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Fibromyalgia



As one of the leading doctors in the treatment of fibromyalgia and chronic fatigue syndrome, Dr. Jacob Teitelbaum says these conditions are on the rise in America. Dr. Oz talks with Dr. Teitelbaum about the reason for the increase of these painful conditions and what people can do to prevent and treat symptoms.

Fibromyalgia is a chronic syndrome characterized by exhaustion, body pain and a "brain fog." Dr. Teitelbaum says in recent years the number of diagnosed cases of fibromyalgia has skyrocketed in the United States, affecting 8 percent of the population—most of whom are women.

The SHIN treatment, which Dr. Teitelbaum uses as a checklist for those diagnosed with fibromyalgia, has proven to help those with the disease, he says. For anyone suffering from a loss of energy, Dr. Teitelbaum recommends these three things:

- **Feeding your body:** Eating a healthful diet and taking nutritional supplements is important, Dr. Teitelbaum says.
- **Exercising:** Walking in a mall with a friend or taking a yoga class are fun ways to get about 45 minutes of exercise every day, Dr. Teitelbaum says. "Only [exercise] to the point where you feel good and tired after and better the next day," he says.
- **Resting your body:** Dr. Teitelbaum recommends getting eight hours of sleep a night. If you have problems sleeping, he says herbal remedies can help. "It's not hard to get good sleep naturally for most people," he says.

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Dr. Jacob Teitelbaum's Treatment Protocol for Fibromyalgia & Chronic Fatigue Syndrome

by Jacob Teitelbaum, M.D.
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Editor's note: The following information is what Dr. Teitelbaum presents to his CFIDS and FM patients.

Dear patient,

Below is a listing of the more common treatments used in treating Chronic Fatigue Immune Dysfunction Syndrome (CFIDS) and fibromyalgia syndrome (FMS). I would use this list as a record of your treatments and have it with you for follow-up/phone visits. Put an "x" through the number in front of any treatment you stop and note the reason stopped and date. Put the date started in front of the other treatments. Although it can take 6 weeks to see a treatment's benefits, most of the medications side effects will usually occur within the first few days of starting a treatment.

Except for treatment #1 through 21 which can all be started in the first 1 to 3 days, add in 1 new treatment each 1 to 3 days. If a side effect occurs, stop the last 2 or 3 treatments for a few days and see if it goes away. If the side effect is worrisome, call your family doctor (or go to the E.R.) immediately. If needed, all treatments (except if you've been on #26, 32, 41, 92 through 99 or 124 for over 2 months -then taper these off) can be stopped until the situation is clarified.

Do not get pregnant on treatment or drive if sedated. It is normal for a woman's periods to be irregular during the first 3 to 4 months of treatment. You can begin to slowly taper off most treatments when you feel well for 6 months. On average, it takes 3 months to start feeling better. Stop things one at a time (e.g., one every 1 to 3 weeks) so you can see if you still need it.

Nutritional Treatments

1. A multiple vitamin
2. magnesium/malic acid combination formula -2 tablets 3 x a day for 8 months, then 2 tablets a day (less if diarrhea is a problem). Start with 1 to 2 a day and slowly work up as able without getting uncomfortable diarrhea. You can take up to 10 a day for constipation. Taking it with food may lessen diarrhea. If pain or fatigue recur on lowering the dose, increase it. Taken at bedtime, it helps sleep.
3. Calcium -500 to 1000 mg daily with 400 units of vitamin D (a chewable calcium or calcium citrate or chelate is recommended). If you get a non-chewable tablet, see if it dissolves in 2 to 3 inches of vinegar over 1 hour (swirl a few times). If not, it won't dissolve in your stomach, and you need to get a different brand. (Do not drink the vinegar). You can also avoid this problem by using capsules or liquid filled gelcaps. Taken at bedtime, it may help sleep.
4. Lipoic acid -200 mg a day (supports the liver) for 6 to 9 months. Especially important to take whenever you're on Sporanox or Diflucan.
5. Vitamin B-12 --mcg under your tongue daily.
6. Vitamin B-12 -1 I.M. injection (1 cc = 3000 mcg) 3 to 5 times weekly for 15 doses, then as needed (e.g., 1 to 12 times a month). This needs to be made by a compounding (holistic) pharmacy.
7. NAC (N-Acetyl-L-Cysteine) -500mg a day for 9 months -then as needed. OR glutathione 200 to 250mg a day (better than NAC but more expensive).

