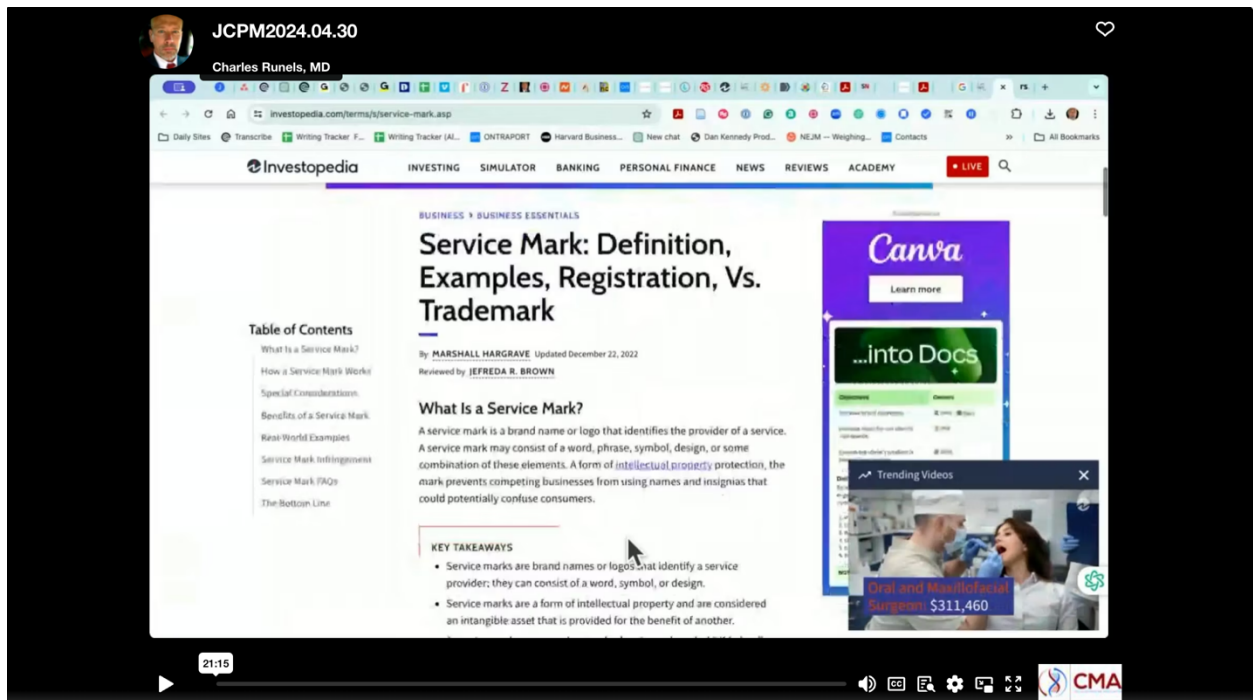


# JCPM2024.04.30

The following is an edited transcript of the *Journal Club with Pearls & Marketing* (JCPM) of April 30, 2024, with Charles Runels, MD.

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



## Topics Covered

- **The Vampire Facial® procedure for melasma**
- **Updated Explanation of Clitoxin® for Women and Their Lovers**
- **Pelvic Floor Disorders Mark and PRP and the O-Shot® Procedure**
- **Quick View of Using the O-Shot® Procedure for Pelvic Floor Problems**
- **The Vampire Facial® Procedure, HIV, and How the Press and the Providers Got it Wrong.**
- **How Our Service Marks Protect Your Patients (& What Is a “Service Mark”)**



**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. Some of you know we had press regarding the Vampire Facial that could have been scary if you interpreted it incorrectly, so I'll show you how to think about it, what we're doing about it, and how, in the end, it could help your business. We don't ever want to profit from tragedy intentionally, but when tragedy happens, and our solutions are the way to avoid tragedy, that's a good thing. So, we'll talk about that, and I'll update you.

