



**Arachnoiditis**  
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**HOW TO SAFELY TAKE KETOROLAC (TORADOL®) AND**  
**METHYLPREDNISOLONE (MEDROL®)**

**FACT:** We have found that ketorolac (Toradol®) and methylprednisolone (Medrol®) are almost essential in the effective treatment of lumbar-sacral adhesive arachnoiditis (AA).

**THE PROBLEM:** Many doctors and patients have been erroneously led to believe that these two drugs are too dangerous to use.

**KEY MESSAGE:** Both Toradol® (30 to 60 mg) and Medrol® (2 to 4 mg) should only be taken maximally on 2 to 3 days a week. On this basis the risk is limited.

**RISK vs BENEFIT**

**Answer:**

The risk vs benefit of developing serious complication of AA is greater than the risk of Toradol® and Medrol® if these 2 drugs are used as we recommend.

**Safety Measures with Toradol®**

- a. Never use oral Toradol®
- b. Use Toradol® as a compounded troche or as an injection
- c. Take blood urea nitrogen (BUN) and creatinine blood tests every 6 to 12 weeks if the patient is high risk for kidney disease. Risks are for patients with diabetes, one kidney, or are over age 70.

**If there are safety or sensitivity concerns, Toradol® and Medrol® can be taken at a low dose once a week.**

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