10. Chromagen FA (iron) -one tablet a day. Do not take within 6 hours of thyroid hormone preparations or Cipro (antibiotic), as this can prevent their absorption. Take on an empty stomach (i.e., take between 2 and 6PM on an empty stomach). It is OK to miss up to 3 doses a week. Stop in 4 to 6 months or when your Ferritin blood test is over 40. It may turn your stool black. Take vitamin C 500 to 1000mg with each tablet.

8. Flaxseed/Borage Oil -1050mg -3 capsules 2 times a day for 9 months. Use Flaxseed oil without Borage oil if manic/depressive. Dry eyes, mouth and hair suggest a need for this.

9. SAM-e -200mg -1 tablet, 1 to 4 times a day.

10. Vitamin E -400 units a day (natural).

Mitochondrial energy treatments - Use these for 9 months. Then drop the dose to the lowest dose that maintains the effect (or stop it if no benefit).

11. Acetyl-L-Carnitine -500 mg -2 capsules twice a day for 3 months. Then 250 to 500 mg/day or stop it. Although important in CFS/FMS, it is even more important to take this if you also have Mitral Valve Prolapse and/or elevated blood triglycerides. Take less or L-Carnitine can be substituted if the cost is prohibitive.

12. Coenzyme Q10 -100-200 mg -1 x a day. Especially important if taking cholesterol lowering prescriptions (e.g., Mevacor). Take it with a meal that has fat, oil supplements or in an oil based form to improve absorption.

13. L-Lysine -1000 mg -3 x a day for 3 months, then 1000 mg a day. Take also if you have cold sores to help suppress them.

14. L-Arginine -2000mg 2 to 3 times a day (do not take if it flares Herpes or take Lysine with it).

15. Magnesium/potassium Aspartate -2 capsules- 2 x a day (need to use a "fully reacted" brand).

16. B-complex -50 mg --tablet(s) at night.

21. NADH - 5 mg - 2 tablets each morning. Take it on an empty stomach first thing in the morning (leave it by your bedside in the bottle or foil wrap with a glass of water) at least ½ hour before eating, drinking coffee/juice or taking any medication or supplements (except thyroid, which you can take with the NADH). It takes 2 months to see if it works. 15 to 20 mg a day may be more effective and is safe. Don't take vitamin C, Malic Acid, Lipoic Acid or other acids within 2 to 3 hours of NADH, as acid destroys NADH.

Sleeping Aids For Fibromyalgia - You can try these in the order listed or as you prefer based on your history. Adjust dose as needed to get 7-8 hours of solid sleep without waking or hangover. No going to the bathroom if you wake up unless you still have to go 10 minutes later. Mixing low doses of several treatments is more likely to help you sleep without a hangover than a high dose of 1 medication. You can take up to the maximum dose of all checked off treatments simultaneously.

Do not drive if you have next day sedation. If you're not sleeping 7-8 hours a night without waking on the checked off treatments, do not wait until your next appointment to let us know [if you are a patient of Dr. Teitelbaum] or contact your physician! Ambien, Klonopin, Xanax and Soma are considered potentially addictive - I've never seen this happen though, with the recommended dosing below. If you have next day sedation, try taking the medications (except the Ambien) a few hours before bedtime. The antidepressants (e.g., Prozac/Paxil) can improve sleep a lot after 6 weeks. Taking your magnesium and/or calcium at night also can help sleep.

17. Ambien (zolpidem) -10 mg- ½ to 1 at bedtime. If you tend to wake during the night, leave an extra 1/2 to 1 tablet at bedside and you can take it as needed to help you sleep through the night.

18. Desyrel (trazodone) -50 mg - ½ to 6 at bedtime. Although sedating, it can be used (50-250mg at a time) for anxiety. Do not take over 450mg a day (or 150mg a day if on other antidepressants).

19. Passion flower (*Passiflora*) -100 to 200mg at night. This is also good for anxiety during the day.
20. Klonopin (clonazepam) – ½ mg -begin slowly and work your way up as sedation allows. Take ½ tablet at bedtime increasing up to 6 tablets at bedtime as needed. Can be ~ effective for sleep, pain and Restless Legs.
21. Melatonin- 3/10 mg -1 at bedtime (available at health food stores). Don't use a higher dose, unless you find it to be more effective (3/10mg is usually as effective as 5mg- and may be safer).
22. Doxylamine (Unisom For Sleep) -25 mg at night (an antihistamine).
23. Soma (carisprodol) – ½ to 1 at bedtime. This is very good if pain is severe.
24. Flexeril (cyclobenzaprine) -10 mg- ½ to 2 at bedtime. Muscle relaxant --can cause dry mouth.
25. Kava Kava -30% extract -250mg capsules -1 to 3 capsules at night (if a rash develops add a B-complex ,50mg at night -and stop/decrease the dose/frequency of use. If the rash persists, see your family doctor). 33. 5 HTP (5 Hydroxytryptophan) -100 to 400mg at night. Naturally stimulates Serotonin.
26. Remeron (mirtazapine) -15mg -1 to 3 tablets at bedtime (especially helpful if you feel like you're "hibernating" during the day).
27. Elavil (amitriptyline) -10 mg- ½ to 5 tablets at bedtime. May cause weight gain or dry mouth. Good for nerve pain and vulvadynia.
28. Xanax (alprazolam) – ½ mg – ½ to 4 tablets at bedtime. This is short-acting and gives a good 3 to 5 hours sleep with less hangover in the morning.
29. Sinemet 10/100- 1 at 6 to 9PM each evening for Restless Leg Syndrome.

