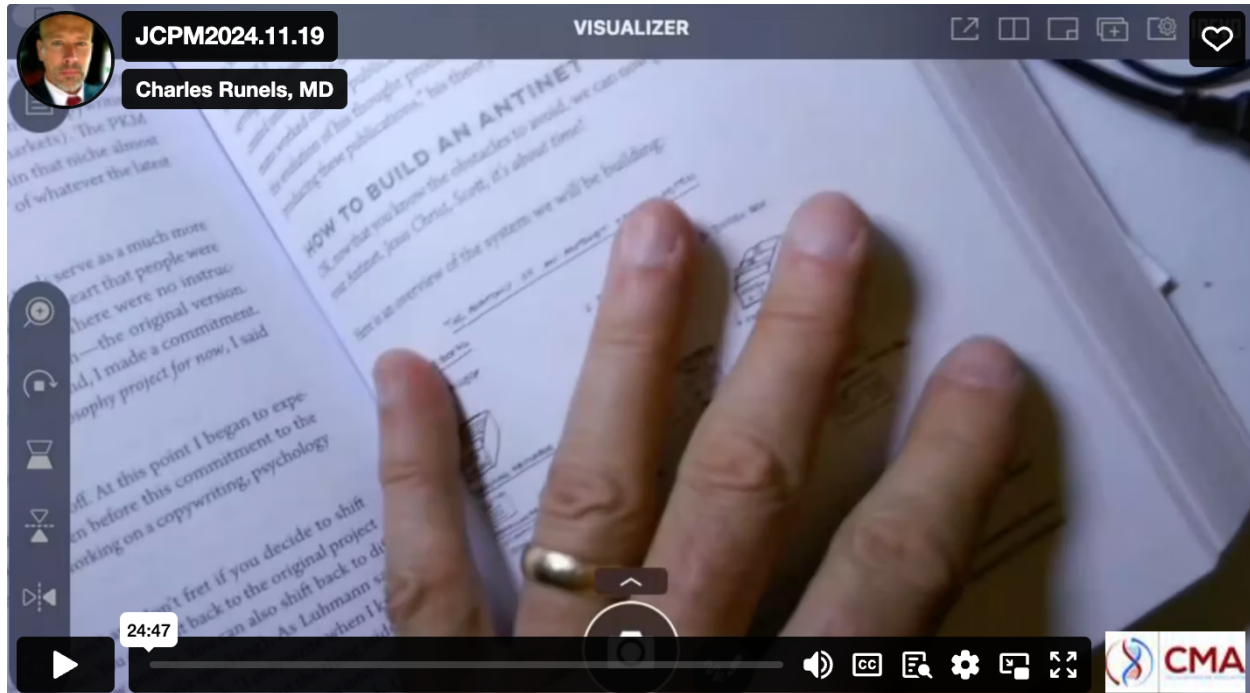


# JCPM2024.11.19

The following is an edited transcript of the *Journal Club with Pearls & Marketing* (JCPM) of November 19, 2024, with Charles Runels, MD.

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



## Topics Covered

- **Meta-analysis Shows Improved Erection from the P-Shot® Procedure**
- How Long to Wait After Stopping NSAIDS Before Offering PRP?
- Can PRP be Successfully Used to Treat Spinal Cord Injury?
- PRP plus Finasteride and Minoxidil Combined for Hair Growth
- Should You Offer Money Back for the Priapus Toxin® Procedure?
- Should You Withdraw the Plunger Before Injecting the Corpus Cavernosum?
- A Life-Changing Book about Note Taking as a Method of Thought Development
- 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

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Welcome to the Journal Club. We have another amazing article supporting our P-Shot® procedure. I had an interesting question and a couple of other papers that I think will help us think about how we do our procedures, and I have a new book that you're looking at now that is amazing.

My wife's been laughing at me because I've been living with this book since I got it a few days ago, and I hope you'll see why shortly. But let's start with the research. I'll come back to the book.

### **Meta-analysis Shows Improved Erection from the P-Shot® Procedure**

This is the paper that just I thought was beautiful. It's another meta-analysis of PRP into the penis that came out the 14th of this month.<sup>1</sup>

They looked at 12 controlled trials, eleven single arm trials, total of patients around 1400 patients. And their conclusion, as you would expect, is that platelet-rich plasma is effective in treating erectile dysfunction.

