Introduction to Dr. Sabrina Solt

Hey, everybody, welcome back to another episode on our Sexual Health Summit. I'm so excited to introduce you to our next guest, Dr. Sabrina Solt a friend, a colleague of mine, an amazing naturopathic doctor who's going to talk to us not only about the root causes of sexual dysfunction, but how we regenerate, how sexual dysfunction is really connected to regenerative medicine, what that even means, and some really unique options for treatment of healing from the root causes of sexual dysfunction and more things that you have not heard anywhere else on the summit.

So welcome, welcome, welcome. I'm so happy to be spending time with you today. Thank you so much. I'm so excited to be here. I'm grateful you invited me in. I thank you.

And before we jump in, can you just give everybody an update intro, so to speak, on who you are and kind of how you got involved in regenerative medicine, why you're passionate about the topic of sexual dysfunction.

Can you just kind of set the stage for us there? Absolutely. So I'm Dr. Sabrina Solt. Like you said, I'm an naturopathic doctor. I currently have a practice in Scottsdale, Arizona, and we actually serve people from all over the country.

We have people visit us, even internationally as well for the work that we do with actually getting to the root cause of all of these issues and the way that we perform our regenerative therapies.

I got into regenerative medicine back in 2013 and it started with musculoskeletal applications. Actually, I treated a shoulder with pro therapy and I saw how I was able to actually help somebody fully heal without surgery, without drugs.

And it was just kind of like a gateway for me. So after that, I was pretty much sold on the magic of it and I realized, Wow, there's so many applications for this.

And to, you know, give a blanket summary.

Root Causes of Sexual Dysfunction

I tell people there isn't a part of the body that I haven't treated with regenerative medicine, and you can use your imagination for that everything head to toe and the cool thing is, is that it works and it works by actually getting to the root cause and truly healing that tissue, which is wonderful for patients because again, it means that we can save them from years of taking prescription medications and all their crazy side effects or even the hazards of surgery.

So that's kind of where where my love lies. Amazing. And I just love the term regenerative medicine from the standpoint of I think it gets to the roots of even like what we learn in our education as natural passive, like this is like the power of the body to actually regenerate like it's possible when we give it the right signals or the right information, the right data, it's really possible to avoid all these things like you're talking about.

And I want to make sure that we spend a lot of our time today talking about these cool therapies, talking about like the pro therapy, I'm sure some people know about that and other people are like, what is that?

Right. So we've a lot of cool things to talk about. But just to set the stage, let's take a step back. We've talked on the summit before about the root causes of sexual dysfunction, but can you just reset the stage?

Because I know not all of our listeners have listened to every talk out there. And I want to make sure this is very

fluid so you can just kind of reset the stage of like, what are some of the top things?

And we're looking at the root cause of sexual dysfunction. Do people need to be considering? Yeah, such a great question. I think it really is a great lead in to talking about these other therapies because we can understand how and why they're working.

So I categorize sexual dysfunction. It's basically in a fall into three different categories and sometimes people can have a combination of one or more of these categories.

So first one being hormonal disruption, I'm sure you have a lot of amazing expert speakers talking about how hormones can decline in middle age, can decline due to environmental factors, all that crazy stuff.

But ultimately, if our hormones aren't balanced or at optimal ranges, we can deal with some degree of sexual dysfunction, both for men and women. The second thing is that there can be some sort of nervous system disruption.

So in order for sexual function to happen seamlessly and to be able to go from arousal to orgasm, we need to be able to activate both parts of our nervous system, both the parasympathetic and the sympathetic part.

There's a lot of things that can interfere with this, everything from certain medications to even having a drink, just being under chronic stress. All those things can negatively impact the nervous system and lead to sexual dysfunction.

The third and final thing, and this is where a lot of the regenerative therapies really focus on, and it has to do with blood flow. So people miss this at the start.

Old men, it's pretty obvious, right? We get that very, very obvious physical representation of that blood flow when an erection is achieved. So we think, yes, of course, that's absolutely part of, you know, the sexual health.

But when females are concerned, that's actually a blood flow issue as well. So a lot of people don't know this, but female lubrication is actually an ultra filtrate of blood plasma.

So we need to be able to get adequate blood flow to the to that tissue in order for that to secrete across that membrane and actually produce lubrication for just the very basic initial parts of our arousal system.

So those are the three main categories that these dysfunctions can fall into. The hormones, the nerves and the blood flow. Yeah, it's a good reminder that all of these areas are so interconnected to the rest of our body and that oftentimes, I think with libido and sexual dysfunction, it's so easy to be like at certain points of life for people to be like, Oh, well, this doesn't matter to me as much as it used to.

