



HERBAL ANTI-INFLAMMATORY AGENTS FOR SPINAL INFLAMMATORY CONDITIONS

Arachnoiditis Hope constantly reviews cases of not only arachnoiditis but of persons who also have multiple degenerated discs, chronic cauda equina inflammatory disorder, and Tarlov cysts. All of these conditions are associated with inflammation. We have identified these herbal anti-inflammatories as being the most popular herbals used to suppress spinal canal inflammation.

Curcumin/turmeric*

Quercetin

Luteolin*

Serrapeptase

Astragalus*

Andrographis

*=Epstein-Barr Prohibition

Recommended Use: The best use of herbs is to supplement the prescription anti-inflammatories methylprednisolone, ketorolac, diclofenac, and naltrexone. Herbal anti-inflammatories do not substitute for these agents. We recommend that persons select two of the herbs listed here and use them on alternate days to prescription drugs. Dosage is on the label.

Epstein-Barr Prohibition: Studies have shown that curcumin, luteolin, astragalus, and andrographis may prohibit reactivation of Epstein-Barr. This is an added benefit.

Pain Relief: These herbs are not taken for immediate pain relief but for prevention of tissue destruction which would cause future pain.

Immediate Pain Relief: Some of the herbs have been combined with palmitoylethanolamide (PEA) to get immediate pain relief. Two such products are Mirica™ and SciatiEase™. These products are highly recommended to not only suppress inflammation but enhance daily pain relief.

Degenerated Discs: Discs that herniate or “slip” are inflamed. To prevent further degeneration, herniation, and arachnoiditis, herbs may help. Herniated discs may lead to adhesive arachnoiditis.

Adhesion Dissolution: Serrapeptase has the ability to dissolve adhesions. We have some reports that it also provides same-day pain relief.

Summary: Some herbal anti-inflammatories are now very popular for treatment of arachnoiditis and other inflammatory spine conditions. They are not substitutes for prescription anti-inflammatories, but they may enhance overall treatment effectiveness.

Reference: Kerr J. Epstein-Barr virus (EBV) reactivation and therapeutic inhibitors. *J Clin Pathol* 2019;0:1-8.