



A PAIN CONTROL PROGRAM FOR PATIENTS WHO CAN'T OBTAIN OPIOIDS

Today many severe chronic pain patients are being forced to reduce or even totally stop their opioids. Over the years we have developed a program for withdrawal or reduction of opioids. The program consists of prescription and non-prescription drugs (mg-milligrams).

NON-PRESCRIPTION

GO  TO A HEALTH FOOD STORE TO OBTAIN SUPPLIES

1. TAURINE: Take 2000 mg every 4 to 6 hours
2. TRYPTOPHAN: Take 500 to 1000 mg every 4 to 6 hours
3. NATURAL PAIN RELIEVERS/ANTI-INFLAMMATORY AGENTS:
Take 2 of these. Follow instructions on the bottle.



PALMITOYLETHANOLAMIDE (PEA)
CBD OILS/EXTRACTS
KRATOM
CURCUMIN/TUMERIC

GLUTAMINE/GABA
SERRAPEPTASE
WHITE WILLOW BARK
BOSWELLIA

4. FOR SLEEP: Melatonin 10 to 20 mg and Benadryl 25 mg.

PRESCRIPTION DRUGS

Ask your local physician or nurse practitioner to prescribe 1 or more of the following:

1. CLONIDINE. 0.1 mg. Take 3 to 4 times a day.
2. AMPHETAMINE SALTS (Adderal®), 10 -20 mg **OR** METHYLPHENIDATE, 10-20 mg. Take 2 to 3 times a day.
3. TOPIRAMATE (Topamax®), 50 to 100 mg twice a day **OR** GABAPENTIN, 100 mg 3 times a day.

Note: Chronic pain patients should immediately plan on getting a low to moderate dose of opioids from their local, personal physician and not expect to obtain opioids from a pain specialist or clinic.

The Arachnoiditis Education Project is provided by the Tennant Foundation.

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