



Dr. Techy says, "Corticoid support helps control neuroinflammation".

CORTICOID SUPPORT:

A NEW CONCEPT IN PAIN MANAGEMENT

FACTS:

1. **There is no greater stressor than severe chronic pain.**
2. **A controversial development called "Adrenal Fatigue" has long been espoused by holistic and anti-aging physicians. The assumed cause is chronic stress.**
3. **The microglial cell in the CNS is responsible for neuroinflammation, and it has corticoid receptors which respond to administered corticoids.**

OUR STUDIES

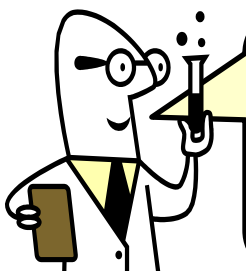
- Severe intractable pain patients demonstrate great instability (alternating too high or low) of their serum cortisol levels. Pain flares, stress, and neuroinflammation may all effect serum levels.
- We have found that afternoon and evening serum cortisol levels are low in severe chronic pain patients.

OUR CORTICOID SUPPORT PROTOCOL

- We administer a low dose of methylprednisolone (4 to 8 mg), or prednisone (5 to 10 mg) between 3:00 and 4:00 PM on 3 to 5 days a week in patients who have a severe pain condition such as: arachnoiditis, RSD/CRPS, post-viral autoimmune disorders, or Lyme disease.

RESULTS

- ✓ To date, we believe that low dose corticoid support stabilizes serum cortisol, reduces pain flares, and reduces opioid use.
- ✓ No side effects or Cushingoid features have been observed since low corticoid dosages are not given every day or multiple times a day.



Dr. Hormone says, "Corticoid administration done on a daily, high dose basis is fraught with complications. This protocol (low dose, 3 to 5 days a week) avoids complications while achieving a therapeutic gain".



**Tennant
Foundation**

Contact Information:

Glendora Ave., West Covina, CA 91740-3043
919-7476 Fax: 626-919-7497
veractinc@msn.com