Regenerative Therapies for Circulation

And I think there's several problems with that. But I think one of them is like really relate it to what you're talking about, right? Like if you're having these problems, it's a sign of something else as a sign of blood flow, of sign of nerves, a sign of hormones and these things don't just affect our genitals, they affect everything.

So it's a really good way of setting the stage that you did. And you have some of the coolest treatment. So do you think it would be maybe like a benefit to kind of break these down from like some of the really cool treatment options you have from stem cells, the peptides process, all these other regenerative therapies, should we break them down and kind of talk about them in categories to say, okay, well, if it's a circulatory root, for example, of our circuitry root cause, I should say, what are some of the unique therapies that you have from a regenerative standpoint that would say fit into each of these categories?

Should we talk about it from that standpoint? We can talk about for however you want. That sounds fine. We can definitely dive into the circulatory stuff first.

I think that's super cool. Yeah. All right. Go ahead. No, when we're talking about circulation issues, there's a couple of things to consider with that.

And the first one being, is there actual damage to the blood vessels themselves? And this is where something like PRP and actual stem cell therapy really does shine because they have the ability to actually regenerate the vessels.

Now, we see this a lot in patientswho have type 2 diabetes, and it has to do with, again, the same sort of vessel damage that occurs to create the neuropathy.

And we can also use the stem cells to treat that too, or the PRP to treat that as well. For those people who don't know what PRP or stem cells are. So PRP stands for platelet rich plasma and is a product that we get from your own blood during a simple blood draw procedure.

The amount of blood that we take is about a 10th of what you'd given a blood donation. So not a lot by any means, but certainly enough for us to work with.

And then, of course, we have to centrifuge it, prepare it, and then we do actually inject it into the area now before people get like so freaked out over needles in those areas, I do have to mention that it is done as gently as we can, the smallest needle we can possibly use, ample numbing cream.

And I've never had anybody tap out. So we know and we know that it's very effective. We get some amazing results with that. Now, stem cell therapy can get a little bit more nuanced.

So currently in the United States, there's a couple of ways that we can get stem cells for clinical use. First way is taking them from your own body. So it usually comes from either your own bone marrow or your own fat tissue.

And there's also products on the market that are birth tissue products. So products that are created from either umbilical cord tissue, umbilical cord blood or amniotic fluid.

And these products, there's kind of a divide in the stem cell space where people will tell you, yes, these absolutely do contain stem cells and people that will say, no, these can't contain stem cells.

They don't contain stem cells. The truth is that the truth probably lies somewhere in the middle. So some of the companies will do processing and and what not to actually try to maintain the stem cells in there.

But a lot of the companies don't and just has to do with the fact that they have to undergo cryopreservation and irradiation before they actually make their way to the consumer, which does put a lot of stress on the stem cells and possibly causes death, doesn't mean these products are bad.

They still can be very, very effective because they're still the presence of a lot of growth factors in there, which means it's going to behave similar to the way PRP does.

But ultimately, again, it becomes down it comes down to choice, too. And ultimately, we like to do the actual real live stem cells that we can get from your own body.

And that same day procedure. So questions on any of that. Yeah, yeah. I'm so glad you're talking about some of those differences, first of all, because I think there's a lot of confusion on the market.

And, you know, I hear that, too, that like chatter between these two different schools of thought on on stem cells. So I think one of the questions that might come up is a little bit more on growth factors, for example.

So, you know, you're talking about stem cells, you're talking about PRP, you're talking about these things that are going to increase these growth factors in the body.

So what is that going to do from a circulation slash sexual dysfunction perspective specifically? Absolutely. So they will actually work to rebuild those blood vessels and increase blood flow.

They'll actually even do a process called angiogenesis where they can build new blood vessels, too, which is amazing. And that's exactly what we want because not only is that going to heal the arousal mechanism, but by simply bringing more blood flow to the area, you're actually allowing the transport of more nutrients and all the other healing factors that are already present in your own body to occur even better.

So we love it for all those reasons, and a lot of the times we can actually even get away with just one treatment. Very rare circumstances or very severe circumstances, I should say, may warrant more than one.

But a lot of the time many of our patients get anywhere from a 60 to 80% improvement, if not more, after just one session. So then are you seeing, for example, with just one session in male, say, with a circulatory issue that might lead to erectile dysfunction or from the female standpoint, a circulatory issue that might lead to something like vaginal dryness.