But first, let's cover a few research articles that came out recently. We'll start with this one about refractory melasma.

### **The Vampire Facial® Procedure for Melasma**

This is a beautiful paper because it gives a nice review of what refractory melasma is and then a nice summary of the major articles that have been published about it, as far as laser comes in and other therapies.<sup>1</sup>

As you know, when you're treating with a laser, there's potential to make things worse. And this is what caught my eye: microneedling for melasma.

Remember, microneedling does two major things. One is that microneedling, with many thousands of punctures, stimulates collagen production. But then the second thing is because you're breaking down the barrier, the usual protective barrier of the dermis, and making channels through which drugs can be delivered, it can greatly enhance the ability of those drugs to work.

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<sup>1</sup> Yao et al., "Definition of Refractory Melasma and Its Treatment."

For example, microneedling with PRP works better than microneedling with saline to treat acne, but microneedling with TCA trichloroacetic acid for acne scars works better than microneedling with PRP.<sup>2 3 4 5</sup>

So, the idea is that because you can deliver past the usual barrier, you can create amazing effects. I like alternating for acne scars. Treating microneedling with PRP and then six weeks later, microneedling with a low-dose TCA, is a great way to alternate things.

And, of course, undermining the larger scars by injecting PRP and all that's described on our [membership site](#).<sup>6</sup>

But particularly for melasma, I love the study where they used microneedling followed by hydroquinone, which worked as well as the surgery.<sup>7</sup> There was also one microneedling with vitamin C immediately afterward as an adjunctive therapy.

So, if you're doing microneedling, especially if you live in an area with a high Asian population or if you're a gynecologist or obstetrician and you're treating lots of pregnant women, those are two populations where you'll become a hero to these women because melasma can be very disturbing and it's hard to deal with.

So you could take that link, put it in an email, put it on social media posts, or put it beneath your video where you describe how you do microneedling and treat melasma, and then study the article and do a video about the article that will identify you as an expert and people who are, sometimes they'll lose hope with this condition, they'll find you and they'll be delighted to compensate you for doing what you

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<sup>2</sup> Solanki et al., "Microneedling in Combination With 15% Trichloroacetic Acid Peel Versus 25% Pyruvic Acid Peel in the Treatment of Acne Scars."

<sup>3</sup> Sany et al., "Comparative Study Between the Efficacy of Fractional CO2 Laser/Radiofrequency, PRP and a Combination of Both in the Treatment of Striae Distensae."

<sup>4</sup> Ismail, Khella, and Abou-Taleb, "Which Is More Effective in Atrophic Acne Scars Treatment Microneedling Alone or Platelet Rich Plasma Alone or Combined Both Therapeutic Modalities?"

<sup>5</sup> Jiang et al., "A Network Meta-Analysis to Explore the Effectiveness of the Different Treatment Modalities in Acne Scars."

<sup>6</sup> "Vampire Facial (R) Procedure Official Website."

<sup>7</sup> Yao et al., "Definition of Refractory Melasma and Its Treatment."

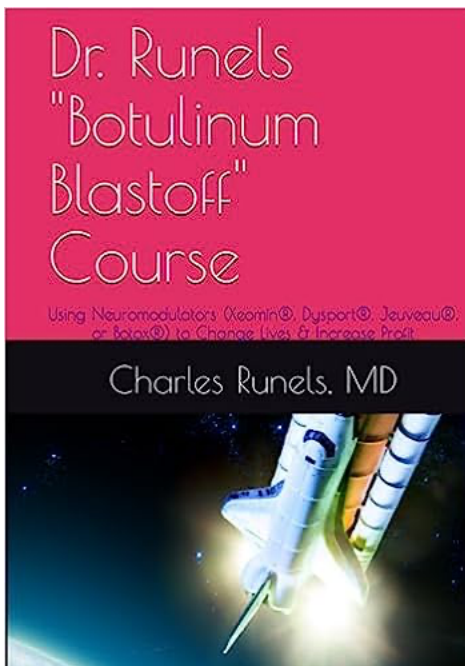
went to medical school to do, to learn how to do wonderful things, near miracles for hard to treat problems.

