So here's the I I recognized body systems, and we learned this in grade school, and all of them have those characteristics. They have parts. With the endocrine system, its glands, thyroid, pituitary, etc., make hormones that maintain metabolic homeostasis. The cardiovascular system pumps blood, the parts are the heart, the blood vessels, etc., and removes waste. So they each have a system. And it's been aggravating me now for years that we have a recognized systems analysis for everything from breathing to having a bowel movement, but we don't have one for sexual arousal, which is different than reproduction.

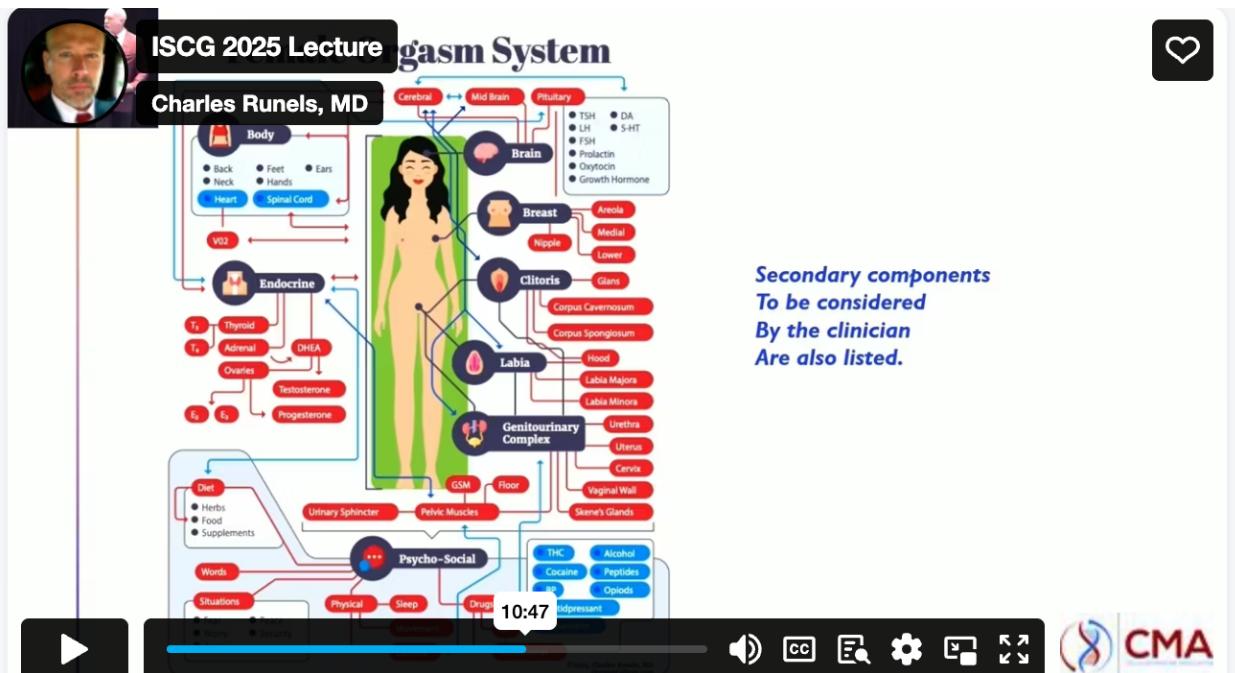
So I'll show you my... Most of you have seen it, but I recently had this redrawn. So, I'll show you the pretty version of my mock-up version. Give me a second, I'll move over to that. And when you think about your systems analysis for your life, and I would challenge you to draw out the system of your life when we're done. And I'll give you an idea of how to do that. And your life will get better if you, every now and then, draw it out as a system, as will your business. So this is an example of a system where people come from wherever they come from and there's a birth rate determined by fertility. And then, because there's more people being born, that increases or reinforcing our positive feedback loop, which increases the population. So that's reinforcing.

But then they die, go wherever we go, based on the mortality rate, and that's a balancing loop or a balancing feedback loop, which helps keep the population down. And systems have both reinforcing and balancing feedback loops. So we'll get to the exercise in a minute you can do, but I'll show you what just a pure reinforcing loop might look like. This would just be an interest-bearing bank account. So you have money that comes in at some rate that's based on your income, and then there's an interest rate that affects this reinforcing feedback loop. And then, because there's more money, there's more money to gain interest, and so it becomes this growing bank account because of the positive. There's no negative feedback loop in there, but it would be if you had things that you were buying. So maybe if you had a psychology that the more it's in here, the more you want to spend, well, that would be a negative feedback loop.

So now the system, if you want, what I'm getting at is, I wouldn't let yourself be limited by the posters that were on your wall in the sixth grade. I just showed you my favorite references, but there's a whole science called dynamic systems theory or dynamic systems analysis that you can think about, but you don't have to go to that extent if you draw out what the components are and then you just draw the reinforcing loop. So this was my first attempt to do that. I just listed in circles everything I thought that you needed to have in place to have a successful orgasm. I made an attempt at quantifying some of it mathematically. And if you go deep into some of those references, they show you ways to use calculus and linear algebra, and biological systems to calculate feedback loops.

