

## **INTRACTABLE PAIN SYNDROME (IPS) IS TREATED WITH A 4-COMPONENT PROTOCOL**

IPS is a serious, even catastrophic condition. Inflammation in the central nervous system results in damage to tissue sites which results in constant pain and complications in the cardiovascular, metabolic, and hormonal systems of the body. We advocate a 4-component treatment protocol to relieve pain, prevent progression and worsening, and hopefully achieve some permanent healing.

### **COMPONENT #1- Treat the Causative Condition**

The most common causes of IPS today are adhesive arachnoiditis, multi-system collagen diseases, cervical neck diseases, stroke, and severe injury resulting in neuropathies of the RSD/CRPS type. There are now at least early specific treatments for these disorders. There are several other less common causes, including multiple sclerosis, pancreatitis, and sickle cell disease, to name a few, that are just as severe and incapacitating. Learn as much as possible about your underlying disease and work with your local health care practitioner.

### **COMPONENT #2-Suppress Inflammation**

Most IPS patients have inflammation both in the central nervous system and in muscles, nerves, and joints outside the brain and spinal cord. Both types of inflammation will usually have to be treated or inflammation will progressively damage more and more tissue. Blood glucose and some specific hormone levels must be normalized, and an anti-inflammatory diet is essential.

### **COMPONENT #3- Restoration of Damaged Tissue**

There must be a continuous effort to restore damaged tissue. Most patients can get some healing even if a cure is not possible. Restoration requires protein/collagen supplements along with vitamins and minerals known to enhance healing. Physical exercises and measures such as electromagnetic energy administration have been identified for most causative conditions. Many hormonal supplements are usually beneficial.

### **COMPONENT #4 – Pain Relief**

Many pain relief agents and measures have now been identified. Which ones should be used is dictated by when IPS is identified, and its severity. Early recognition and treatment have the best outcomes. Late-stage treatment is palliative and may require opioids even by injection or intraspinal pump routes, and implanted electrical stimulators are a last resort. Pain relief agents are symptomatic and don't usually suppress inflammation or restore damaged tissue.

## **SUMMARY**

Our experience is clear: IPS must usually be treated with a 4-component protocol, or it will likely worsen. Share this information with your local health care practitioners.

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