How to Fix Knee Pain Without Surgery (Golfers Must Watch) Transcript

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Introduction: Why Knee Replacement Isnu2019t the Whole Story

Somebody told you that your knee replacement is just a matter of time. Maybe it was your orthopedic surgeon. It was a well-meaning friend who just had the surgery done themselves.

Or maybe it's the radiologist's report that was sitting in your inbox that had words like significant joint space narrowing and advanced degenerative changes.

And part of you believed it, because why would a doctor say it if it wasn't true? Here's what I want you to know before this video is over. That story.

The one where your knee is just worn out and the surgery is the only logical ending? It's not the whole story, and in a lot of cases, it's even not even the right story.

My name is Dr. Gayan Puvendran. I am a medical doctor, I specialize in sports and regenerative medicine, And for the last 15 years I have helped thousands of golfers conquer their knee pain without resorting to surgery.

Now in this video, I am going to show you exactly what actually works to protect your knee, slow that damage, and in many cases, buy yourself years if not a lifetime of golf without having to go under the knife.

I'm also going to tell you a story of one of my patients whose experience genuinely stopped me in my tracks. And by the end of this video, you will also have one specific thing that you can start doing today that changes the environment inside your knee, not some day today.

The Typical Knee Pain Journey and Conventional Treatment

Now, before we get into it, if you want something that can actually use before your very next round, I have put together a free five minute warmup guide specifically for golfers with knee pain.

We call it the Ready for Teoff Guide and you can grab it right now at ReadyForTeoff.com. It is free. No strings attached. Just go get it and come back.

I'll be right here. Here's what the typical story with a patient with knee pain looks like. Your knee starts to bother you. It's not dramatic, it's just a dull ache after the round.

Maybe some stiffness in the morning and it takes a few minutes to walk it off. You figure, hey, its part of the game, right? I'll just push through it.

So you tape it up where you put a brace on and you pop a couple of ibuprofen and get on with it! It's Saturday, right? Then, one Saturday it starts getting loud enough that you actually want to do something about it.

So on Monday, you call the orthopedic surgeon, and you book an appointment. You're in the office for two hours waiting. He is in and out of your visit in about 10 minutes.

Do you get an x-ray? You get told that have arthritis or osteoarthritis, which just means that the cartilage inside your knee is starting to thin out.

And you'd get a prescription for physical therapy and get cortisone injection. Now, cortisone is a powerful anti-inflammatory drug and that can quiet the pain down fast.

And it works for a few weeks at least. Maybe six weeks, maybe eight weeks. You feel like yourself again. So then

you go play a couple rounds and you feel great and think, oh man, we got this, crisis averted.

Then it comes back, right? You go back in, you get another shot and rinse and repeat and your still doing the exercises that the physical therapist taught you.

you go back to the surgeon's office and he starts throwing around the word surgery. And not just any surgery, he's talking knee replacement. They are going to cut out the surfaces of your knee joint and replace them with metal and plastic.

Is this really where we are right now? Now, here is what nobody in that office is going to tell you. There is a substantial window, especially if you have real cartilage left where things like regenerative medicine can change your trajectory.

Now we're not talking about just managing symptoms. What we are talking is actually working with your body's own biology to slow the damage and rebuild what is there.

Nobody tells you this because most conventional orthopedic offices which are operating inside this insurance-driven machine system, they don't have those tools.

They don´t have the time. they have what they and what have is anti-inflammatory drugs and cortisone injections and surgery. That's not a conspiracy, that's a systemic problem.

And today, you're going to understand it a little bit more clearly. So let's start with the elephant in the room. Knee replacement.

Regenerative Medicine Options for Knee Osteoarthritis

Knee replacement is a real surgery that has real recovery time, which is typically somewhere along three to six months before you were thinking really about getting back on the golf course.

But remember, there are real risks involved too. According to multiple published research reviews, approximately one third of the patients who undergo knee replacement surgery may not have needed it at all.

Their arthritis wasn't severe enough to justify the procedure. Now that's not just a Dr. Pruvendran fringe opinion. That is documented in peer-reviewed literature.

One in five patients also who got the surgery reported that they were dissatisfied with the results and one in three still have chronic pain after the operation.