This is the third meta-analysis we've looked at now in the past few weeks that shows benefit from the P-Shot® procedure or something similar.

But here's what I thought was just beautiful. This one paragraph I think is almost poetic. A favorite book of mine about writing nonfiction says that you can write anything in a beautiful way.<sup>2</sup>

You can write about ants or platelet-rich plasma; if you read the old-school medical textbooks from the William Osler years, they're written in a very elegant way. I often catch my self writing and speaking just one step better than a rap song. And when you read the long sentence structure in a Charles Dickens novel and you realize that he wrote for the public, it's easy to mourn the loss of the eloquence of the English language. But this paragraph I think is beautiful, from this paper, is eloquent and it's the best summary of how our P-Shot® works, and it's supported by research.

I seldom do this, but I'm going to read it to you, "Platelet-rich plasma is a type of plasma derived from blood centrifugation with a higher platelet concentration than autologous blood." [That's a nice

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<sup>1</sup> Du et al., "Efficacy of Platelet-Rich Plasma in the Treatment of Erectile Dysfunction."

<sup>2</sup> Zinsser, *On Writing Well*.

definition.] PRP contains significant amounts of growth factors such as platelet derived growth factors, transforming growth factor, TGF beta and vascular, endothelial growth factor. [Here's where it gets beautiful.] PDGF promotes the repair and remodeling of penile vasculature by stimulating the proliferation of vascular smooth muscle cells and fibroblasts, thereby enhancing blood flow and vascular health, which positively affects erectile function.”

PDGF comes from platelets, promotes repair of the vasculature, which leads to better blood flow, which leads to a better erection.

Then it goes on to say, “TGF-beta regulates inflammatory responses and promotes collagen synthesis, aiding in the repair of damaged tissues, reducing fibrosis, and improving the elasticity and function of penile tissue.”

Another beautiful sentence further explaining what it is we're doing: ***VGF enhances endothelial cell proliferation and angiogenesis increasing penile blood flow and directly improving erectile capacity and gives you really strong references for every sentence. These growth factors work synergistically to promote tissue regeneration and angiogenesis collectively improving the symptoms of ED.***

Back in 2010, I read an article where they had injected autologous, adipocyte-derived stem cells into the penis of diabetic rats, and then they harvested the penis and documented new endothelial cell growth, but the tagged stem cells died. So, they postulated it was the growth factors, not the actual implantation of the stem cells.<sup>3</sup>

And those of you who do stem cell therapies now know that to be standard understanding of what's happening. But when I first read that this would be early 2010, I thought, well, that translates to a harder, more erect possibly larger penis. And so I spun some PRP shortly afterward and injected my own penis. Things improved and I started treating patients and talking about it because if treating PRP in a wound or the face is okay for neovascularization, then it's okay for an elbow. If it is okay for a wound on the leg, it's okay for a wound on the back. And so it was okay to put it in a penis if you got over the social barrier that blood vessels in the penis are like blood vessels anywhere else and that if PRP works here, it works there. And if I can use it here, I can use it there.

But,, Dr. Du summarizes that whole idea in one sentence in this paper.<sup>4</sup>

Our [P-Shot® procedure](#)<sup>5</sup> should already be standard of care. While various treatments are available for the disease, such as talking about ED, such as oral medications, extracorporeal shockwave therapy, and

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<sup>3</sup> Garcia et al., “Treatment of Erectile Dysfunction in the Obese Type 2 Diabetic ZDF Rat with Adipose Tissue-Derived Stem Cells.”

<sup>4</sup> Du et al., “Efficacy of Platelet-Rich Plasma in the Treatment of Erectile Dysfunction.”

<sup>5</sup> “Priapus Shot® | P-Shot® | Official Website | Priapus Toxin® - Priapus Shot®.”

the placement of penile prostheses, all of these options except for the shockwave therapy primarily focus on enhancing hemodynamics.

However, it is important to note that there remains a significant gap in treatment that specifically targets the reversal of the pathophysiology of the underlying ED.

So why are we doing it?

Because nothing else other than shockwave reverses the underlying pathophysiology.

And how does it work? These growth factors grow new tissue, they fight inflammation, they reduce fibrosis, they increase blood flow, and you get a better erection.