Hormonal Treatments

Thyroid supplementation -several studies show that thyroid therapies can be very helpful in CFIDS/FMS - even if your blood tests are normal. This treatment is, however, very controversial -even though it's usually very safe. All treatments (even aspirin) can cause problems in some people though.

The main risks of thyroid treatment are:

1. Triggering caffeine-like anxiety or palpitations. If this happens cut back the dose and increase by ½ to 1 tablet each 6 to 8 weeks (as is comfortable) or slower. Sometimes taking vitamin B1 (thiamine) 100 to 200mg a day will also help. If you have severe, persistent racing heart, call your family doctor and/or go to the emergency room.
2. Like exercise (i.e., climbing steps), if one is on the edge of having a heart attack, thyroid hormone can trigger it. In the long run though, I suspect thyroid may decrease the risk of heart disease. If you have chest pain, go to the emergency room and/or call your family doctor. It will likely be chest muscle pain (not dangerous) but better safe than sorry. To put it in perspective, I've seen this happen despite treating many hundreds of patients with thyroid. Increasing your thyroid dose to levels the limit of the normal range may accelerate Osteoporosis (which is already common in CFIDS/FMS).

Because of this, you need to check your thyroid (Total T3 and Free T4 -not TSH) levels after 4 to 8 weeks on your optimum dose of thyroid hormone. If you have risk factors or Angina, do an exercise stress test to make sure your heart is healthy before beginning thyroid treatment. The risk factors include: 1. Diabetes, 2. Elevated cholesterol, 3. Hypertension, 4. Smoking, 5. Personal or family history of Angina, 6. Gout, 7. Age over 50 years old.

There are several forms of thyroid hormone, and one kind will often work when the other does not. Do not take thyroid within 6 hours of iron supplements or you won't absorb the thyroid (take your multi vitamin with iron at bedtime). It can take 3 to 24 months to see the thyroid's full benefit.

30. Synthroid -(L- Thyroxine) 50mcg -(1 00mcg=.1 mg)
31. Armour Thyroid -30mg (½ grain = 30mg) (natural thyroid glandular)
32. Thyrolar- ½ (this equals T4 25mcg plus T3 6.25mcg)

For each of these 3 forms, take ½ tablet each morning on an empty stomach for 1 week and then 1 tablet each morning. Increase by ½ to 1 tablet each 2 to 6 weeks (till you're on 2 tablets). Check a repeat Total T3 and Free T4 blood level when you're on 2 tablets a day for 4 weeks. If okay, you can continue to raise the dose by ½ to 1 tablet each morning each 6 to 9 weeks to a maximum of 4 a day and then recheck the Total T3 and Free T4 4 weeks later. Adjust it to the dose that feels the best (lower the dose if shaky or if your pulse is regularly over 88/minute). Do not go over 4 tablets a day without discussing it with your doctor. When on your optimum dose, you can often get a single tablet at that strength.

33. Sustained Release T3 -(T3 SR = activated thyroid) -get 7 ½ to 15mcg capsules (when you are up to 60mcg a day -order 60mcg capsules as well. It is much cheaper to get one large dose capsule than many smaller ones). In Fibromyalgia, resistance to normal thyroid doses may occur and patients often need very high levels of activated T3 SR Thyroid to improve.

Because of this, if you have risk factors, it is more important to consider an exercise stress test to make sure your heart is healthy (i.e., no underlying Angina) before beginning this protocol. Also, if your Total T3 blood test goes above normal (the Free T4 will normally be low on this treatment), consider a Dexa (Osteoporosis) Scan each 6 to 18 months while on treatment.