I want to say that again. 1 in 3 people who had their knee replaced still Now, surgery absolutely has its place. If your knee is truly bone on bone, or if your joint has collapsed, Or if you have tried every single conservative option and you've genuinely exhausted them all, then sure, Surgery might be the right call.

I am not here to demonize orthopedic surgeons. What I'm here is to make sure you're shown the full menu before you order your meal. Because most of the time, that full-menu was never offered.

Now, what does the science evidence say actually works? Well, let's talk about my specialty. Let's talking about regenerative medicine. Specifically, it's talked about PRP and stem cells.

These are fancy phrases of using your body's own repair cells to stimulate healing. PRP stands for platelet-rich plasma, which here's what that means in plain English.

We draw a small amount of your blood, we spin it in a centrifuge, basically like a fast blender, and then we concentrate those growth factors and healing proteins that are already inside your body.

So then, you take that concentrated healing and place it directly in the knee joint. Your body's own healing machinery, amplified, delivered exactly where the damage is.

Now stem cells, let's call them healing repair cells. They're harvested either from your fat tissue or from you bone marrow. This is a small, minimally invasive procedure that's done in the office.

These cells once they're isolated have the ability to reduce inflammation, to modulate your immune response, and lay the groundwork for tissue repair.

And this is done ways that cortisone simply cannot do. Think about it like this. Cortisone quiets the fire. Regenerative medicine hires the Fire Department and then starts rebuilding the house.

It's a huge difference. Now here's where this gets even more compelling. A 2024 Umbrella meta-analysis, which is basically a study of studies of Studies.

This is some of the highest level of evidence that we have. it reviewed 28 separate meta analysis covering 32,763 patients. The conclusion was very clear.

Both mesenchymal stem cell therapy and PRP were significantly associated with meaningful improvement in knee osteoarthritis outcomes. The pain scores went down, the functional scores up.

These were real, measurable results. And specifically on microfat, which is microfragmented autologous fat tissue.

A Patient Case That Changed the Conversation

Say that five times fast. Basically what that just means is we're taking tiny particles of your own fat and rejecting it into the joint. This study that was published in the archives of orthopedic and trauma surgery followed 46 patients for four years.

68% of those patients experienced meaningful lasting improvement. Pain scores dropped nearly in half, function scores improved significantly, and these improvements held for 4 years, that matters.

because the knock-on regenerative medicine always used to be, well, okay, this is really cool, but how long is it going to last? I don't know about you, But I think that four years of durable benefit in a majority of patients is not a gimmick.

That's science, and that's published, And that is real. So I do want to honest with you because that the way I operate. not every patient response, right?

The last study was 68% responders. Not every knee is the right candidate. There's something called synovitis, which is ongoing inflammation inside the joint that can predict a tougher response.

This is why the protocol matters. Which is, why doing this in a place that evaluates your knee properly before they inject anything, this is not optional.

That is whole game. Now, before I give you my one behavior change for today, I want to tell you about somebody. His name is not really that important, but what does matter is he's 54 years old.

He is an anesthesiologist, so he knows medicine from the inside. he tried everything for his knee arthritis. He tried physical therapy, he did multiple rounds of cortisone injections, He did platelet-rich plasma or PRP, he did Wharton's jelly injections which is another type of cellular product derived from umbilical cord tissue that some people market as stem cells.

Exosome therapy, he had young plasma, He tried red light therapy. He did shockwave. he did peptides. Tried more treatments than most patients even know exist.

And nothing held up for a meaningful amount of time. So what he next made sense. Called his orthopedic surgeon. Got on the surgical schedule. His knee replacement was booked.

Had a date. Then someone mentioned our clinic. Flew in from out of town. Was skeptical. Completely understandable. He kept his surgery on the books because he was genuinely not sure there was anything left to try that would actually work.

So we sat down, we evaluated his knee properly, We performed our protocol, which in his case was a combination of micro fragmented fat and PRP and bone marrow stem cells.

We combined that with precision injection techniques and a targeted recovery framework. Six weeks later, he texts me, He just got off the beach playing beach volleyball with his daughter.

No brace. The man who couldn't walk without a brace was playing Beach volleyball. He called me again recently. Now, I'm not telling you that story to sell you something.