But look at the numbers we're looking at now, 12 controlled studies, 11 single-arm trials, total of 1300 patients. And I'll put this in the chat box for you.

The conclusion is it works.

And then as you would expect, they call for more studies to be done, which of course we agree with because we have to work out some of the details of how much and do we use a tourniquet or not, and do you activate or not?

And if so, with what?

Right now I'm giving you our protocol list of what I think is [the best of our understanding and observations for the past 15 years](#), but undoubtedly that will change and improve with more research. So this is low-hanging fruit for those of you who want to do more studies. And this I think is just came out a few days ago, the 14th of this month, this is open source so you can share it with your patients.

And let me give you a link while I'm thinking about it, I'll put this in the chat box because this is a beautiful article, well written both in what they conclude or their understanding of the literature and just the beauty of their writing. And I admit I have trouble reading Shakespeare. I read the sonnets back in my youth when I was more of a romantic, but I'd rather have a good Robert Frost poem than Shakespeare, but I still look for beautiful writing even in scientific literature that's clear, but well done.

And this came out of China—excellent, clear English from Chinese doctors.

So anyway, there you go. Let me put this link in the chat box and then I want to show you a couple of other studies I think will be helpful to you, but try to come in under 30 minutes like we usually do. Okay, there you go. You can get a direct link to it, download it, share it with your people.

## **How Long to Wait After Stopping NSAIDS Before Offering PRP?**

Okay, this one comes up a lot when I'm talking with people in our group about looking at non-steroidals, and the bottom line of it is that if you wait longer than 48 hours, you're okay.<sup>6</sup>

In other words, you stop your insides and wait two days, you're good to go, which I was always under the impression it was a week, but according to this article, again, open source, so I'll give you the link.

Two days is long enough after stopping the non-steroidals, not life changing, but useful to know. We all bump into it every day almost in our practice. And so that might change what you put in your pre-op instructions.

## **Can PRP be Successfully Used to Treat Spinal Cord Injury?**

Then there was one about the spine I just wanted to show you.<sup>7</sup> I don't treat the spine, but this comes up a lot and this, when people ask me with their back pains and other things, and I just want you to know it's out there.

To me, this is almost hesitate to show you guys some of this stuff, but I read through quite a number of papers every week trying to come up with what's clinically useful. This one isn't for most of us, but those of us who still practice primary care, it's useful to know. And we do have radiologists in our group who do interventional procedures, and that one's a useful to know. There is a growing body of research supporting the use of PRP for spinal cord injury.

## **PRP plus Finasteride and Minoxidil Combined for Hair Growth**

This is another open source. I'm not even going to talk about this one except just to give it to you. It's another one that shows that PRP helps with hair. In this case, they did a study of hair transplantation and showed when you added PRP together with Finasteride and Minoxidil, you got a much better take.

Okay. Nothing life changing in that, but the paper is reassuring.

## **Should You Offer Money-Back for the Priapus Toxin® Procedure?**

I have a pretty short list of books, about 10 books that I think are life changing, and I've told all three of my sons to read them. Whether they will or not, who knows?

One quick question and then I'll get to this book and how you can implement it into your daily routine.

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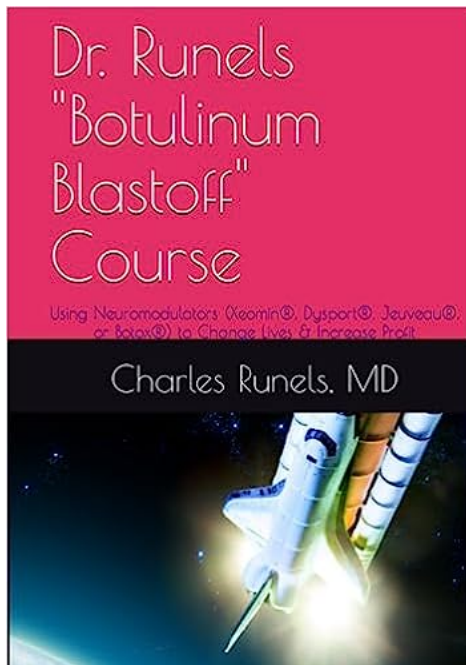
<sup>6</sup> Leach et al., "A Review of Platelet-Rich Plasma Use in Patients Taking Non-Steroidal Anti-Inflammatory Drugs for Guideline Development."