Okay, so that's microneedling for melasma.

## Updated Explanation of Clitoxin® for Women and Their Lovers

But if you go, let me show you where I put a detailed explanation of how the Clitoxin® procedure works and who and who may not benefit: go to [clitoxin.com](http://clitoxin.com) (If you are an O-Shot® provider, this training is free inside your [membership site](#)).

I made a 9,000-word document (it can be downloaded on the link below the video at Clitoxin.com) that I'll eventually turn into an eBook that can be downloaded on Amazon and a little paperback you can hand out to your patients. But now, it is a PDF file with a written description of how Clitoxin works.



Clitoxin can be difficult to explain even to a physician; it takes a little time, but this is a PDF file. I'll give you the link to it right now. You don't need the link. You go to [clitoxin.com](http://clitoxin.com) and click right there and you can download the PDF file, share that with your patients and/or print it out, do anything you want to with it if you're an O-Shot provider.

And then (after your patient reads that) answer questions. If you try to explain this, it takes way too long.

This is indicated for women for whom you're doing other things. Their hormones are replaced, and they still want the best you got. Well, the best you have would be an O-Shot combined with the Clitoxin® procedure.

Many of your people want to do things stepwise, one little thing at a time, but if you haven't figured it out yet, try me

on this most people when it comes to relationships, want the best you have yesterday, and I think we owe it to them to offer them that.

So the best you have is to think intelligently about the whole female [orgasm system](#),<sup>8</sup> their hormones, their relationships. And if you don't do hormones, you find someone who does. If you don't do

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<sup>8</sup> runels, "Female Orgasm System."

counseling, which most of us don't, you send them to a family marriage counselor. But if you're doing this procedure, the best procedure we have right now is the O-Shot combined with Clitoxin, but they won't know what it is.

It's hard to explain, so I finally got you a video, and if you want to embed that video on your website, you could click share and then click that embed button. And your internet person should know how to add that video to one of your web pages in five minutes. It should not be \$1,000 and wait a month. In five minutes, they should be able to copy-paste it onto a page, and you can use that video or [take this transcript](#) and edit it into your version and read it into a podcast or edit to your version, read it, and then do your own off the cuff video.

But all the tools to teach your patients about the procedure are in place. I have one other paper I wanted to show you.

## **Pelvic Floor Disorders and PRP and the O-Shot® Procedure**

Someone did a nice study of regenerative medicine regarding pelvic floor disorders.<sup>9</sup> If you've shown up at the Journal Club often, you know that this is, to me, a very big idea that's still in the germ stage because all you have to do is to take what's already being done for the past decade for elite athletes and apply those same ideas to the muscles of the pelvic floor in a woman and you have a good predictor of what is possible.

In other words, give the mother who just delivered a baby the same attention to the muscles of her pelvic floor that the NFL athlete gets when he damages his muscles.

***Give the mother who just delivered a baby the same attention to the muscles of her pelvic floor that the NFL athlete gets when he damages his muscles.***

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Part of the clue to what's coming down the pike is, you look, what are elite athletes doing, and what are they doing for \$10 million racehorses? Because that works.

When you're on that high level where you're one in 10 million, and you're performing at that level, you know when something throws you off your game, you can measure it, you can feel it, people will watch it on TV, and you don't necessarily need a study from the FDA to tell you just ran faster and jumped higher or got back on the field when you're getting paid \$30 million a year and you miss a day of work,

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<sup>9</sup> Henderson, Christman, and Alperin, "Regenerative Medicine in Urogynecology."

it's expensive. So, when people get you back on the field, and you've got a short window of the work—by the time you make 35 years old, you're too old. You must retire and open up your car lot.

