



CAUSES OF DETERIORATION  
IN ADHESIVE ARACHNOIDITIS (AA)

**Recognition of Deterioration**

Leg or foot weakness, less bladder or bowel control, pain flares hard to stop, unusual skin sensations, feet burn.

**No. 1 Cause: Disease is Worsening**

Disease is worsening and more inflammation is in cauda equina nerve roots. Note: The best treatment to prevent deterioration, in our experience, has been low dose, intermittent (1 to 3 times a week) methylprednisolone and ketorolac.

**No. 2 Cause: Hormone Deficiency**

Pain, AA, and opioid drugs may all cause a hormone deficiency of cortisol, DHEA, pregnenolone, progesterone, estradiol, and/or testosterone. A blood test will determine a deficiency and need for replacement. Note: A long-standing measure to prevent hormone deficiency is daily use of pregnenolone and/or DHEA, 100 to 200 mg, as these 2 hormones make all the others.

**No. 3 Cause: Epstein-Barr Virus (EBV) Reactivation**

The new blood panel test for EBV will determine if you have autoimmune complications and/or if the virus has reactivated which will produce cauda equina inflammation, pain, and deterioration. Protocols for both EBV autoimmunity and reactivation are posted on our website.

**First Step if Deterioration is Present**

A 6-day Medrol dose pak is recommended as a first step in stopping deterioration. If one's symptoms improve with the pak it tells patient and doctor that a more potent anti-inflammatory/autoimmune approach is needed.

**Deterioration Protocol**

Arachnoiditis Hope has developed what we call a "Turn Around Protocol" to stop deterioration. It is a 3-week trial with 3 different, non-prescription drugs. Available on request.