<sup>7</sup> Toloui et al., "Effectiveness of Platelet-Rich Plasma in Treating Spinal Cord Injuries."

The question is as follows: Dr. Runels. I have a question about the money back guarantee. Does it make sense to offer money back for the P-Shot®, but not have a guarantee on the botulinum toxin part of the procedure with the Priapus Toxin® since the high variable cost of the toxin?”

And then the second part of the question is, “If you're injecting toxin in the corpus cavernosum, are you supposed to withdraw to check if you are in a vessel?”

Okay, first part is that I always offer money guarantee on everything.



Everything.

It is true that you don't have as much of a markup with the botulinum toxin, but when people give you money, they're not paying for a procedure, they're paying for the results.

And they can tolerate it if their insurance paid for it and something doesn't help them, but if they take money out of their pocket or off their credit card and pay you for it, they're paying for the results. And if they don't get the results, then you keep the money in their mind, they consider you a thief.

It may be a harsh way to put it, but that (either consciously or subconsciously) is what they think.

Which is why when you do something for cash, you need enough profit built into it that if someone is not happy with

what you did (even suspect they're wanting the money back to pay a light bill or something), I still give it to them.

The punishment is if I feel like I'm being abused, I just fire them as a patient, they lose me.

And that may not be a punishment, but at least we don't have to go through that repeat scenario. But if you get away from Botox and you lean more towards Dysport or Xeomin or even Daxify, you can get enough markup to where you're still profitable on the next procedure if you're charging a thousand dollars give or take for the Priapus Toxin® part of the procedure.

So the answer is, “Yes, I always give money back no matter what, anytime anybody asks me (or even if they do not ask me and they are not pleased with the results).”

## **Do you have to withdraw the needle to check if you're in a vessel when injecting the corpus cavernosum?**

And then the other part is do you have to withdraw the needle to check if you're in a vessel?

Technically, you *are* in a vessel; the corpus cavernosum is technically a vein, and so you don't really have to pull back.

Of course, if you were injecting at 12 o'clock near the actual arterial supply, maybe so—but you should not be there with your needle when injecting the PRP.

But if you're in the corpus cavernosum, you're in a structure that functions in some ways like vein.

The worry is if you're in a vein, you're essentially giving IV botulinum toxin. So is that dangerous?

If you pick up my botulinum book<sup>8</sup> or the [online version of it](#), if you calculate the LD-50 for IV push botulinum toxin, it's about \$100,000 worth.

You're less than 1% of the LD-50 for an IV push of botulinum toxin when you do the [Priapus Toxin®](#) procedure. So you're in good shape. And for that reason, I don't use a tourniquet. I know some of you do, and I'm not arguing with it. Who knows what the right answer is? But I like to imagine that there is some uptake because even though technically it's a venous structure, it's a spongy venous structure, it's not free flow.

And I don't put a tourniquet around the neck when I inject the face (you use much more BoNT to treat migraines)<sup>9</sup>. And so I feel like there's enough sticking power of it that at the very worst, it migrates into the part of the corpus cavernosum that is hidden and we actually get a better result. So that's my thinking. I could be wrong on all of that, but that's the way we've been doing it and that's the calculations and the reasoning behind it.

## **A Life-Changing Book about Note Taking as a Method of Thought Development**

Okay, last thing and then we'll be under 30 minutes unless you guys have questions. This is the book that is my new life changer. This is the website for it. I actually bought it off of Amazon, but I recently saw on Amazon, let me give you, this is his website. See if I can copy this. I'll put it in the chat box for you and then I'll explain to you why I think it's a life changer.

All I could find on Amazon now is a used copy that was selling for a hundred and something bucks, and you can get a new copy off his website for, I think it's \$18 for this book. But let me come back and show you why I think it's a game changer. Excuse me. Actually, I'll tell you first how I came to bump into the book about.

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<sup>8</sup> Runels, Dr. Runels “Botulinum Blastoff” Course: Using Neuromodulators (Xeomin®, Dysport®, Jeuveau®, or Botox®) to Change Lives & Increase Profit.

<sup>9</sup> Zandieh and Cutrer, “OnabotulinumtoxinA in Chronic Migraine.”