So, it's important enough that some experimentation is conducted (by athletes and their coaches) to find what will work legally or not. So, if you look to see what athletes are doing legally to make things work better, it's a good clue of what will eventually be common practice in medicine. One of those things is treating muscles with platelet-rich plasma to activate the dormant stem cells in the muscle to decrease scarring, increase strength, and decrease the time to healing.

This is a nice review article covering some things I do not do. As you know, most of you know, I'm still fearful of the three-letter people, FDA, and see, I have trouble even saying the letters, IRS, DEA, all those three-letter people, I don't like them knocking on my door and they do not knock on my door when I stick to platelet-rich plasma. If you're doing some of these other generative therapies, they cover it in this paper, but they give a beautiful review of the attempts to pull what we know about platelet-rich plasma into what's been published already regarding the pelvic floor space.

Not gynecology in general because that's a much larger body of research, but this is a very recent article. You see 2024, from Urogynecology, May, so it's a very recent article looking at what's been published regarding platelet-rich plasma, and it's promising.

The beauty is that no one's slammed what we're doing so far. You can see PRP, excellent safety profile, and minor adverse effects. Results are promising, heterogeneity and preparation are common criticisms, and small studies are justified because we don't have the huge billion-dollar budgets you have when studying a new prescription drug.

However, they wrote that we need more randomized controlled studies, and we do. But, if they do placebo-controlled, as you know, that's one of my pet peeves—saline is not a placebo in a regenerative study.<sup>10 11 12</sup> But the bottom line is everything's coming up supportive so far.

## **Quick View of Using the O-Shot® Procedure for Pelvic Floor Problems**

If a woman suffers pelvic floor tenderness, you palpate it to see if you can reproduce the pain. Then, take one CC of the four you would've put in the anterior vaginal wall, and do a trigger point injection.

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<sup>10</sup> Asghar et al., “Efficacy and Safety of Intralesional Normal Saline in Atrophic Acne Scars.”

<sup>11</sup> El-Amawy and Sarsik, “Saline in Dermatology.”

<sup>12</sup> Saltzman et al., “The Therapeutic Effect of Intra-Articular Normal Saline Injections for Knee Osteoarthritis.”

You could spin another 5-10 CCs to give you more PRP for injection to strengthen the pelvic floor; then put them on an Emsella machine.<sup>13 14</sup> It could be a whole separate treatment.

So PRP using our O-Shot® procedure to improve the pelvic floor is hugely promising. By the time my grandkids are grown, this will be common practice and we're paving the way for it.

Let me give you a link to this, and let's go over what happened with the press regarding our Vampire Facial® procedure, and we'll call it a day.

## **The Vampire Facial® Procedure, HIV, and How the Press and the Providers Got it Wrong.**

All right, what happened in the press regarding our Vampire Facial, and what does it all mean?

I'll give you the punch line; in the end, it will help our business. It bothers me to say that again because the story is that some people at a hair salon, **not part of our group**, advertised the Vampire Facial® procedure but then did not do a Vampire Facial®; instead, they did something dangerous and stupid that caused their subjects to contract HIV.

I'll pull that up while we talk about it.

Even if you don't do the Vampire Facial, I'm about to give you a clue that will help you market your practice and keep patients safe. So, hold on.

If you go and you just Google Vampire Facial, it could be terrifying. Not if you look at what comes up. But if you go looking at the recent news, let's click on the news tab, and it goes on for pages and pages. CDC, three women diagnosed with HIV, link to HIV, HIV, HIV, HIV, and it goes on. We go to page five, HIV (see video).

Every major press platform on the planet talked about it.

Part of what made our procedure popular is that "Vampire Facial" is clickbait. It's hard for people not to click on it. So, reporters love to talk about and it works to bring them traffic. And some major celebrities,

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<sup>13</sup> Evans and Samuels, "FEMALE URINARY INCONTINENCE AND SEXUAL FUNCTION AFTER THE HIFEM® PROCEDURE."