Are you seeing that sometimes with one treatment, those symptoms completely eradicate? Absolutely. And a lot of the time that happens within the first 30 days to six weeks, so relatively fast.

And some people have been dealing with this stuff for years, but it can happen pretty darn quickly. Now, of course, I should I should say this. That's usually not the only thing we're doing.

If somebody is coming to us, we are absolutely doing our due diligence and taking their history and figuring out, okay, do we need to add in supplements?

Do we need to adjust your hormones? Do we need to remove some toxicity in your life? Right. The last thing I want is for some you to think, oh, my gosh, yes, the stem cell is this magic bullet that's going to fix all my issues that we have and take any ownership over it.

Because ultimately, if you're coming to us and it's a circulatory issue caused by type two diabetes and you're not ready to quit that sugar, there's not going to be a lot that we can do to help.

Yeah. Thank you for saying that. I imagine you hear in your practice, it's a similar thing that I do in mine, which is people wanting that like one root cause around like, oh, I found the thing instead of that orientation to like we found the things that are actually at the root there.

So I imagine then I know the answer to this question, but I think we should just make sure, which is from a standpoint of you're working on all these routes, somebody gets stem cells, somebody gets PRP.

Whatever you decide from a regenerative standpoint is correct.

Maintenance, Candidacy, and Stem Cell Sources

They say they get great results with one treatment. What are you doing from a maintenance standpoint? Is it mostly then working on these other routes the blood sugar, the hormones, the other types of root causes that come up?

Or is there something else that you see come up a lot from a making sure the treatment lasts perspective? Oh, that's such a good question. So ultimately, the first thing I want to mention is that when we're talking about anything that we're regenerating or healing, generally speaking, the healing that you get is yours to keep.

Just like if you've ever gotten a cut on your body, right? Everything that's ever healed on your body was technically a stem cell mediated response or stem cell mediated process, and you never worried about a scar just randomly reopening again in the future.

Right, because the healing that you got was yours to keep. Now, that doesn't mean that you're never going to fall

again and you might not get another cut in that area.

So similar thing, right? If you're going to go back to the behaviors and the habits and the things that got you there in the first place, there is a chance that you can bring it back.

But if you maintain all the things that we're telling you to do, keep the healthy diet, get some exercise, get sunlight, get rest, reduce your stress, all the things that we preach all day long as you're doing those things again, the healing that you get is going to generally be yours to keep.

Now, of course, we're all degenerating. We've all been degenerating since we were born, and nobody likes to have that conversation either, but it's the truth.

So there's still going to be just that natural and like that. It's just going to happen that that process. So again, the more that you can do in your own personal life, in your own decisions that you make on a daily basis, just continue to promote health.

The longer your results will, quote unquote last. But again, they're not just going to randomly go away, weren't they? Yeah, that makes perfect sense.

And then when would you say advice somebody and I know this is a very difficult question because it's so unique person to person, but are there any like big kind of rules that you would say follow to decide PRP is going to help with a regeneration for somebody versus somebody like stem cells?

How are you determining that? How does someone know what to ask for? Think about those kind of things. Such a good question. So we actually do offer complementary discovery calls where we go into this with somebody.

So a couple of things that we consider. So we have we have a few hard qualification questions so we won't treat anybody with active cancer. We won't treat anybody who is a smoker because cigarets kill stem cells and that has a certain there's a few other things as far as medications that you might have taken or have been taking that we need you to be off of.

But those are really big ones. Another one that we have and this might rub people the wrong way, but we do have a BMI requirement. So we do want people to be below a 30 on BMI.

And this has to do with don't shoot the messenger. But it is the fact that the adipose tissue, once it gets into a obese state, actually gives off more inflammatory cytokines than the fat tissue of a lean person.

And what you're doing with that is that you're actually trying to heal a system, an environment that's toxic to begin with. So, again, we can't heal in a toxic environment, so we need to be able to work with that patient, which we we often do to get them down to a a physical state that's going to be more conducive to healing.

So that's another benchmark for us. But when it comes to deciding between PRP and stem cells, it usually has to do with two things. And that's your age and the severity of the situation that you're in.

If you're relatively young, pretty decent health, we can probably get away with doing PRP and of course, if it's, you know, pretty mild, but if you it's very severe, you're much older.

We're talking over 60. We generally have to do stem cells at that point to really get that regeneration happening. And it's really, really helpful. And I imagine, too, you're also seeing certain links between, you know, it's like you're talking about prolonged therapy even for pain, right?