About four years ago, I read a book called Smart Notes<sup>10</sup>, and it's about how a German, writer, a sociologist PhD who published more than 500 papers in the literature. After he passed away in 1997, they found 200 more papers ready for publication, like going through the archives and finding a Bob Dylan song or a Prince song.

After he passed away, they found 200 more papers ready to be published that he had written, And he wrote over 70 books, and he was a single father with three children. His only help was he had someone to help him cook dinner at night. That was it.

He told people why he was so productive.

He said, "I'm productive because I have a conversation with my *zettlekasten*," and he had a German word for it, but in English it means a "slip box."

As he was reading, he had a system for taking notes and a system for filing those notes and a system for interacting with those notes so that he didn't actually just curate information, this is key, **the system helped him develop new information.**

**He used his note-taking system as a thinking tool!**

Now, I'll show you the original book I read, because I think it's worth looking at both.

Not only will this help you organize your reading, but you'll actually find ideas evolving out of it. That's the purpose of it. Instead of an outline of working your way down, you can have something like that, but if you delve into this system, it works its way up. So instead of a Christmas tree, it's an inverted Christmas tree where you start with an idea and it starts to work its way up. As an example, a few years ago, I decided to write my little book on the female orgasm system<sup>11</sup>.

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I wanted the poster, and you guys have heard me rant about that, and I'm still working on that.

And the idea was that if you do systems analysis, you'll understand the system better and then you'll be able to better treat sexual dysfunction.<sup>12</sup> In the process of writing the book/course about the female orgasm system, there was one little part about the autonomic nervous system that fit into a section of the book, but I started building on that and before I knew it, that evolved into the [Clitoxin® procedure](#).

I didn't just start out to say, "Oh, let me figure out how to put botulinum toxin in the clitoris."

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<sup>10</sup> Ahrens, *How to Take Smart Notes*.

<sup>11</sup> "Female Orgasm System – Orgasm College™."

<sup>12</sup> Mardinoglu and Nielsen, "Systems Medicine and Metabolic Modelling."



I was interacting with my box and then it gave birth to that idea.

And I know I'm a little superstitious because I don't think I'm that smart.

I'm consistent.

So let me show you the original book and then I'm going to explain the picture that I showed you a minute ago.

This is the updated version.<sup>13</sup> I bought the first version and this updated version, I've taught it in a couple of classes that I've done online and one in-person class that I did, let me give you a link to it, hold on a minute. But it left me trying to figure out a lot. Okay, there's a link now in the chat box. It left me trying to figure out some things.

And even though it was a, I don't know, it was probably 200-page book, I was still struggling with how to do it as efficiently as I imagined the original guy did it

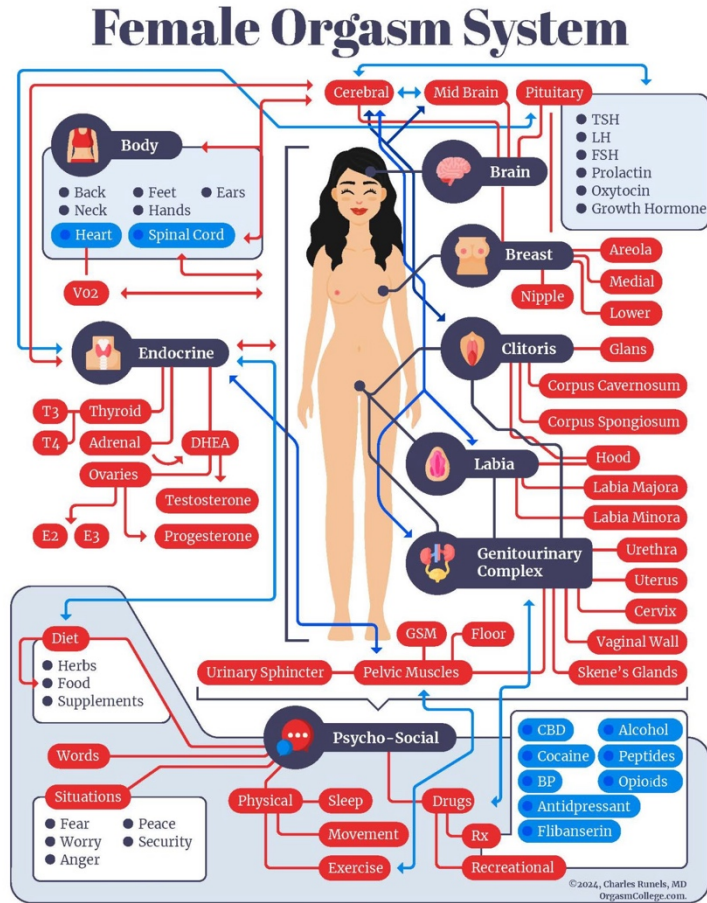
But let me show you the quick version of it because down to four minutes left in 30 minutes, and then those of you who get it, you'll go and it could change