<sup>14</sup> Gözlersüzer, Yalvaç, and Çakıroğlu, "Investigation of the Effectiveness of Magnetic Field Therapy in Women with Urinary Incontinence."

which I can't say their names, but I mean, major celebrities, if you Google it and celebrities, you'll see top people have done this procedure, and the search only includes the ones who have talked about it.

When I talk to our providers in Miami, Los Angeles, and Nashville, there's a whole trainload of celebrities, music celebrities, and movie stars that have had this procedure.

The tragedy originally happened in 2019. If you go to just our Vampire Facial website and [click right here](#)<sup>15</sup>, I referenced the 2019 article, and I updated it.

In 2019, here's where [Rolling Stone interviewed me about it](#).<sup>16</sup> Two people got HIV from being Vampire Facial'd at a hair salon in New Mexico, two women, and they did gene coding and traced it to the same source.

Then, a man contracted HIV from having sex with one of the two women. So that's two women who got it at the clinic and one who got HIV from having sex from one of those two.

The news now is that a third woman was identified to have contracted HIV from the same clinic.

The way we teach the Vampire Facial procedure is that you must use an FDA-approved device. It does not pull up blood in the handle, which they probably did wrong. And then you have disposables that, of course, must be changed after every patient.

And then you do all the other things we know to do. Everything we do which involves blood—from taking a skin tag off to major surgery. We're all dealing with blood daily, but we're trained to know how to deal with it. And whoever these people are now in prison, two of them, where they belong, they're in prison, they did not know or do what we know and do.

Simple things we know are simple to us about how not to cross-contaminate.

And as you know, if you've ever been to my workshops, you know that I make a big deal out of everything being taken away between patients. Even though it's a simple procedure, you treat it like the OR. In other words, everything that gets touched or has blood on it. We even use cotton sheets, which go into the wash with lots of Clorox after every patient. Everything that touched blood goes away before the next patient enters the room for the next procedure.

And so, these people broke the rules somehow. They weren't part of our group, and they got in trouble.

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<sup>15</sup> *New Mexico, Illegal, Vampire Facial® Imposters.*

<sup>16</sup> “What the Bloody Hell Is a Vampire Facial?”



## How Our Service Marks Protect Your Patients

Most people, even those who work for me, sometimes have trouble explaining this; what we have are [service marks](#).<sup>17</sup> All of our names are service marks (O-Shot®, P-Shot®, Clitoxin®, Vampire Facial®, are service marks—the service mark is a type of trademark that ***allows us to distinguish what we're doing from other people who are doing something similar***. Our procedures have protocols we've shown to be safe over the past decade. If someone does something similar, they may be doing something dangerous or inferior and our marks help make the distinction.

[Here is documentation of the Vampire Facial® trademark.](#)<sup>18</sup>

The worst we know of that ever happened from one of our providers doing our trademarked Vampire Facial® procedure is an allergic reaction to the numbing cream. I know of one person who had an allergic reaction to PRP, which is rare, but it's been reported even in the orthopedic literature.<sup>19</sup>

So, other than topical allergic reactions, we've had no serious sequelae by anyone ever treated by any of our providers for the past decade. So, what the service marks do, that Vampire Facial name and the O-Shot and the P-shot are meant to imply is that we have a specific way of doing this. And because we're advertising with this name, we're promising you that we will do it within these guidelines. And that distinguishes us from the hair salon people who might want to call what they're doing a Vampire Facial when they do something different—which could be stupid or dangerous.

Service marks are common in the business world. It's an intangible. In other words, if you have a trademark for a product like Volumna, or it could be motor oil, or it could be Coca-Cola, you can have a trademark that protects a product or a device. You couldn't just make a magnet and slap the Emsella name on it; they have a trademark name for something physical. And that trademark indicates, in this case, a patent on a magnet or the trademark Coca-Cola, which indicates a drink that has a patented formula.

