LDN in Primary Care: Case Studies Jill Cottel MD

73 year old woman with Polymyalgia Rheumatica and Fibromyalgia

- Presented with pain in neck, shoulders, back, knees, left foot, elevated erythrocyte sedimentation rate (ESR)
- On prednisone for 4 years, persistent elevated ESR of 104 then 79
- On methotrexate (MTX) for six months with no relief of pain
- Started on LDN at 1.5mg/d for one week, then 3mg/d
- Rapid improvement of symptoms within one week
- Tapered down on prednisone to 1mg/d, remains on MTX

40 year old woman with Ulcerative Colitis

- Presented in 2010 with rectal bleeding and anemia with Hemoglobin 7.7
- Colonoscopy showed diffuse active colitis
- Treated with oral mesalamine, hydrocortisone rectal foam, and hydrocortisone enemas daily
- Started on LDN at 1mg/d for one week
- Increased gradually to 3mg/d with resolution of symptoms in 4 weeks





50 year old female with Ankylosing Spondylitis

- Presented with pain in most joints, neck pain, back pain, fatigue, morning stiffness, and painful feet with swollen toes
- Family history significant for ankylosing spondylitis and labs positive for HLA-B27
- On LDN for 4 weeks and predisone 30mg/d for several days at time of first visit.
- LDN at 3mg/d and tapered off of prednisone over 3 weeks with improvement.
- Was pain free after one more week. All symptoms resolved, and the next week she hiked Mount Kilamanjaro and went on safari.







62 year old man with Dermatitis

- Presented diffuse erythema of face, neck, chest, back, and erythematous scaly dermatitis of extremities
- Worsened over six months with two courses of oral prednisone and several topical corticosteroids
- Started at LDN 1.5mg for one week, then 3mg/d
- After one month, improving, able to decrease dose of doxepin
- After two months, improving, able to discontinue doxepin
- After three months, symptoms resolved except for mild eczema on hands









32 year old man with Demyelinating Disease

- Presented with double vision, abnormal brain MRI with multiple lesions and abnormal spinal fluid
- Single event so diagnosis was Clinically Isolated Syndrome
- Started LDN at 3mg/d, eventually increased to 4.5mg/d
- At 5 months all visual symptoms were resolved. Interval brain MRI's showed improvement.
- At 2 years his follow-up MRI was completely normal.





74 year old man with Spinal Stenosis

- Presented with lower back pain, constant soreness, with intermittent debilitating nerve type pain
- Plain x-rays and MRI lumbar spine show multilevel severe degenerative disc disease, severe spinal stenosis, scoliosis, spondylolisthesis
- Patient scheduled for spinal surgery to include laminectomy, decompression, fusion with hardware
- Started LDN at 1.5mg/d then 3mg/d. Pain free after 4 weeks.
- Restarted ping-pong, gym activities, and ballroom dancing (surgery cancelled)



55 year old man with Inflammatory Polyarthritis

- Presented with pain in all joints, fatigue, morning stiffness after cardiac bypass surgery
- Cardiac C-reactive protein (hs-CRP) elevated at 31.6 and ANA positive at 1:160
- Failed multiple modalities pain management treatments
- On oxycodone total dose of 100mg/d
- Started on LDN at 1.5mg for one week, then 3mg/d
- After 3 weeks was off oxycodone and pain free

51 year old woman with Asthma

- Presented with life-threatening case of asthma, requiring epinephrine injection and transport by ambulance to hospital
- Not able to tolerate inhaled steroids due to worsening of interstitial cystitis
- Using albuterol inhaler several times a week, along with montelukast, hydroxyzine, one dose of fluticasone inhaler every other day
- Started on LDN at 3mg/d. After first dose, no further asthma or allergy symptoms.
- Next 7 months, no wheezing or rescue inhaler use.

84 year old man with Rheumatoid Arthritis

- Presented with worsening joint pain, especially hands
- Other medical conditions include coronary artery disease, atrial fibrillation, congestive heart failure, asthma, chronic kidney disease
- Medications included aspirin, levothyroxine, doxazosin, furosemide, potassium, amiodarone, losartan, atorvastatin
- Started LDN at 1.5mg/d for one week then 3mg/d
- Pain free within first 1-2 weeks.
- No issues with any other medical problems or medications.

71 year old man with Depression

- Presented with depressive symptoms, past history significant for major depressive disorder
- Previously treated with imipramine, trazadone, paroxetine, buproprion, fluoxetine, sertraline, citalopram, escitalopram, vilazodone (no help)
- Started LDN at 1mg/d for 2 weeks, then increased to 1.5 mg/d. After 2 doses, patient called in to office to report improvement.
- At one month he was feeling significantly improved with no side effects.
- Continued to improve and by 2 months had near complete resolution of symptoms with no side effects.

When LDN Works Too Well

- 75 year old woman with Rheumatoid Arthritis
- LDN at 1.5mg/d for one week, then 3mg/d
- After first week on LDN, she happened to trip and fall on left side.
- Saw orthopedic doctor one week later.



New Indication for LDN: Acute Pain in Hip Fracture

The End (or the beginning!)

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