This having been said, in our experience this treatment has been quite safe and, in some FMS patients, dramatically effective. Begin with 7 ½ mcg each morning and continue to increase by 7 ½ mcg each 3 days until you're at 60mcg a day and then increase by 15mcg a day each 4 to 6 weeks until (whichever comes first):

1. You reach 120mcg each morning (or 60mcg if you're over 50 years old unless approved by your physician).
2. You feel healthy,
3. Your oral temperature is routinely at least 98.4° during midday.
4. You get shakiness, worsening significant palpitations (occasional "flip flops" are common) or other side effects.

Check a Total T3 level each 2 months and discuss with your doctor if it is above normal (which it may need to be). If you feel no better even on the maximum dose, taper off (decrease by 7 ½ mcg each 3 days until you're at 15mcg a day. Take 15mcg a day for 3 weeks. Then take 7 ½ mcg a day for 3 weeks and then stop).

After being on treatment for 3 to 4 months, many patients can lower the T3 dose or stop it. Feel free to try dropping the dose. If you feel better initially and then worse (beginning more than 4 weeks after starting a new dose), you probably need to lower the dose .

Adrenal Hormones - helps your body deal with stress and maintain blood pressure.

34. Cortef- 5 mg tablets - ½ to 2 ½ tablet(s) at breakfast, ½ to 1 ½ tablets at lunch and 0 to ½ tablets at 4 PM. Use the lowest dose that feels the best; most patients find that 1 to 1 ½ tablets in the morning and ½ to 1 tablet at noon is optimal, Take it with food if it causes an acid stomach. Do not take over 4 tablets a day without discussing the risks with your physician. Take calcium (see #5) if on Cortef, If taken too late in the day, Cortef can keep you up at night. You can double the dose for up to 1 to 3 weeks (to maximum 7 tablets a day), during periods of severe stress (e.g., infections -see or call your doctor for the infection and let him/her know you're raising the dose). If routinely taking over 4 tablets a day, wear a "Med-Alert bracelet" that says "on chronic Cortisol treatment."

Take vitamin C 500mg twice a day for adrenal support. Panax ginseng 100mg twice a day (taken in '6

week on and 2 week off' cycles) can also help your adrenals to heal. After 9 months, you can try to wean off the Cortef (decrease by ½ tablet a day each 2 weeks) if you feel OK (or no worse) without it.

35. DHEA - each morning or twice daily (lower the dose if acne or darkening of facial hair occurs). Keep your DHEA-Sulphate levels between 140-180mcg/dL for females and 300-400mcg/dL for males. If you have breast cancer, do not use without your physician's OK.

36. Florinef- (fludrocortisone) -0.1 mg- 1 each morning. Begin with ¼ tablet and increase by ¼ tablet each 3 to 7 days. Increase more slowly if headache occurs. Increase your water, salt and potassium (e.g., 12 oz V-8 juice and one banana a day) intake. See the NMH information sheet and check a potassium level and blood pressure each 6 weeks for 4 months and then each 3 to 4 months.

37. Increase your salt (to about 8 to 12gms a day) and water (approximately 1 gallon a day) intake a lot. If your mouth and lips are dry (and you're not on Elavil) you're dehydrated - drink more water (or herbal tea or lemonade sweetened with Stevia -see #548), not sodas or coffee.

Antiviral Agents -(See the article "Treating Respiratory Infections Without Antibiotics" in Volume 2, Issue 2 of my newsletter or on our website at www.endfatigue.com.)

45. Famvir- (famciclovir) -750mg -3 x a day. If you are feeling better in 1 month, continue Famvir until you feel well for 2 more months. If you're not better in 6 weeks, stop it. Continue it as long as needed to feel well. Take echinacea while on Famvir (#62) and Lysine (#17).

46. Lithium -300mg -times a day. If tremor, take 2 teaspoons of expeller pressed safflower oil from a health food store (uncooked -e.g., as salad dressing) daily or lower the dose. Check a Lithium level 1 month after beginning medication. Then check a Lithium and thyroid blood test (Free T4) each 6 to 12 months.

47. Monolaurin -300 mg capsules. Take 9 capsules once a day on an empty stomach for 1 week, followed by 6 capsules once a day for 20 days. Take lysine 1500 mg twice a day while on Monolaurin.

48. Olive leaf- 500mg -2 capsules 3 times a day for 10 to 14 days for respiratory infections.

Anti-Yeast Treatments

49. Avoid sweets - this includes sucrose, glucose, fructose, corn syrup, or any other sweets until the doctor says that it is okay to include them in your diet again. Having 1-2 fruits a day (the whole fruit as opposed to the juice) is okay.

