



BEST DOCTORS TO TREAT
INTRASPINAL CANAL INFLAMMATORY DISORDERS

Historically and currently rheumatologists are the physicians who specialize in treating inflammatory and autoimmune disorders. They know how to safely and effectively prescribe potent anti-inflammatory medications including corticosteroids and a new class of anti-inflammatories called “biologics”.

Some generalist physicians and nurse practitioners are now finding that the inflammatory diseases of the lower spine and spinal canal are interesting, challenging and a new venue for them in medical practice.

To date, the neurologic and pain specialties have shown little interest (hopefully this will change) in the medical treatment (i.e. corticosteroids, ketorolac, hormones, etc.) of spine and intraspinal canal inflammation.

Since starting the Adhesive Arachnoiditis Research & Education Project we have learned much. An important discovery is that AA is in a category or class of intraspinal canal inflammatory disorder of which the major ones are:

Degenerative/Protruding Discs
Perineural/Tarlov Cysts
Adhesive Arachnoiditis

Chronic Cauda Equina Inflammation
Plain Arachnoiditis of Canal Covering

In addition, we have learned that these conditions have an inflammatory-autoimmune component which may cause one or more of the intraspinal canal inflammatory disorders:

Ankylosing Spondylitis
Ehlers-Danlos Syndrome
Brain Injury

Psoriatic Arthritis
Sickle Cell Disease

Systemic Lupus
Post Viral or Bacterial

SUMMARY: Clinical evidence compels the concept that intraspinal canal inflammatory disorders must be individually diagnosed, and treatment must include inflammatory suppression with medications that cross the blood brain barrier and enter the spinal fluid.

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336-338 S. Glendora Ave., West Covina, CA 91790-3043*

Phone: 626-919-7476 Fax: 626-919-7497

E-mail: tennantfoundation92@gmail.com www.arachnoiditishope.com www.intractablepainsyndrome.com

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