



Dr. Techy says, "In pain management, patients commonly need replenishment but rarely need replacement".



# **FOUR TYPES OF HORMONE ADMINISTRATION IN PAIN MANAGEMENT**

## **1. SUPPLEMENTATION OR REPLENISHMENT**

Use of hormones at a dosage that is less than a gland's, normal daily output.

Example: Small dosages of testosterone, pregnenolone, or DHEA to bring a depressed serum level into normal range.

**COMMON**

## **2. REPLACEMENT**

Administration of a hormone to make-up for a gland's total, daily production.

Example: Daily administration of 3 or more grain equivalence of thyroid in a patient with Hashimoto's disease or estradiol in a young women who has had total oophorectomy.

**RARE**

## **3. THERAPEUTIC**

Administration of a hormone to achieve a specific therapeutic effect.

Example: Oxytocin for relief of pain flares or human chorionic gonadotropin for neurogenic (healing) activity.

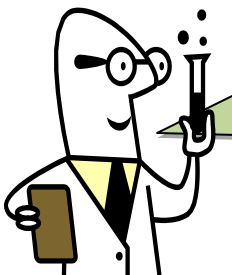
**GROWING**

## **4. SUPPORT**

Low dosages of a hormone with the expectation that severe pain will over-stress and over-demand a gland.

Example: Low dose, intermittent corticosteroid dosages to bolster the adrenal gland.

**EMERGING**



Dr. Hormone says, "The therapeutic use of hormones, such as oxytocin for acute pain, is a new frontier in pain management".



**Tennant Foundation**

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