50. Stevia is wonderful - use all you want.

51. Acidophilus or other milk bacteria. 3 to 6 billion units a day (refrigerated is preferable). Do not take within 6 hours of taking an antibiotic. Resume it immediately after the antibiotics are completed (e.g., Cipro or Doxycycline).

52. Caprylic Acid -1 to 3 capsules 3 times a day with meals for 3 to 4 months and then as needed (1800 to 3600mg a day).

53. Garlic -1 clove 1 to 3 times a day with meals (crushed in olive oil with salt tastes great on bread).

54. Mycelex Oral Lozenges (for Thrush and/or "in the mouth" sores) -Suck on 1 lozenge, 5 times a day for 1 to 4 days (as needed). After sucking on it awhile (e.g., 10 minutes), put pieces of the lozenge up against sore(s) until you are tired of it being there.

55. Nystatin -500,000 units- 2 tablets 3 x a day. Begin with 1 a day and increase by 1 tablet a day until you are up to the total dose. Your symptoms may initially flare as the yeast die off. If this occurs, decrease the dose and then increase the Nystatin more slowly or stop for awhile until symptoms decrease. The Nystatin is usually taken for 5 to 8 months. If nausea occurs take 2 twice a day and/or switch to the Nystatin powder in capsules or mixed in water (available from Cape Drug at 800-248-5978). Repeat Nystatin for 4 to 6 weeks anytime you take an antibiotic or have recurrent bowel symptoms.

56. Diflucan -200mg a day. OR -Sporanox- (itraconazole) -100 mg, take 2 each day (simultaneously) with food for 6 weeks.

Begin taking the Diflucan or Sporanox 4 weeks after beginning the Nystatin. If the symptoms have improved and then worsen when you stop the antifungal, refill the prescription for another 6 weeks. (Note: A 6-week supply costs over \$500!) If your symptoms flared when you began the Nystatin, begin with ¼ to ½ the above dose for the 1st week. Do not take Seldane, Hismanyl, Propulcid, cholesterol lowering agents related to Mevacor or antacids (e.g., Tagamet) while on Sporanox/ Diflucan 200mg a day may be substituted for Sporanox if you are on antacids. Do not take Seldane, Hismanyl, Propulcid or Mevacor family medications with Diflucan. Take lipoic acid (#6) any time you take Sporanox or Diflucan.

Also, taking Betaine HCL (stomach acid to help digestion - available at most health food stores) at the same time as the Sporanox, can dramatically increase Sporanox's absorption and effectiveness. Lipoic acid may help decrease the risk of liver inflammation from the Diflucan or Sporanox. If you need to stay on these medications more than 3 months, check liver blood tests (AL T, AST) every 3 months. If you feel well and symptoms (especially bowel symptoms) recur over time, consider retreating yourself with Nystatin and/or Caprylic Acid and oregano oil and/or Sporanox (or Diflucan) for 1 month as needed. If you have a low income and no prescription Insurance the Diflucan company may supply it for free. Call 800-869-9979 for information (let them know you have immune suppression and fungal overgrowth).

57. Oregano oil (enteric coated) -2 capsules on an empty stomach 3 times a day for 3 to 4 months, then 2 a day as needed for yeast overgrowth.

Immune Stimulants

58. Echinacea -300 to 325 mg -3 x a day (also take while on Famvir). Stay off the Echinacea for 1 week each month (or it will stop working). It may also improve adrenal function.

59. MgN3 -250mg capsules -2 to 4 capsules 4 times a day for 2 weeks. Then take 2 twice a day. This natural product triples some important components (natural killer cells) of your immune system. It is expensive.

60. Selenium -200mcg a day (in addition to the Selenium 200mcg in your multi-vitamin) for 6 months. You may get toxic if you take over 200mcg a day for over 6 months.

61. Aloe vera -75mg.

62. IP-6 -Take 5 to 8 grams a day.

For Brain Fog

63. Ginkgo biloba (standardized to 24%) -60mg 1 twice a day (takes 6 weeks to work).

64. Piracetam- 1200mg twice a day for 2 weeks, then take 2400mg twice a day for 2 weeks. Then adjust to optimum dose (up to 4800mg a day). Can be ordered from England. Take with Hydergine (#71).

65. Hydergine -4 to 6mg each morning.

66. DMAE- up to 400mg a day.

For bad headaches -magnesium (see #4) is also very important.

