



## **THERAPEUTIC INNOVATIONS** **WITH PALMITOYLETHANOLAMIDE (PEA)**

PEA suppresses neuroinflammation and regenerates (heals) glial cells in the central nervous system. It is a natural body hormone substance that is being used with good results by persons with adhesive and non-adhesive arachnoiditis. There are 2 common ways it is being used, but a new therapeutic approach has been developed for central pain. This condition is characterized by constant pain, cold hands/feet, and periodic elevations of blood pressure, sweating, pulse rate, and temperature. Central pain often accompanies the pain of AA.

**Dosages Used:** PEA comes in 300 and 600 mg capsules. It has been combined with luteolin, serrapeptase, and quercetin for additional anti-inflammation effect and prevention of Epstein-Barr reactivation.

### **Current Therapeutic Uses:**

1. As needed for pain flares or exacerbations. A dose of 300 to 600 mg is the usual dosage used for temporary flares or exacerbations.
2. Maintenance to suppress inflammation and reduce pain. PEA is being added to a medical protocol that may include low dose naltrexone, opioids, corticosteroids, anti-inflammatories, peptides, or hormones for boosted or added effectiveness. Dosage has ranged from 600 to 1200 mg a day. A dosage of 600 mg taken twice a day has been the most effective.

### **New Innovation and Treatment of Central Pain (also called neuropathic, brain, central, sensitization, glial inflammation, centralized, or secondary)**

The European pain specialist, Prof. Jon Keppel has developed an innovative protocol with PEA, and he has been achieving remarkable results. Dr. Jacob Teitelbaum, arguably the “top gun” in biochemical pain relief, has endorsed this new innovation. Start 600 mg twice a day for one month. Then raise the dose to 1200 mg twice a day for two months. Substantial pain relief is noted in about the 3<sup>rd</sup> week.

**Our Recommendation:** We believe every person with AA and central pain as defined above should start the Keppel protocol. Take 600 mg in the morning and evening for one month. This is the most encouraging treatment for AA and central pain to come along. If you have no pain relief after 4 weeks the medication can be stopped. Persons taking high dose opioids should definitely attempt this treatment to hopefully reduce their opioid dose.

Reference: Teitelbaum J. Pain relief in 3 simple steps. Townsend Letter, Sept 30, 2025.