



PEPTIDE/HORMONE COMBINATION THERAPY

A New Approach to Neuroregeneration

In order to permanently reduce or eliminate severe chronic pain, there must be some regeneration of damaged or injured nerves. The term for this process is neuroregeneration. To date, neuroregeneration has been an illusive goal. We are pleased to report that the combination of peptides and hormones in some adhesive arachnoiditis patients seems to permanently reduce pain. This can only occur with neuroregeneration.

Healing Hormones: Recent studies have determined that the spinal cord produces a set of hormones called "neurosteroids." Their purpose is to heal or regenerate damage to tissues in the spinal canal including the arachnoid membrane and cauda equina nerve roots. These hormones include pregnenolone, dehydroepiandrosterone (DHEA), progesterone, estradiol, and testosterone.

Hormones are the Energizers: Hormones act as an energizer or catalyst for peptide metabolism.

Healing Peptides: Peptides are naturally made by the body and have many different functions including tissue healing and regeneration. They are composed of chains of two or more amino acids. Man-made peptides have been developed and are now commonly used in medications with insulin being the first one. Synthetic peptides that promote tissue healing and neuroregeneration are now available.

Clinical Observations: Arachnoiditis Hope is receiving regular reports from persons with AA who are using a combination of peptides and hormones. The major symptom improvements being reported are pain reduction and the need for less medication. Other positive reports include improved leg and foot strength and bladder function.

Which Hormones and Peptides? The most popular peptide is body protection compound (BPC-157) and the most popular hormones are colostrum and DHEA. The Table lists peptides and hormones being used. To date, we don't have enough information to say which combination is "best."

<u>Peptides (Dosage is on Label)</u>	<u>Hormones</u>
BPC-157 (Body Protection Compound)	DHEA, 100 to 200 mg a day
KPV	Medroxyprogesterone, 5 to 10 mg a day
Thymosin	Colostrum, 1000 to 2000 mg a day
ARA-290	Pregnenolone, 100 to 200 mg a day

Safety: The peptides and hormones being used appear quite safe. We have not received notice of serious side effects.

Recommendation: We highly recommend that persons with AA embark upon peptide/hormone therapy. The rationale of this combination is sound and enough reports suggest this may be the best approach to neuroregeneration and permanent pain relief.

References

1. Compagnie NA, et al. Neurosteroids biosynthesis and function of these novel neurotransmitters. *Front Neuroendocrinol* 2000;21:1-56.
2. Jones KJ. Gonadal steroids and neuronal regeneration: a therapeutic role. *Adv Neurol* 1993;59:227-240.