67. Vitamin B2 (riboflavin) -400mg a day to help prevent bad headaches.

68. Feverfew- 250mg 1 to 3 times a day to help prevent bad headaches.

Treatment For Parasites

69. Flagyl (metronidazole) -750mg 3 x a day for 10 days. Followed by Yodoxin for many parasites. For Clostridium Difficile take 250mg, 4 times a day or 500mg, 3 times a day. It may cause nausea/vomiting (uncomfortable but usually not worrisome). Do not drink alcohol while on this medication as it will make you vomit. The SR (sustained release) form is easier on the stomach (as is the Brand name form). If you get numbness/tingling in your fingers (or it worsens if you usually have it) stop the Flagyl.
70. Yodoxin (iodoquinol) -650 mg- 3 x a day for 20 days after Flagyl is completed.
71. Tinidazole -2000mg --Once daily for 3 consecutive days with food (for Entamoeba Histolytica) OR - 3 doses -each 2 weeks apart (for Giardia or Dientamoeba Fragilis).
72. Humatin (Paromomycin) -500mg 3 times a day for 10 days (for Cryptosporidium). For blastocystis add Yodoxin.
73. Zithromax -250mg 1 a day on an empty stomach for 10 days, along with Bactrim 1 tablet twice a day for 10 days (alternate treatment for Cryptosporidium). Add Artemesia (#84).
74. Bactrim DS -1 twice a day for plus Yodoxin 650mg 3 times a day with food for 10 days. Do not take folic acid supplements (e.g., B complex or multivitamins) for these 10 days (for blastocystis).
75. Amphotericin B -100mg twice a day plus Tinidazole 500mg twice a day plus Furoxone (Furazolidone) 1 tablet twice a day. Take these 3 together with food for 5 to 7 days.
76. Lactoferrin -350mg, 1 to 3 capsules at bedtime.
77. Artemesia Annuia -500 mg- 2 tablets 3 x a day for 20 days.
78. Tricyclin -2 tablets 3 x a day after meals for 6-8 weeks (concentrated Artemesia).
79. Colostrum (mother's milk) -3 capsules 3 x a day for 8-12 weeks. Then stop or use the lowest dose needed for symptoms. If nausea or indigestion occurs, lower the dose to a comfortable level for 1-2 weeks till it passes. Take on an empty stomach.
80. Quinacrine -100mg a day for 5 days. May be useful for empiric therapy of suspected but not identified parasites (controversial).
81. Albendazole -400mg a day for 5 days. May be useful for empiric therapy of suspected but not identified parasites.

Treatment for Bacterial, Mycoplasma, Chlamydial, Bladder Infections With E-Coli or Other Infections

These infections usually take months to years to eradicate. It is common to flare your symptoms (from the infection 'die off') the first 2 weeks of treatment. Take the antibiotics for 2 months and, if better, then repeat 6 week cycles till your symptoms stay gone. Antidepressants, Neurontin, and/or Codeine may block the antibiotic's effectiveness. Be sure to take Nystatin 2 tablets twice a day while on the antibiotics.

82. Cipro -(ciprofloxacin) -750mg -twice a day for 6 months. Do not take magnesium products within 6 hours of Cipro or you won't absorb the Cipro.

OR

83. Doxycycline -(a tetracycline) -100 mg -2 x a day for 6 months. If symptoms [missing word] when the Doxycycline is completed, keep repeating 6 week courses until the symptoms stay resolved. Take Nystatin (at least 2 twice a day) while on the antibiotic. Your birth control pill may not work while on Doxycycline. Do not take any Doxycycline tablets older than its expiration date (very dangerous).