You can see this diagram of a lady with her legs spread and trying to draw the physical components of it. And eventually, it became this poster where I tried to make this poster limited to the things that, if taken away, would interfere with a desire for sex and orgasm and the ability to have a successful orgasm. And of course, part of the benefit of this is that, if this is on your wall... And I now have copies of it that I can ship to you if you want a copy. But if this was on your wall, and let's say you did an O-Shot® that helped restore health and blood flow and innervation to the clitoris, and the woman still had trouble having an orgasm, well that might be disturbing if she was somehow led to believe that that's all we need to do to make your orgasms better.

Here's the Full Lecture...



But if this is hanging on your wall and you point out, "Well, to make that work, we also need to think about these hormones and we need to make sure your prolactin is not too high, that serotonin and dopamine are in balance, that you're not abusing or taking opioids for pain that are affecting things, or blood pressure medicines, antidepressants. These are the different things that are necessary." Now, the arrows represent feedback loops. So, when trying to think about when I first... In making this poster, I came across a diagram in one of the surgical textbooks of the cavernous nerves, I didn't know there were nerves that were autonomic running through the clitoris more in number in bulk than the dorsal nerve of the clitoris that led to the inferior hypogastric plexus, a huge mass of nerves relatively speaking compared with the somatic nerves. So I thought, "Well, where does that go?" That's the feedback loop. And it turns out that that goes through the inferior hypogastric plexus in the vagus nerve up to the midbrain, to the arousal center.

And just figuring out that one line is what gave... I didn't figure it out. It was there, right? I'm not inventing anything, I'm just trying to describe something. And in describing that line, it spawned the idea for Clitoxin®. So in the process, whether it's doing the analysis of the female orgasm system or drawing out the system of your business the way Disney did, or the system of your life, I think it helps you think about it. And the reason the picture is useful is that it's not sequential or linear, it's everything happening simultaneously. And the picture helps you get that in your brain and see what might need thinking about. And, of course, for example, maybe everything up here is perfect. You can see how I drew a bracket to indicate psychosocial affects everything, but maybe the person is extremely worried about something. They just lost a loved one, they're grieving, or their business is broken, and they're worried about money, or their lover is criticizing them instead of encouraging them.

So there are not many people that could tend to every part of this poster, but the complication of it is more reasons why it should be thought about in systems analysis. You don't need systems analysis for something that's real simple. If you're going to hammer a nail, you just need to know, "Here's the

hammer, hit it right there." There's no systems analysis in that. But to help a woman have a better orgasm or fix an air conditioner, I'm not sure which is more complicated after reading that air conditioner book, but you really need systems analysis to think about it.

And with that, let's see if there are questions. And if not, we will call it a day. I've got [1,000 copies of this poster](#) now in my office. I spent some money. I think it's two feet by... It's small enough that you can stick it on most walls, but big enough, you could use it as a teaching aid or a thinking tool, but I haven't made a place to order them yet. I'm going to make that available at a good price very soon. So watch for that in the email that comes with the transcript of this.

Let's see if there are questions. Yes, so Irene F., as a follow-up from yesterday, asked if you can do a Vampire Facial® with hemochromatosis. And the best I can tell, it's probably not a good idea. Although I couldn't find any case reports about it, but there's some worry of permanent pigment changes from doing that.⁴

And I think with that, let's call it a day. I hope you have a good week, and I'll see you next time.

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Here's an Email You Could Send

1. Copy and paste the following message into a new Word document.
2. Then edit it so that it sounds like you (you could also do your own video using mine as a guide)
3. Add a story or a personal observation if you have time.
4. Then, fill in the information with your phone number, etc., and send it to your patients.

Hello (first name),

Sexual function is essential to marriage, relationships, and creativity. However, it is often oversimplified. This lecture explains how the major components work together in a system (like the cardiovascular or respiratory systems).

[Click to watch the video <=](#)

At our office, we consider the whole system when thinking about sexual function. Contact us if you'd like us to see how we might help you.

Best regards,

(your name)

(your website)

⁴ Olynyk and Ramm, "Hemochromatosis."

(your phone number)

(your email)



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Tags

PRP therapy, platelet-rich plasma, microneedling, alopecia treatment, plantar fasciitis, joint injections, osteoarthritis, systems analysis, orgasm system, Clitoxin®, O-Shot®, sexual medicine, cosmetic gynecology, regenerative medicine, hair restoration, prolactin, dopamine, serotonin, hormone balance, feedback loops, dynamic systems, air conditioner repair, Disney business model, surgical skills, Vampire Facial, hemochromatosis, aesthetic medicine, Jeff Piccirillo, Karen Rea, Perfect PRP, functional medicine, International Society of Cosmetic Gynecology, Fort Lauderdale conference, endocrine system, cardiovascular system, autonomic nerves, inferior hypogastric plexus, vagus nerve, sexual arousal system

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