That was for pain, is that correct? Yes. So you're talking we're talking about stuff like that. And another thing that I think is further down route but definitely connected is like people that are in pain, back pain, frozen shoulder pain, whatever it is, it's nobody feels like generally having sex when it's really difficult to move, right?

So it's like maybe it's not a direct cause of, say, erectile dysfunction or vaginal atrophy or those sorts of things. But from a desire perspective, like usually with pain, it's like, let me just figure out how to get through the day and survive, not have sex and thrive and enjoy pleasure.

Right. So do you want to talk at all, too, about some of the things? Because I know what I've seen from just talking to other people that I've done some of these therapies is that, like you said, like these therapies can work when surgery is the only option and sometimes when it when surgery doesn't even work.

So do you want to talk a little bit about that? So I think it is still linked to the sexual dysfunction piece, that pain and the inability to thrive well.

All the time. Yeah, we we actually treat a ton of patients with musculoskeletal pain disorders. Things like low back pain can completely put you out for that.

You can just getting into a comfortable position for intercourse to occur. Right? Knee pain, neck pain, shoulder pain, hip pain, leg, you name it, it can absolutely affect it.

And then the other thing that people may not be paying attention to is that a lot of these pain medications, they can dull more than just the pain. They can dull sensation.

Peptides for Libido, Healing, and Blood Flow

They can dull your your nervous system completely down so that you can't go into, you know, that parasympathetic to sympathetic transition. So all these things can absolutely affect a person's their desire and then, of course, the physical ability to actually engage too.

Yeah, that makes a lot of sense. And I want to be clear because I wasn't clear in your explanation. Do you actually have you have a tendency to have a preferred way of using stem cells, like collecting from the embryonic fluid or the umbilical versus the say the bone.

So you have a right way. Yeah, my preferred is actually from a patient's own fat tissue, so we don't want to we would still want some fat on if we wanted in our Goldilocks amount.

And generally speaking, what I tell people is, is if we can pinch about two sticks of butter on either your lower abdomen or your love handle area, that's the perfect amount.

That's what we need. And this is why there's so much research surrounding just how effective the stem cells from adipose tissue are, because they are the mesenchymal stem cells, which is the ones that we want to work with in a clinical setting.

And it's great because we can actually guarantee that they are alive. We can guarantee that there is no risk of anything like disease, transmission or rejection because we're taking them from your own tissue and giving them right back to you.

And it is done as a same day procedure. We don't even have to put you under. So we do, of course, very generous, local numbing on the area. But we don't have to actually put you to sleep.

And, you know, in a in a total of about 3 hours start to finish, we take out your stem cells, we process them, we give them back to you, and you get to go home and relax.

That I yeah. It's it's just another example, right, of like the power to heal is like so much of it is within when we direct the body the right way and give the body the right messengers.

So I love that. And let's move on and talk a little bit about peptides and what are your favorite peptides? The world of peptides is growing continually and we're learning so much every day and new ones on the market.

But from a true sexual health as well as like the root causes of sexual dysfunction, what are you seeing to be some of the most predominant peptides that are effective in your practice?

Yeah. So let's start with females because females can have complex libido issues, which I don't know. I have to explain to you, I know you are the expert in this area, one of the peptides that I like to use for women who and this is usually when we've tried other stuff first because I kind of have a hierarchy of things that I go through and it's usually in my three step framework, right?

It's the hormones, it's the nerves, it's the blood flow. So if we've dialed in her hormones, right, we've got her testosterone, her estrogen and progesterone, they're all optimized.

Her cortisol is low. We've got the blood flow stuff worked out. We have the nerve stuff worked out. One of the things that I like to actually look at as a peptide called 141, and this is a peptide that can be delivered as a subcutaneous injection.

It can also be delivered as a nasal spray. Most common side effect or I won't even call it a side effect. Some people can feel nauseous from it. It doesn't happen everybody. But it's some people.

But what I can do is it can actually upregulate a woman's desire and it can produce results in as little as a couple of hours, some women even faster.

And sometimes this can just be the initiation that they need to start to get it going. And what I found in clinical practice, and maybe you've seen the same thing too, is that sometimes women can go such long periods without having intercourse that they kind of forget that it's a good thing, that it's something they want to engage in, that it's something that can be safe and fun and enjoyable.

And sometimes the use of the C 141 can get them over that hump where I mean, no pun intended with that, but get them get them over that that barrier where that now it becomes a it's a reminder like, oh yes, this is what it feels like to want to engage, to feel aroused, to feel like I want to pursue intimacy.