OR

84. Zithromax (azithromycin) -600mg tablets -1 tablet a day (take with food if it bothers your stomach). Don't take magnesium containing products within 6 hours of the Zithromax.
85. Biaxin- 500mg, 2 times a day.
86. D-Mannose – ½ teaspoon (2.5 grams) stirred in water every 2 to 3 hours while awake. If not much better in 24 hours, get a urine culture and consider an antibiotic.
- Nonspecific Treatments -(#92 through 99 may help treat NMH and decrease pain as well as helping energy).
87. Myers Cocktail -I.V. nutritional therapies (very helpful).
88. Antioxynol (grapeseed extract) -50mg --capsules -times a day.
89. Dexedrine- (dextroamphetamine) -5mg -1 to 2 tablets in the morning; plus ½ to 1 ½ tablets at noon; or Provigil 200mg -up to 1 in the morning and 1 at noon. As needed for energy. These amphetamine family stimulants are similar to Ritalin and may be addictive. Take less if you have caffeine-like shakiness. Most patients use 1 tablet in the morning and 2 at noon.
90. Zoloft -(sertraline) -?mg --?tablet(s) each morning or evening.
91. Paxil -(paroxetine) -20 mg --?tablet(s) each morning.
92. Prozac -(fluoxetine) -20 mg --?capsule(s) each morning. Begin with 10mg a day the first week if the full dose makes you hyper.
93. Effexor- (venlafaxine) -37 ½mg tablets -times a day.
94. Serzone -(nefazodone) -100 mg -2 x a day for 1 week. then 150 mg 2 x a day.
95. Celexa -20mg -tablet(s) a day.
96. Wellbutrin- (bupropion) --?mg --x times a day.
97. Aspirin- 81mg a day.
98. Heparin (blood thinner) --units (-cc) subcutaneously,twice a day for 1 month. Avoid any traumatic injuries. There are 10,000units lcc. If you have preloaded syringes L-unitslcc) use 1 syringe 2 times a day. This is a blood thinner -call immediately if you have any bleeding problems. Check the Platelet Count and PTT blood tests each 3 days for 9 days then weekly while on Heparin. Inject it into the fat (not muscle) in your abdomen. Use a different spot each time (you may get a bruise where the injection is given).
99. Coumadin (blood thinner) -mg each morning. Reacts with many medications. Be sure to check with your doctor before adding or deleting any medicines (even Aspirin) while on Coumadin. Check blood tests as noted in #147. Begin 3 days before stopping Heparin -see Coumadin/Heparin instruction sheet for how to dose.
100. MSM (sulfur = methyl sulfonyl methane) -500 mg -6 tablets 2 times a day for 2-3 months, then as needed. Take vitamin C 500mg with each dose to improve absorption. This is OK to take even if you are Sulfa allergic.
101. Guaifenesin -600mg -tablets -times a day (see instruction sheet). No aspirin or herbals can be taken while on Guaifenesin.
102. L-Serine -250mg -2 to 6 capsules a day.
103. Iberogast (digestive system herbal) -Take 20 drops 3 times a day in warm water with meals. Very helpful for minor indigestion (takes 4 to 8 weeks to work).

104. Hypericum (St. John's Wort) -300 to 625 mg -3 x a day (takes 6 weeks to see effect). Use one standardized to at least 3% hypericum. Can take 2/3 of the total daily dose at night to help sleep. Can take up to 2000mg Hypericum a day if not on prescription antidepressants (otherwise limit to 1000mg a day).

108. Parlodel (Bromocriptine) -2 ½ mg - ½ tablet at night for 1st week, then 1 tablet at night.

109A. Peppermint oil -Enteric/stomach coated (2/10 =.2cc) capsules, 1 to 2 capsules 3 times a day between meals (not with food) for spastic colon.

109B. Simethicone (mylicon) -40 to 80mg, ~ one tablet 3 times a day as needed for abdominal gas pains.

109C. Turkey Rhubarb -for constipation take 2 at bedtime. If this does not solve the constipation then also take 2 in the morning (not with food).

Pain Treatments (Antidepressants #93-99 or Lithium #51)

110A. Rhus tox (homeopathic treatment) -dissolve under the tongue as directed on the bottle as needed for muscle pain.

110B. Ginger- dried -1000mg, 1 to 4 times a day or as tea (boil 1 Ogm or 1/3 oz. chopped up ginger - about ½ inch slice).

110C. Phytodolor -30 drops, 3 times a day. Takes 1 to 2 weeks to work.

111A. Topical pain formula cream - Rub a pea size amount into painful areas 3 times a day as needed. You can use this on up to 3 or 4 "silver dollar" sized areas at a time.

111B. Glucosamine Sulfate -500mg, 3 times a day. Takes 6 weeks to see if it will help. When the maximum benefit is seen, you can decrease to the lowest dose that maintains the effect.

112. Lidocaine intravenously (I.V) --mg (mg 1st dose) I.V. each 3 to 20 days as needed. Can give up to 120mg per hour.

113. Lidocaine 15% in PLO Gel -Rub on areas of nerve pain as needed.

114. Robaxin- (methocarbimol) -750mg -1 to 2 capsules 3 to 4 times a day as needed for pain (sedating).

115. Daypro -600mg -2 each morning as needed. Aspirin family medications can cause stomach bleeding. Take with an antacid or food if it upsets your stomach. If gastritis persists, stop the medicine or lower the dose. If you have a black stool (and are not taking iron tablets or Pepto Bismol), this may represent a life threatening stomach bleed (the stool will often have a very foul smell). If this occurs, go to the emergency room immediately.

116. Voltaren --mg -times a day as needed. Aspirin family medications can cause stomach bleeding. Take with an antacid or food if it upsets your stomach. If gastritis persists, stop the medicine or lower the dose. If you have a black stool (and are not taking iron tablets or Pepto Bismol), this may represent a life threatening stomach bleed (the stool will often have a very foul smell). If this occurs, go to the emergency room immediately.

