



ADHESIVE ARACHNOIDITIS

Bulletin 18-Revised

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THERAPEUTIC TRIALS

WHAT ARE THEY AND WHY ARE THEY ESSENTIAL?

The most common questions we get are: (1) Do I have AA? (2) If I have it, what do I do now? and (3) Why has my pain control stopped working?

A therapeutic trial is used to find medication that will work for you.

If you relate to one of the above 3 questions, you are a candidate for therapeutic trials with ketorolac (Toradol®) and methylprednisolone (Medrol®).

KETOROLAC AND METHYLPREDNISOLONE HAVE BEEN THE MOST CONSISTENT, EFFECTIVE DRUGS TO CONTROL THE NEUROINFLAMMATION OF AA AND KEEP PAIN CONTROL WORKING.

PROCEDURES

KETOROLAC TRIAL

Take an injection or troche of 30 to 60 mg on 2 consecutive days.

METHYLPREDNISOLONE – TAKE A 6-DAY DOSE PAK (MEDROL® IS THE TRADE NAME)

INTERPRETATION

If, after or during the therapeutic trial, you feel better, sleep more, have increased energy, less pain or other positive feelings, you know that you have uncontrolled neuroinflammation and need to take ketorolac and/or methylprednisolone.

Our complete medical protocol is available on request or can be obtained from our website (www.arachnoiditishope.com).

USUAL DOSAGES

- a. Ketorolac 30 mg by troche or injection on 1 to 3 days a week;
- b. Methylprednisolone 2 to 4 mg, oral tablet on 3 to 5 days a week.

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