And it can be a short term thing that we use in that regard. Yeah, it's amazing. And you see so much more results. It sounds like so many more results with women versus men for the 141 for sure.

Men I feel like don't have the same sort of root cause of forgetting what it's like to engage in intercourse and kind of need that reminder. So we use that generally for that.

Now, men, there's a couple of peptides that I consider for men, and it's usually in men who have a diagnosis of Peyronie's in addition to erectile dysfunction.

So of course we work on the other stuff, but there's two peptides that I'll try to use for men for that. One of them is called BPC 157, and that one week we refer to as a general healing peptide.

It can work on blood flow, can work on tissue, it can it can do a lot of stuff. So sometimes with Peyronie's, if we've already done the injections, we've already done the shockwave trying to break down that tissue if there's still just kind of some stuff lingering.

The addition of BPC, one by seven can sometimes be very, very helpful for just helping to overall remodel and heal that area. And the second one similar thing, it's one called it's the copper peptide.

Casey, you and the copper peptide is amazing at college and synthesis and just producing more effects on the skin. So again, great for helping to remodel any of that scar tissue that might be present in those Peyronie's patients.

Amazing. And another thing that I think is important to talk about, because I'm hearing this happen a little bit for my patients around just going online and just basically even even some people buying injectables direct to consumer.

And I don't know exactly where this is happening from, but I think there's an element of not understanding the importance of the quality of these things and the safety profile and all of that.

So can we talk a little bit about like the sourcing of those and how important that is to consider? Yes. So oh my gosh, most the majority of peptides are prescription only.

However, as you're stating, there are websites where people can order direct to consumer under the guise of for research use. Only where we get into trouble with this is that we can't guarantee sterility, we can't guarantee potency.

And of course we just don't know how you're then administering it at home. Where did you source your needles from? Where did you source your syringes from?

Are you doing proper, aseptic or sterile technique when you're doing these administrations? And then of course, where are you getting your protocols from?

There can be a lot of stuff that goes wrong with it. I'm sure there are people out there that have experience great success with it. They're obviously not coming into my office, but I have heard pretty, pretty intense horror stories of people who have suffered pretty severe adverse events from using these peptides.

Now, ultimately, I understand why people would do it. It's often you can get it cheaper, you don't to deal with a doctor's visit, you don't have to, you know, you can kind of be your own provider, but I would just still urge immense caution and try to work with the provider.

Now, one of the things you can get BPC 157 direct to consumer through pretty reputable companies. So that's one of the ones that's safe, but that is only in the oral version.

Some there are some products out there that will actually contain the copper peptide in them for topical use, things like certain creams and whatnot using the beauty industry.

But you're not going to be able to usually find the PG 141 or the injectable BPC or the injectable copper peptide without first talking to your doctor and ultimately, here's the other thing, too.

When you're working with a doctor who's trying to solve these problems for you, we're looking at the whole picture. Right. I also don't think that peptides are another miracle cure all or that are worth the time and the trouble and the cost of the other stuff isn't dialed in.

First, they're kind of the cherry on top of the cake where let's dial in everything else and then let's amplify it and get things next level better.

Oxytocin, Shockwave Therapy, and Closing Resources

And that's what I use peptides for at least. Yeah. I think that's a huge thing that I think there's two huge things that I hope everybody's taking away from this conversation.

One being everything you're doing in the clinic is like you're doing so many different things to get to the root causes and it's really all of these, this approach where you're looking for all these different things that are getting the results that combined with the cherries on the top, right?

There's all these unique therapies that get people that that portion when other things aren't working, just get people over that hump, like you said. So then what about any peptides that are more directed to circulation and to getting the blood flow to the genitals?

Since that is such a common root cause, are there any peptides you use more specifically for the circulation? So there's one peptide called TB 500 that's a really, really great peptide for amping up circulation for pretty much

anywhere in the body.

So we can beyond sexual dysfunction, we can use it for joint issues, for muscle cell issues, you name it. It's just phenomenal for that. And I do want to make an honorable mention for some of the growth hormone releasing peptides.

So things like Somalian Merlin with the CJC 1295, these are just overall phenomenal for getting us that increase in our growth hormone levels. Now you can pop into Google benefits of growth hormone.

You're going to see this beautiful list of like like the promised land. It is amazing. And of course, sexual function is one thing that gets looped in there with that, but it's not the main thing that that peptide is going to do.