117. Zanaflex- (tizanidine) -4mg -1 to 2 tablets 3 times a day as needed for pain (sedating).

118. Dextromethorphan (DM) -50mg -4 times a day with each dose of narcotic (e.g., codeine/vicodin) makes the narcotic more effective.

119. Copper/Magnet Bracelet

120. Ultram- (Tramadol) -50mg 1 to 2 tablets up to 4 times a day as needed for pain. Caution: May

rarely cause seizures or raise serotonin too high when combined with antidepressants. May cause nausea/vomiting.

121. Skelaxin -(metaxolone) -400mg 1 to 2 tablets twice a day as needed for pain. This is usually non-sedating.

122. Norflex Tablets -1 tablet twice a day.

123. Celebrex (Celecoxib) -100 to 200mg 1 to 2 times a day for pain. Do not take if you're allergic to sulfa or Aspirin (e.g., hives). Do not use over the 200mg a day while on Sporanox or Diflucan.

123B. Willow bark (containing 40-80mg of salicin) -3 times a day plus Boswellia (frankincense) 900-1800mg a day can be very helpful for soreness. It can take 6 weeks to see the full effect, but a significant effect is usually seen by 1 week and sometimes within hours.

124. Neurontin (Gabapentin) --?mg -?times a day (to a maximum of 3600mg a day). Cut back if it causes any uncomfortable or unusual neurologic symptoms or excessive sedation. Begin with 300mg at night, slowly increase to 300mg 3 times a day as is comfortable. You can go up to 3600mg a day.

125. Baclofen -10 to 20mg 1 to 3 times a day (sedating).

126. Magnets -Start with spot magnets, insoles and seat. If they help in 2 months, consider a mattress pad.

126B. Cod liver oil - ½ tablespoon (5000mg) a day. Do not use if you are about to get pregnant -it has too much vitamin A.

Dr. Jay Goldstein Recommended Treatments

127. Nimotop (Nimodipine) -30mg 1 to 4 times a day as is beneficial for symptoms.

128. Nitroglycerin - ¼ to 1 tablet dissolved under the tongue as needed for muscle pain. May cause marked headache and/or dizziness the first 3 days it is used.

129. Naphzoline .1% Eye Drops -1 drop in each eye 3 to 4 times a day as needed for symptoms.

130. Eye Drops -500units in 9cc artificial tears -1 drop in each eye 3 to 4 times a day as is helpful.

131. Tasmart (talcohone) -100mg twice a day. Use if it helps mental clarity and energy.

Follow-Up Testing

132. Stool O&P (ova & parasite) at IPD Labs in Arizona in -?week(s). Get a kit from UROKEEP (602) 545- 9236.

133. Stool culture and sensitivity -must be sent to Great Smokey Mountain Labs (800-572-4762).

134. Sleep apnea study (get insurance pre-authorization -it costs \$2000).

135. IGE Food Allergy Blood Test -send to Great Smokey Mountain Lab (800-572-4762). IGNORE the IgG Section -it is meaningless and will only make you nuts -look at the IgE section.

136. DHEA -Sulphate level in -?weeks (not DHEA level).

137. Free T 4 and total T3 levels in weeks.

138 Potassium level in weeks.

139. Lithium level.

140. Free testosterone level in weeks.

- 141 Prolactin level in weeks.
142. AL T , AST -in -weeks (liver tests -if taking Sporanox or Diflucan for more than 3 months, check every 6 to 12 weeks).
143. HHV-6 -Viral culture -must send to Herpes Viral Diagnostics (414-529-3780) (costs approximately \$270). They will give my patients a \$65 discount and a free shipping code for any test after the first one.
144. CFIDS Coagulation Blood Profile -must send to Hemex Labs (800-999-2568) (ISAC panel for CFS/FM = FIB, F1 & 2:T/AT, SFM, PA score -\$335).
- 144A. Hereditary Thrombotic Panel -at Hemex Labs.
145. Blood test for Mycoplasma & Chlamydia (General Screens) -must send to The Institute For Molecular Medicine (714-903-2900).
146. Platelet Count and P .T. T .Blood Test -each 3 days for 9 days and then each week while on Heparin.
147. P .T ./INR Blood Test -each 2 days for the 1st 8 days on Coumadin, then every 2 weeks for 6 weeks then each 6 to 8 weeks while on Coumadin. Check 2 days after making ~ change to your medication and/or supplement regimen and consult your physician before making these changes. Keep the INR at the lowest level that leaves the patient feeling well, but not over 3.

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