your life. Some of you, it's cool, your life is great already. It may not be right for you, but when I get something really life changing, I like to share it.

So let me show it to you. Okay, so again, this is the quick picture version of a 594 page book that explains it. How can you write a book that's 594 pages on note-taking?

It's because it's a system. It's not just writing notes down.

All right, so the first thing is you have three things. You have your main, they're four by six index cards, and you have main cards that you're writing ideas on that are linked to each other like Evernote with tags and such.



<sup>13</sup> Ahrens, *How to Take Smart Notes*.

But even though they've written software to do this for you, and some people use Evernote to do this system, part of probably the first third of this book is scientifically backing up the idea that when you use the web to do this, when you use software to do it, and I tried three different software programs to do this, you don't really absorb it and the ideas don't evolve as reliably into something new.

You download a bunch of stuff, but it doesn't evolve in your mind and the interconnections don't happen and it doesn't give birth to development. ***This is not the way to memorize information. This is the way to take information and develop it into something new.***

Okay. So you have this box that you're working on. Then you have another box that's just an index box. So you have a main category. Let's say one category is saline not being a placebo for PRP.

So over here you have an index that's saline, and then it links to the numbers cards over here. Then over here is your bibliography, whereas you read, you're not underlining, you take a, well, I'll show you how, you're taking a four by six card and it has the author and the publication date. And then the very first card also has an ISBN number.

[\(see video\)](#)

And so this gets put into Zotero with a tag. And then as I'm reading, I'm just putting page numbers, and then this card goes into the bibliography. And so then not all of these notes get developed. The German guy who did this had 15000 bibliography notes. He had only about 5000 books in his home, but he hung out in libraries a lot, and he had around 80000 main cards. And many of the cards were not notes from his book. It was him writing notes about his notes.

[You can read more about how I implement this system in my 5-Notes Course<=](#)

He said that he spent as much time writing in the card system as he did writing the thing, taking notes. And then what happens is you eventually get a stack and then where some new idea develops, and then you take that stack out and that becomes your next paper or your next book or small stacks can become your webinar or your email or your website or your podcast.

So it's a great way, I think, to develop information, develop an area of expertise and develop content.

But you do it first analog and then you bring it over into your whole idea is to make something.

So I'll leave you with this thought, which is that when this guy was writing, he said he never wrote when he didn't want to. And when he was taking notes, he was always taking notes about his next thing that he wanted to make.

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His next project. He spent 30 years writing a treatise on sociology—all of sociology, but it had subsections. And as he was reading, he was trying to garner what do you decide to take notes on.

So when I get ready for journal club, I'm taking notes for things that could change your practice, things you can use tomorrow to take better care of patients or to be more profitable.

But then I'm also taking notes about my next project(s), there needs to be a P-Shot® book. So I'm developing that and there needs to be some more research. I'm taking notes about that. And so it's always based on making something that then gives birth, it's born out of your box to be a new research project, a new book, a new idea, a new product, and better medical care for the people that you're talking with.

So that's the short version of it.

But this book is the best yet that I've seen explain it.<sup>14</sup>

The author made a fortune in Bitcoin or one of the cryptocurrencies. I'm not sure which one, but he made a fortune. And this is almost like his hobby to develop the idea of an analog information system. So, it may be worth noting that when he says that analog note taking and information development works better than apps on your computer, it is not because he does not understand how to use a computer.

And I think with that, I'll see if you have questions, and we'll end it. Okay, well, I hope that's helpful to you. Click on those links if you have something you think might help you and see you next week. Bye-bye.

