

To My Doctor,

I would like you to write me a prescription for Low Dose Naltrexone (LDN).

What is LDN?

LDN is a compounded version of the FDA-approved drug Naltrexone. Naltrexone itself was approved by the FDA in 1984 in a 50mg dose for the purpose of helping heroin or opium addicts. By blocking opioid receptors, Naltrexone also blocks the reception of the opioid hormones that our brain and adrenal glands produce: beta-endorphin and met-enkephalin. Used off-label at the lower dose of 4.5mg, many doctors now use LDN to treat autoimmune disease, cancer and HIV/AIDS.

How does LDN work?

The brief blockade of opioid receptors between 2 a.m. and 4 a.m. that is caused by taking LDN at bedtime each night is believed to produce a prolonged up-regulation of vital elements of the immune system by causing an increase in endorphin and enkephalin production. People who take LDN in this fashion have been found to have much higher levels of beta-endorphins circulating in their blood in the following days. In general, in people with diseases that are partially or largely triggered by a deficiency of endorphins (including cancer and autoimmune diseases), or are accelerated by a deficiency of endorphins (such as HIV/AIDS), restoration of the body's normal production of endorphins is the major therapeutic action of LDN.

Is LDN safe?

Yes. LDN is taken at less than one-tenth the dose (50mg) approved by the FDA for addicted pregnant mothers in an effort to save the baby. Over 100,000 people take LDN today under a doctor's supervision. LDN has been shown to be a very effective therapy for autoimmune diseases (multiple sclerosis, rheumatoid arthritis, Crohn's disease, lupus, and fibromyalgia), many cancers and HIV/AIDS. More detailed information on LDN can be found at www.lowdosenaltrexone.org

How is LDN prescribed?

LDN should be prescribed as following to minimize common side effects of sleep disturbance (vivid dreams) and leg stiffness. These side effects dissipate quickly with many users experiencing better sleep over the long term.

- 1.5mg for two weeks (at bedtime)
- 3.0mg for two weeks (at bedtime)
- 4.5mg ongoing (at bedtime)

Depending on body type, some individuals may encounter difficulties at the 4.5mg dosage and should remain at 3.0mg longer. Other side-effects may include mild appetite suppression and lack of taste for alcoholic beverages. Most users report "feeling good" the day after taking LDN due to the increase in endorphin production. It is recommended that LDN be stopped for a night every three weeks or so as to prevent Naltrexone build-up in the body and thus limiting its effectiveness. LDN should be compounded by a reliable pharmacy from pure Naltrexone powder and Avicel, lactose, or sucrose fast-release fillers. LDN should not be taken in combination with any narcotic or immune suppressant medication.