



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.