We have a trademark called a service mark that indicates a way of doing something (not something physical) and helps people find people who are doing that something versus doing something stupid. So it's an odd concept in the medical world, but it's common in the legal world and the business world. So if you want to read more about that, you can, but it's what you're doing, you advertise P-shot, O-Shot,

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<sup>17</sup> “Service Mark.”

<sup>18</sup> “Trademark Status & Document Retrieval.”

<sup>19</sup> Latalski et al., “Allergic Reaction to Platelet-Rich Plasma (PRP).”

Vampire Facelift, Vampire Facial, really, in some ways, when you put your name on your clinic because you have your way of doing things and someone else can't claim to be you and start seeing patients.

So you haven't trademarked your name. I did because so many people were pretending to be me and sending out emails so that I could shut them down. They're trying to sell devices and such to our group. If you get a weird email or an email that you're not sure is from me, always hit me back or go to the website because all the products we recommend are listed on the materials part of the web page. So that's a service mark, and it's part of what you get from being in the group. And it's why you did a hands-on course, or if you did an online course, you took a test and did a click and agree to follow those protocols or else use a different name.

So that's the way it works.

And so what is going on now is that thankfully, when people talk about this, at least this time, they are using the word illegally. So, at least this time, they're getting it right and saying the people were bogus.

So, what happens is this: when patients read that, they say, "Okay, better go to the real thing," they're more likely to go find somebody in our directory.

They don't always do that. Some people still do stupid things to try to save money, but careful people will go find one of us. So, that is how the names protect people from bogus procedures.

And now there are some things I hope to happen this week that I'm working on 12 hours or more per day to help neutralize this. But those are the words to use. That's the reality of what happened. And in the end, if it happens like it did the last time, your business will go up.

***So, they didn't do a Vampire Facial. They illegally advertised a Vampire Facial, did not even have medical credentials, and did something else (NOT a Vampire Facial).*** Your trademark becomes more valuable because it separates you from those pretending to know what they're doing. And with that, wow, it came in under 30 minutes. If there are no questions, we will call it a day. So I gave you some new research regarding melasma, and if you've got any number of Asian women who live near you, an email or a social media post about that, we'll bring you patients who need you. It's troubling when they have intractable melasma.

I gave you another link reviewing probably what's coming and supportive of injecting the pelvic floor with PRP, and we talked about service marks. And so since that's being talked about, you actually own it, which is the best thing to do. And if you're doing microneedling, you email your people or a social media post, and I made this for you. You [shoot a social media post to this page](#)<sup>20</sup> and say, "Here's the story."

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<sup>20</sup> *New Mexico, Illegal, Vampire Facial® Imposters.*

Here's why what we do is different and why it's safe, and you should be using us because we're on the directory and not somebody down the street."

I even put a link right there to the US Patent and Trademark Office to show that yes, indeed, it's trademarked, and your presence on the directory means that you're licensed to use the name because you've agreed to follow our protocols, which have demonstrated to be safe for the past 13 years.

With that, we'll call it a day. Thank you for showing up.

I hope that was worth your time.

Goodbye.

## 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.
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.



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## Tags

Journal Club with Pearls & Marketing, Charles Runels MD, Vampire Facial, microneedling, refractory melasma, PRP, Clitoxin, O-Shot, platelet-rich plasma, pelvic floor disorders, FDA-approved devices, Vampire Facial controversy, service mark, trademark, legal issues, cosmetic procedures, healthcare marketing, patient safety, medical education, HIV, New Mexico

## Helpful Links

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

=> [Dr. Runels Mind Mining Method](#) <=

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

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

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

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

=> [The software I use to send emails: ONTRAPORT \(free trial\)](#) <=

=> Sell O-Shot® products: You make 10% with links you place; shipped by the manufacturer), [this explains](#) and [here's where to apply](#) <=