The Natural Pharmacy Newsletter

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Wellspring Custom Pharmacy
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In The News

Living With a Different Kind of Pain: A Look at Neuropathic Pain and It's Treatments

Sharp, stinging, burning, lancinating, pain: like an electric shock running down your legs. This is how some people describe neuropathic pain. Neuropathic pain include diagnoses such as diabetic neuropathy, chemotherapeutic pain and fibromyalgia. This sensation of pain is caused by damage to the nerve fibers. When these nerves are damaged there is a signal sent to an area of the spinal cord where there are no opioid receptors. (mu and kappa receptors) No wonder conventional pain medications do not work! While the traditional opioids work very well for nociceptive pain (pain from injury) there are other agents that are more effective in managing neuropathic pain. Studies have shown that targeting a different area of pain transmission will help in chronic pain including neuropathic pain. During chronic and neuropathic pain the N-methyl-Daspartate (NMDA) receptor is activated and perpetuates the chronic pain. There are three agents that have shown clinical effectiveness in blocking this NMDA receptor.

The first agent is Ketamine a non-opioid. Ketamine is an anesthetic that can administered IV, transdermally, or as a nasal spray. Using a low dose, that dose does not induce anesthesia, topical ketamine has shown to be promising in the management of neuropathic pain.

Levorphanol is another medication that is being used to treat neuropathic pain. Levorphanol is an opioid that also has NMDA activity that has been marketed since the 1950's. Its use declined in the

1980's when other longer acting opioids were introduced. A landmark study, published in 2003, showed the benefit of using levorphanol in managing neuropathic pain.

The last agent is also an opioid that has NMDA receptor activity. This medication has some stigma attached to it due to its use in substance abuse treatment. Methadone is being used more frequently as the medical community becomes aware of the benefits of this medication.

Other topical medications that have been used for chronic neuropathic pain include ketoprofen, diclofenac, lidocaine and gabapentin. The



transdermal delivery allows for localized targeting of the damaged nerve and can provide excellent pain relief. Topical delivery also decreases the side effects of the medications such as drowsiness.

One particular formula that has proved to be very effective in our practice here at Wellspring is a topical combination of four medications. The combination of four products is used to attack the pain from multiple angles. This combination has many variations but usually includes ketamine,

gabapentin, clonidine, and either baclofen, nifedipine or lidocaine.

If you are experiencing this type of debilitating pain come in to Wellspring and let us evaluate your situation and make some recommendations to help with the pain. We can suggest some natural products and supplements as well as develop a formula that would be sent to your physician for approval. If approved, He/she would write the prescription and we would compound a personalized formula on-site in our state-of-the-art compounding lab.

McNaulty, Jack P. Update on Managing Neuropathic pain. International Journal of Pharmaceutical Compounding. May/June 2009.

Treatment Options for Rosacea

Rosacea is a chronic inflammatory disease that is seen in adults mainly in the 30-50 year old range. Rosacea usually affects the middle of the face i.e. forehead, chin and lower half of the nose. The tiny blood vessels dilate and become red and pimples sometimes occur. With the formation of pimples rosacea can present itself as acne. The difference between the two is that rosacea is not typically seen in teenagers, it affects the middle age population and there are not white-heads or black-heads in rosacea. When rosacea first appears it may disappear on its own. In time the enlarged blood vessels and pimples appear and once this happens rosacea rarely reverses itself. Untreated rosacea can cause complications including rhinopehyma (enlarged red bulbous nose with puffy checks) and eye troubles including burning and grittiness of the

eyes. Since rosacea is most prominently seen in the area where people blush it is wise to avoid smoking and food and drinks that cause flushing (spicy foods, hot beverages, alcohol). Some people will notice that certain feelings can



trigger an outbreak such as fear anxiety or stress. As a general rule, facial soaps should be free of alcohol or other irritating ingredients. Extended periods of sun exposure should also be avoided.

Traditional treatments for rosacea include antibiotics and cortisone cream.

Our compounding pharmacy offers unique treatments for rosacea. One treatment combines silymarin and methysulfonylmethane (MSM or dimethyl sulfone). In one study of 46 patients this combination showed a statistically significant improvement in the rosacea. This combination cream was found to be effective in managing skin redness, papules, itching, hydration, and skin color. Silymarin, also known as milk thistle, has anti-inflammatory and anti-oxidant properties. MSM is a sulfur compound that has anti-inflammatory effects.

MSM is used more frequently in Canada and is available as a over-the-counter topical cream (Rosacure). A small study conducted by the manufacturer of the cream showed an improvement in the redness of the rosacea after 12 weeks with side affects of burning, stinging and increased redness in the first two weeks.

The effectiveness of this compound allows us as a compounding pharmacy to offer this unique treatment option. As with all of our compounded medications, a prescription from a physician is needed. We will be glad to assist you in obtaining a prescription. We start by having a one-on-one consultation which goes over extensive medical history, current medications and medical conditions and symptoms. We can then contact the physician with our recommendations and request a prescription.

DeReese, Annie PharmD. Silymarin and Methysulfonylmehtan: Reduction in Facial Redness due to Rosacea. Apothogram. Vol. 13:3 Alai, Nili M.D. Rosacea. Medicinenet.com Accessed May 12th 2008.

Answer to Last Months Brain Exercise

Q: What can you put in a barrel that will make the barrel lighter but that you can see with the naked eye?

A: A hole.



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