

Low Dose Naltrexone (LDN)

Doctors who have trained in NaProTechnology fertility treatment often recommend Low Dose Naltrexone (LDN) as part of the overall treatment programme to help couples with infertility or recurrent miscarriage. Patients most likely to benefit from treatment are those with;

1. **Premenstrual symptoms lasting for 4 or more days each cycle**
2. **Endometriosis or PCOD**
3. **Dysmenorrhoea (Painful periods)**
4. **Persistent Brown menstrual bleeding**
5. **Persistent fatigue**
6. **Sleep disturbance**
7. **Low mood**
8. **Excessive Anxiety**
9. **Personal or Family history of Autoimmunity – MS, Rheumatoid Arthritis, Insulin dependent Diabetes, Underactive Thyroid, Crohn's etc...**

Side Effects

The majority of people taking LDN have few or no side effects. About 3% of patients cannot tolerate LDN at all and it must be discontinued. Side effects are usually temporary and subside after 2 weeks of treatment.

Typical side effects include

- Sleep disturbance 50%
- Vivid Dreams 50%
- Nausea 10%
- Headache 10%
- Dry mouth 10%

LDN Not Suitable

Naltrexone cannot be taken **with CODEINE or MORPHINE**. If you mix Naltrexone with these OPOID based pain relieving medications you can become acutely ill with persistent vomiting lasting up to 48 hours.

Avoid Naltrexone if consuming **alcohol** as they interact, increasing the hangover effect.

You should stop Naltrexone 2 days before **any surgery** and recommence 24 hours after discontinuing pain relieving medication after surgery. If you have poor liver function you cannot take Naltrexone.

Finally

Naltrexone is a licensed medication, but in common with many medications, it is commonly used for conditions that it was not originally licenced to treat. With a growing number of scientific publications and a large amount of clinical experience we are confident this treatment is safe and beneficial for many patients, including those with infertility and repeated miscarriages.

REFERENCES:

- 1 Brigitte J.Roozenburg et al. [Successful induction of ovulation in normogonadotrophic clomiphene resistant anovulatory women by combined naltrexone and clomiphene citrate treatment.](#) Human Reproduction vol.12 no.8 1997
2. Smith JP, et al. [Therapy with the opioid antagonist naltrexone promotes mucosal healing in active Crohn's disease:](#) a randomized placebo-controlled trial. Dig Dis Sci. 2011 Jul;56(7):2088-97.



NALTREXONE

NOVEL USES FOR A LICENCED
MEDICATION



www.neofertility.ie

www.LDNresearchtrust.org

NALTREXONE

Original Licensed use

Naltrexone is an opioid receptor antagonist which is licenced as an adjunctive treatment for opioid dependent drug addicts. It has been licenced since the 1980's at a dose of 50mg daily for this indication. We refer to this as Normal Dose Naltrexone (NDN) in contrast to Low Dose Naltrexone (LDN) which we discuss below. Blocking opioid receptors with NDN helps to treat opioid dependent drug addiction and conditions of *excessively high* endorphins. Treatment with LDN on the other hand, treats *endorphin deficiency* – stimulating the body to increase natural opioid production. Endorphin stimulation results in a wide range of beneficial effects improving immune function, general health and fertility.

New uses for an old drug

In addition to helping with drug addiction, NDN has been used to treat alcohol dependency and infertility. NDN has been shown to improve ovulation rates in women who are resistant to stimulation with clomiphene¹.

It is common practice in medicine to use medications for different purposes other than what they were originally licenced for.

In clinical practice over 100 licenced medications are used to treat conditions they were not originally licenced to treat.

Dr. Brigitte J. Roozenburg, an Obstetrician and Gynaecologist from the Netherlands published a study in 1997 in which 19 out of 22 infertile patients ovulated when HDN was added to their treatment. When too many endogenous opioids are produced this impairs a woman's ability to ovulate. This is referred to as excessive opioid tone. Blocking opioids with NDN frees the hypothalamus allowing ovulation to resume. NDN is useful in extremes of weight – when you are too heavy or too light, for high levels of stress and for *some women* with polycystic ovaries. **Dr. Thomas Hilgers**, the pioneer of NaProTechnology fertility treatment has successfully used NDN in clinical practice since 1985.

Low Dose Naltrexone (LDN)

Low dose naltrexone (LDN) has also been used as an **immune modifying treatment** for a wide range of auto-immune conditions since the 1980's.

Dr. Bernard Bahari, a retired Neurologist and Immunologist from New York, developed the use LDN at doses of 1.5 to 4.5mg nightly to improve endorphin levels and improve many autoimmune diseases. His research showed that taking LDN increased endorphin production 3-4 fold. This had strong beneficial effects for patients with AUTOIMMUNE conditions such as Multiple Sclerosis, Rheumatoid Arthritis, Crohn's Disease, Lupus Erythematosus, Fibromyalgia or any

condition where your immune system attacks your own body.

Dr. Bahari had significant clinical experience treating over 200 patients with MS who had no progression of their disease with LDN treatment. Some of his patients had been on LDN for over 20 years without ill effect.

A growing number of publications in scientific peer reviewed journals have demonstrated this immune modifying effect. The best study to date is by Professor Jill Smith from Penn State University, USA. She published a **randomised placebo controlled trial** in 2011 showing LDN to be *vastly superior to placebo* as an immune modulator for patients with the auto immune illness – Crohn's Disease. This is a landmark publication for LDN clearly demonstrating its efficacy as a potent, inexpensive and safe immune modulator. Additional publications show the benefits of LDN for fibromyalgia and Multiple Sclerosis.

Dr. Phil Boyle has used LDN as a component of NaProTechnology fertility treatment since 2004. In clinical practice LDN dramatically improves PMS, fatigue and negative symptoms associated with endometriosis. It is also beneficial for women polycystic ovaries and depression. In practice it is completely safe during pregnancy and reduces the risk of miscarriage - based on over 400 women who have taken LDN during pregnancy.