

“It is wonderful to see that our discovery 30 years ago of the biological actions of LDN, a potential generic, low-cost treatment with no toxicity for so many diseases, is being championed by LDNNow.

What we need to place this drug in our arsenal of medications are rigorous clinical trials, along with research to understand how this drug works in order to design even more effective medications.”



LDN liquid and capsules.

Dr Ian Zagon
Penn State
University

“Low Dose Naltrexone (LDN) is a drug that is credited with helping those with HIV/AIDS, cancer, autoimmune diseases, and central nervous system disorders (including MS) by boosting the immune system.

As well as being effective it is cheap, costing less than one pound a day, and could save the NHS vast sums of money.

We therefore urge the Government to fund a trial of LDN on the NHS so that everyone in the UK can reap the benefits of this drug.”

S Crabb MP

The LDNNow Group

We are a group of individuals dedicated to getting Low Dose Naltrexone accepted in modern medicine, and trialled for the myriad of uses it shows benefit for. These uses include Multiple Sclerosis, some cancers, Crohns disease, Rheumatoid arthritis and many more conditions. Each of us benefits from using LDN and we simply want to see it available to others. We have access to it because we know about it, but until everyone has heard of it and is given a fair chance to use it if they need to, we will continue our campaign.

In our unanimous opinion, it is scandalous that if another use is found for a generic drug after its patent expires, it cannot be made available without trials: these trials are too expensive when the sponsor wants to recover their investment. This is a blatant case of profit standing in the way of people’s lives. People are dying needlessly because they cannot get LDN, or because they are not told about it. This is not an exaggeration, but neither is it intentional - it is just a consequence of leaving health care to the world of business. We need to short circuit this apathy **Now!**

www.LDNNow.com

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First Do No Harm



Jayne & Andrew - founders of LDNNow

“Probably the most versatile drug I have come across” .
Dr Tom Gilhooly

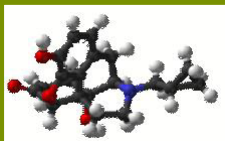
“Why are we reaching for the stars, seeking cures for so many diseases, when the single answer is already lying at our feet?”
Dr Bob Lawrence

“All truth passes through three stages: first it is ridiculed; second it is violently opposed; third, it is accepted as being self-evident.”
Schopenhauer

www.LDNNow.com

The Science

Low Dose Naltrexone is a therapy which has been in use for 25 years in the treatment of MS, HIV/AIDS, Cancer, Fibromyalgia, Crohn's Disease, Rheumatoid Arthritis and many more conditions besides. A fuller list can be found on the LDNNow website.



Naltrexone Molecule

This versatility was discovered in clinical use by Dr Bihari after working with scientist Dr Zagon. It was Dr Zagon in 1979, who discovered that Naltrexone, taken once a day in low dosage, produced a surge in endorphin production of several hundred percent. Endorphins perform many functions in the body, one of which is to restore a healthy immune system and modulate it, allowing it to start working properly again. Endorphins also multiply cells that repair damage and act to remove free radicals. One of them, called met-5-enkephalin, can attach to cancer cells and inhibit them which stops a tumour from growing and allows the immune system to attack it.

This theory is supported by the clinical success that has been observed. Cancers do stop growing, shrink and in some cases disappear, but not always. Sometimes other techniques must be used in addition to complete the job.

The Debate

Twenty five years is a long time for a successful drug therapy to be ignored by health services - so why?

Essentially, Naltrexone is a very low cost generic drug. Any company funding trials (costing millions of pounds) will be unable to secure exclusive right to manufacture. Cheap competition would cause them to lose their money, so this and all other generic drugs get shelved for further trials once the patent is due to expire. We expend huge effort and establish charities to defeat these chronic diseases but we now know that Low Dose Naltrexone saves lives and reduces disability! We should be taking this option very seriously - as well as saving our sick it can also save our economy. The drugs currently used to treat these diseases are very expensive and often dangerous. In medicine there is a rule, 'First do no harm'. Naltrexone is safe with very few, short term side effects. It is even prescribed, in high doses, for pregnant mothers to treat addiction with no known risks to mother or foetus - so low dose usage must be risk free.

The Solution

We need to find a way for generic drugs - which find new uses and acquire proven track records in clinical use - to be licensed. Currently this means they must



The Government is part of the solution

either be prescribable off license or they must be trialled. LDN can be prescribed off license for these conditions, but this is discouraged. Many drugs in use for many of these diseases are also not trialled for those uses, but they are allowed.



UK celebrity doctor - Dr Chris Steele MBE supports the LDNNow campaign

However, using LDN for autoimmune conditions does not fit the standard protocol for treatment. There is only one way to end this controversy - to trial LDN properly. There are plenty of doctors now with good experience of using LDN who can design a good trial, we just need government to provide the funding - nobody else has done or will do. There is an opportunity to make huge savings in health costs from the use of LDN.

We petitioned the UK Government to fund trials for Low Dose Naltrexone so that we can confirm, or otherwise, the clinical results being achieved with so many of our most dreaded illnesses. The petition attracted over 13,000 signatures and the Government has responded by indicating that the UK National Institute for Health Research (NIHR) is the body who can fund such trials. We have put in a recommendation for research to their Health Technology Assessment (HTA) unit.

The Scottish Parliament has also been petitioned to seek funding for trials. Members of LDNNow Scotland were invited to make a presentation to the Petitions Committee. The Committee are seeking views from relevant bodies before further consideration of the petition.

We have now petitioned the EU to seek support for funding of trials. Anyone, anywhere in the world can sign this petition.

Go to the www.LDNNow.com website and select the link to the EU petition.