



**EMERGENCY/URGENCY TREATMENT FOR ARACHNOIDITIS**

Methylprednisolone (Medrol®) 6-day dose pak

**PLUS**

Ketorolac 30-60 mg, IM for 3 days

**PLUS**

Minocycline 100 mg 2 times a day for one week

**WHEN AND WHAT IS AN EMERGENCY**

**Any patient, after a spinal tap or epidural, who develops severe back pain plus weak legs or urination difficulty, is a candidate for emergency/urgency treatment.**

**Note: MRI evidence of nerve-root clumping or adhesions may not show for several weeks after the initiating cause.**

**After the 1 week of emergency treatment switch to long-term treatment protocol. Obtain at [www.arachnoiditishope.com](http://www.arachnoiditishope.com)**

- ❖ Too late? This treatment can be attempted up to a year after the initiating cause.
- ❖ All health professionals need to know that cauda equina neuroinflammation and/or arachnoiditis occurs in a very small percentage of patients following a spinal tap and epidural injection even if the procedure is expertly done with medical indication.

**Contact Information:**

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