



NECESSITY OF A THREE COMPONENT MEDICAL PROTOCOL FOR ADHESIVE ARACHNOIDITIS (AA)

Adhesive Arachnoiditis (AA) is an extremely serious autoimmune-inflammatory disease in which cauda equina nerve roots become “glued” by adhesions to the arachnoid lining of the spinal canal cover. AA is not curable but can usually be controlled by the use of a three-component medical protocol which is summarized here. Some popular medicinals are listed in each component.

COMPONENTS

1. Component One – Suppression of Inflammation and Autoimmunity

Some specific medicinals are necessary to suppress intraspinal canal inflammation and autoimmunity. Popular agents include ketorolac, methylprednisolone, diclofenac, dexamethasone, acetazolamide, minocycline, pentoxifylline, and metformin.

2. Component Two - Regeneration of the Cauda Equina and Arachnoid Membrane

Tissue that has been damaged by inflammation and autoimmunity must be regenerated and healed to reduce pain and neurologic impairments. Popular medicinals include colostrum, dehydroepiandrosterone (DHEA), pregnenolone, and the peptides Thymosin, BPC-157, KPV, ARA-290.

3. Component Three – Pain Control

Medicinals to relieve pain are necessary for both physical and mental functioning. AA is such a devastating and life-shortening disease that high dosages of pain relievers are justified and may be required. Popular medicinals include low dose naltrexone, opioids, palmitoylethanolamide (PEA), ketamine, CBD, gabapentin, pregabalin, and diazepam. An implanted electrical stimulator or intrathecal opioid pump may be necessary in severe cases.

SUPPORTIVE MEASURES

The three-component medical protocol must be supported by a high protein, anti-inflammatory diet, specific physical exercises, and nutritional supplements.

GOALS OF TREATMENT

1. Stop deterioration and progression of the disease.
2. Provide sufficient pain relief and stability to maintain physical and mental functions and achieve a quality of life.