LDN, Low dose Naltrexone-mobilizes the natural defenses of one’s own immune system

What diseases has it been useful for:

Cancers
- Bladder Cancer
- Breast Cancer
- Carcinoid
- Colon & Rectal Cancer
- Glioblastoma
- Liver Cancer
- Lung Cancer (Non-Small Cell)
- Lymphocytic Leukemia (chronic)
- Lymphoma (Hodgkin’s and Non-Hodgkin’s)
- Malignant Melanoma
- Multiple Myeloma
- Neuroblastoma
- Ovarian Cancer
- Pancreatic Cancer
- Prostate Cancer (untreated)
- Renal Cell Carcinoma
- Throat Cancer
- Uterine Cancer

Autoimmune
Neurodegenerative:
- ALS (Lou Gehrig’s Disease)
- Alzheimer’s Disease
- Autism Spectrum Disorders
- Hereditary Spastic Paraparesis
- Multiple Sclerosis (MS)
- Parkinson’s Disease
- Post-Polio Syndrome
- Post-Traumatic Stress Disorder (PTSD)
- Primary Lateral Sclerosis (PLS)
- Progressive Supranuclear Palsy
- Transverse Myelitis

Other Autoimmune Diseases:
- Ankylosing Spondylitis
- Behcet’s Disease
- Celiac Disease
- Chronic Fatigue Syndrome
- CREST syndrome
- Crohn’s Disease
- Dermatomyositis
- Dystonia
- Endometriosis
- Fibromyalgia
- Hashimoto’s Thyroiditis
- Irritable Bowel Syndrome (IBS)

Other Diseases
- Common Colds (URI’s)
- Emphysema (COPD)
- HIV/AIDS
- Depression (Major; and Bipolar)
• Lyme Disease (LATE Stage)

At doses between 1.75 and 4.5 mg, taken between 10 pm and 2 am, Naltrexone binds to opioid receptor sites and results in an increase in endorphin and enkaphalin production that is believed, theorized, to produce a prolonged up-regulation of vital elements of the immune system.

This action stops progression of some diseases and disorders.

• Myasthenia Gravis (MG)
• Nephrotic Syndrome
• Pemphigoid
• Primary Biliary Cirrhosis
• Psoriasis
• Rheumatoid Arthritis
• Sarcoidosis
• Scleroderma
• Sjogren’s Syndrome
• Stiff Person Syndrome (SPS)
• Systemic Lupus (SLE)
• Ulcerative Colitis
• Wegener’s Granulomatosis

Clinical Trials/Studies

Since the late 1970’s there have been many trials and studies carried out on Low Dose Naltrexone, LDN. Below you will find a list of published papers which we will update as they become available.

For full details please click Resources and you will find sub sections for conditions.

Low Dose Naltrexone Reference Review:

**Fibromyalgia & Pain**


**Autoimmune Diseases**


**Cancer**


**Ultra Low Dose Naltrexone for Opiod Modulation (pain control)**


**Prevention and Quality of Life**


1991


1995


1996


2002


2005


2006


2007

8. Research on Neurodegeneration at NIEHS Suggests a Protective Naltrexone Role J.S. Hong, Ph.D., head of the Neuropharmacology Section of the Laboratory of Pharmacology and Chemistry at the National Institute of Environmental Health Sciences, finds that "morphinan" drugs, including naltrexone and naloxone, are able to reduce inflammatory reactions in microglia brain cells in animal studies. Such inflammation is believed to be central to the progressive neurodegenerative effects seen in disorders such as Parkinson’s disease and Alzheimer’s disease. Hong’s report, summarizing the role of microglia in inflammation-related neurodegeneration and the potential of therapy using morphinans, appears in a January 2007 issue of Nature Reviews Neuroscience [8(1):57-69].

2007

10. Reversal of signs and symptoms of a B-cell lymphoma in a patient using only low-dose naltrexone. Berkson BM, Rubin DM, Berkson AJ. Integrative Medical Center of New Mexico, Las Cruces, USA. Integr Cancer Ther. 2007 Sep;6(3):293-6. PMID: 17761642

2008


2009


2010


22. Low-dose naltrexone for treatment of duodenal Crohn’s disease in a pediatric patient. Shannon A, Alkhouri N, Mayacy S, Kaplan B, Mahajan L. Department of Pediatric Gastroenterology, Cleveland Clinic Pediatric Institute, Cleveland, Ohio. Inflammatory Bowel Dis. 2010 Sep;16(9):1457. PMID: 20014017


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