

# Low Dose Naltrexone (LDN)

## Important Information for Practitioners

- History:** Naltrexone 50-200mg is an FDA approved drug to treat opioid addiction that has been used off label in low doses, 0.5-4.5mg, since the 1980s.
- Mechanism of Action:** The LEVO version of naltrexone blocks opiate receptors for a short time resulting in an upregulation of endorphin production. This can act in an immunomodulatory way to correct immune system malfunction. The DEXTRO version of naltrexone blocks receptors on immune cells, including TLRs which are heavily involved in immunity. TLRs block microglial activation and reduce excitotoxicity and inflammation. At low doses, naltrexone can help modulate the immune system.
- Potential Uses:** LDN may provide relief to those suffering from autoimmune diseases, chronic pain, mental health challenges, and inflammation.
- Potential Concerns:** Ideally, patients should be off opioids for at least a week before and the entire time they are taking LDN. LDN will NOT upregulate inflammatory or autoimmune disorders, it is related to the Anti-inflammatory (TH-2) cells and down regulation of the primary inflammatory IL side of the family. Naltrexone, in full doses, has been shown to transiently increase liver enzymes. Patients being prescribed Naltrexone for addictions must have liver function tests performed before initiating therapy. This is not necessary with LDN as the dose is much smaller; however, patients with advanced liver failure should consult their doctor before considering treatment.
- Side Effects:** The most common side effects are vivid dreams/sleep disturbances, loose stools/diarrhea, and headaches. Most side effects resolve after two weeks. If side effects continue, reduce dose by 50% for seven days, then increase again.
- Response Time:** After starting LDN, some response is expected to be seen at six weeks, with maximum effects at 12 weeks.

*If you have any questions or concerns, please feel free to give us a call.*



*Be healthy, stay healthy.*

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