But it is something that I usually like to stack when we're trying to do again, the cherry on top optimization. So people who are already working out, people who are already eating healthy, people who already have their hormones dialed in, you throw in one of these growth hormone peptides and now all of a sudden you've got better hair, you've got better skin, you have more energy.

Your brain's just like on fire. You're feeling so good. And of course, the sexual function can go up another level because we're getting more blood flow, all that good stuff.

And then what about the nervous system? Anything that you're seeing that you're using to really calm the nervous system, to balance the parasympathetic and sympathetic components of the autonomic nervous system, anything you're doing there that's super unique.

So I don't know if it's unique, but there is something that I use and it's not a peptide, it's actually a hormone, but it's oxytocin. Yeah. So yeah, I'm sure.

I don't know if you have someone else talk about it as well, but this is. Yeah, I'll tell you who I love this for. I love this for the working woman who has a really high stress job, who comes home at the end of the day.

And the last thing she wants to do is like, look at her husband. She has to put on those sweat pants just to sit down in front of the TV, have a snack, and like intimacy is the last thing on her mind.

This is the person that I'm like, you know what? On your way home, you're popping that oxytocin lozenge, or you're taking that nasal spray. It's that when you get home, you are relaxed enough that if the invitation is there or that you want to initiate that intimacy with your partner, you're ready to do it.

So we're kind of bypassing, getting to the oxytocin and lovey feeling by just giving it right away. And then, of course, you're still going to get that natural oxytocin release once you actually start to engage in intimacy, which is just like chef's kiss, cherry on top.

Yeah, I can tell you from my personal experience, I use nasal spray of oxytocin that way and it's phenomenal. it's phenomenal. It's like come home from a very long day like you're talking about.

And it's such an instant state shift that is so palpable and so helpful for like both. I feel like the internal stress system as well as a relationship.

So I'm so glad you brought that up. No, but we haven't talked about that yet. So, yes, as far as settling the nervous system goes, I find it is just like this simple hack that takes you from stress to not stress.

And in fact, we actually even keep it in the clinic for our patients who get that white coat hypertension. We keep the lozenges. And you know what? If we start noticing that they're getting a little high blood pressure before or after a procedure, because, again, we do a lot of procedures, hit them with that oxytocin.

They get to relax in a recliner and it brings things all right back into a neutral state. It's just beautiful. Yes. I love that

so much, well there any thing's that you feel like we haven't covered today and this topic of obviously there's so much we haven't covered, but anything that you feel like is super important.

And we got to say this, this is really important for people to understand. I think the only thing that I would like to just give an honorable mention to is the use of shockwave therapy for a lot of sexual dysfunction.

What's really cool is that shockwave has come a long way. It's been around for years, but we really only recently been utilizing it for sexual dysfunction and it can work phenomenally well.

Like generally speaking, we start people in anywhere from 6 to 12 sessions, usually twice a week, sometimes three times a week. And there's actually even home device, home devices that people can purchase now, which is really amazing.

So you don't need to walk into a doctor's office. You do it in the comfort of your own home. But what Shockwave is really cool at doing is it actually causes micro traumas to those blood vessels, which encourages your body to release its own stem cells, release its own growth factors, and start that healing and remodeling process.

And this is, again, it's at home possibly if you bought those at home devices, regenerative medicine in a certain way. So I do like that as an option for some people, usually only if it's mild in severity.

So for men with mild erectile dysfunction, even some women, especially if you're just getting that vaginal dryness, that can be a really, really great option for you as well.

I know people are wondering if it's painful. So what is the answer? No, not painful at all. You actually really don't even feel it. You shouldn't feel it any way if it's if it's performed properly, maybe just a slight tapping, but that's it.

And there's no actual shocks being delivered. Okay, perfect. I want to make sure everybody knows how to get a hold of you. You have a giveaway that is on the Summit platform here that I want to make sure that people know about.

So can you tell us about all of that, please? Yeah, I have a guide for the guys out there and you know, women to this actually it can apply to you as well.

But is the Top 10 Boner Killers Hiding In Your Home So give that a download and hopefully you can learn something. And it's just it's a really simple guide to read through if you want to find out more about our work.

Our website is stemcelltherapypro.com. Again, we are located in Scottsdale, Arizona. We do have patients that visit us from all over the country and even internationally and we would love to work with you if you think it'd be a good thing for all of us to work together.

Perfect. Awesome. I thank you so much for your time today Dr. Solt it's been a true pleasure and thank you all for listening to another episode. I'm really excited to see everybody on our next interview.

Thank you so much.