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## References

Ahrens, Sönke. *How to Take Smart Notes: One Simple Technique to Boost Writing, Learning and Thinking*. 2nd edition, Revised and Expanded edition. Hamburg, Germany: Sönke Ahrens, 2022.

Du, Shaokang, Shiwei Sun, Fuyu Guo, and Hongyao Liu. "Efficacy of Platelet-Rich Plasma in the Treatment of Erectile Dysfunction: A Meta-Analysis of Controlled and Single-Arm Trials." *PLOS ONE* 19, no. 11 (November 14, 2024): e0313074. <https://doi.org/10.1371/journal.pone.0313074>.

"Female Orgasm System – Orgasm College™." Accessed December 8, 2024. <https://orgasmcollege.com/femaleorgasmsystem/>.

Garcia, MM, TM Fandel, G Lin, AW Shindel, L Banie, CS Lin, and TF Lue. "Treatment of Erectile Dysfunction in the Obese Type 2 Diabetic ZDF Rat with Adipose Tissue-Derived Stem Cells," 2010, 14.

Leach, Tyler, Benjamin Huang, Nicholas Kramer, Shanthan Challa, Richard P. Winder, Tyler Leach, Benjamin Huang, Nicholas Kramer, Shanthan C. Challa, and Richard Winder. "A Review of Platelet-Rich Plasma Use in Patients Taking Non-Steroidal Anti-Inflammatory Drugs for Guideline Development." *Cureus* 16 (October 17, 2024). <https://doi.org/10.7759/cureus.71706>.

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<sup>14</sup> Scheper, "Scott P. Scheper - Official Website."

Mardinoglu, A., and J. Nielsen. "Systems Medicine and Metabolic Modelling." *Journal of Internal Medicine* 271, no. 2 (February 1, 2012): 142–54. <https://doi.org/10.1111/j.1365-2796.2011.02493.x>.

"Priapus Shot® | P-Shot® | Official Website | Priapus Toxin® - Priapus Shot®," June 25, 2013. <https://priapusshot.com/>.

Runels, Charles. *Dr. Runels "Botulinum Blastoff" Course: Using Neuromodulators (Xeomin®, Dysport®, Jeuveau®, or Botox®) to Change Lives & Increase Profit*, 2023.

Scheper, Scott P. "Scott P. Scheper - Official Website." Accessed November 17, 2024. <https://www.scottscheper.com/welcome>.

Toloui, Amirmohammad, Hamzah Adel Ramawad, Nahid Aboutaleb, and Mahmoud Yousefifard. "Effectiveness of Platelet-Rich Plasma in Treating Spinal Cord Injuries: A Systematic Review & Meta-Analysis." *Basic and Clinical Neuroscience* 15, no. 4 (2024): 443–54. <https://doi.org/10.32598/bcn.2023.562.2>.

Zandieh, Ali, and Fred Michael Cutrer. "OnabotulinumtoxinA in Chronic Migraine: Is the Response Dose Dependent?" *BMC Neurology* 22, no. 1 (December 2022): 218. <https://doi.org/10.1186/s12883-022-02742-x>.

Zinsser, William. *On Writing Well: The Classical Guide to Writing Nonfiction*. Seventh edition, Revised and Updated, 30th anniversary edition. Sydney: Collins, 2021.

## Tags

Journal Club, P-Shot®, platelet-rich plasma, PRP, erectile dysfunction, vascular health, growth factors, tissue regeneration, inflammation, fibrosis reduction, shockwave therapy, non-steroidals, botulinum toxin, Priapus Toxin®, corpus cavernosum, patient guarantee, note-taking system, Zettelkasten, slip box, Smart Notes, sociology, bibliography, Zotero, medical research, Clitoxin®, hair transplantation, Finasteride, Minoxidil, patient education, medical practice, study protocol, life-changing books, writing systems, analog notes, digital notes, research productivity, Charles Runels.

## Helpful Links

=> [Next Hands-On Workshops with Live Models](#) <=

=> [Dr. Runels Botulinum Blastoff Course](#) <=

=> [The Cellular Medicine Association \(who we are\)](#) <=

=> [Apply for Online Training for Multiple PRP Procedures](#) <=

=> [FSFI Online Administrator and Calculator](#) <=

=> [5-Notes Expert System for Doctors](#) <=

=> [Help with Logging into Membership Websites](#) <=

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