I am telling this because that man had more treatments behind him than almost any other patient I'd ever seen. And the reason that this worked when the others didn't wasn't magic.

It was biology done properly. The right cells, the right combination, but right joint environment. And that brings me to my behavior change for today.

The one thing I want you to start doing differently after this video is I wanted to treat your diet as an active medication for your knee. I don't want to you start that today, this is not a fad diet.

carnivore or go vegan, I'm not going to recommend a cleanse. This is just one shift in your mindset.

Diet, Inflammation, and Knee Healing

Reduce the foods that are actively fueling the inflammation inside your joint. Now here's why this matters and I am going give you both sides of the equation.

If you do end up reducing the inflammatory triggers in you diet, this means processed seed oils, high sugar foods, ultra processed snacks, excess alcohol, Well, the inflammatory environment inside your knee joint begins to change.

The repair cells work better in a low inflammation environment, so PRP works better, microfat works, better your body's own biology gets out of its own way and starts doing what it was designed to do.

Your knee wakes up on a Saturday morning feeling more like a knee joint and less like construction zone. Now, if you don't, you can do everything else right.

You can have the right treatment done by the person like me, the injection, every right exercise. But the inflammation keeps undermining the healing. It's like trying to bail out a boat with a bucket while the drain is still open.

The bucket is real. the effort is really you're still sweating and getting your workout, but the drainage still opens. So you never going to fix the problem.

The good news is that this is one of the most actionable levers that you have. You do not need a prescription for this. you don't need to have a procedure for, this you could start at lunch today.

So just swap the seed oil out for extra virgin olive oil. Add one, just one anti-inflammatory food this week. Those are things like fatty fish or turmeric, dark leafy greens or walnuts.

Cut back on the sugar. Not permanently, not obsessively, Just meaningfully. If you do this consistently, Your knee has a better healing environment and everything else that follows will work better.

The treatments work, better the exercises work. Better and the treatment ends up lasting longer. If you don't, well, then the inflammation keeps compounding quietly and though window that you have right now, the window where you still have cartilage left to protect, it gets smaller.

Not dramatically, not overnight, but cartilages not grow back on its own. So the time to. Protect what you. Have is now. not after more rounds of cortisone have done more damage.

I'm not asking you to eat like a monk, I am only asking to treat your knee like the high performance joint it still can be. Alright, here is your one thing for today.

It takes 30 seconds on the first tee and it is one of the best things you can do for your knees before you ask it to absorb a full golf swing. This one is called rotation over fixed foot.

So what you do is you place your club across your hips, you plant one foot firmly on the ground, and you keep that foot completely flat. Now, rotate your hip over that fixed left and right in a slow controlled movement.

Do this 10 reps for each side. This directly mimics the load your lead knee takes at impact. So what we're doing is we are training the joint to handle rotation with control before we ask it to do it at full speed.

Remember, keep that foot completely flat.

Golf Warmup Drill: Rotation Over Fixed Foot

Why does that matter? Because the two moments in a golf swing that do the most damage to your knee are the downswing and the follow through. This exercise prepares the joint for exactly that and with control, not when you're cold.

Now, for the complete five-minute routine, don't forget, grab the free Ready for Teoff guide at ReadyForTeoff.com. It has illustrated instructions for all six exercises that you can pull up right on your phone right before any round.

If this video gave you something that did not have before, help me out. Share it, not because the algorithm wants you to, but because I promise you, there's somebody in your Saturday group, they're dealing with the same thing and they haven't said anything about it yet.

So forward this, text it. Drop it in group chat. The guy who is getting quieter on the back nine because his knee won't stop talking to him, he probably needs this more than you do.

And if you are watching this and you have already been through the cortisone merry-go-round and somebody is starting to throw around that dreaded S word or surgery, Book a consultation.

Not because I need the business, but because you deserve to know what options actually exist before you make a decision that you can't reverse. And before, you go, don't forget, grab the free ready for tee off warmup guide at readyforteeoff.com.

Five minutes before your round. That's it. Your knee will feel the difference the moment you step onto the first tee. I'm Dr. Guy in Poovendri. Now you know, what most golfers will never find out.