



Neurotoxicity and Reversible Pain Syndromes

By Pamela J. Costello, MD PhD

In the last analysis, we see only what we are ready to see, what we have been taught to see.

We eliminate and ignore everything that is not a part of our prejudices.

~ JEAN-MARTIN CHARCOT (1825 – 1893), FOUNDER OF MODERN NEUROLOGY.

I began and honed my medical/neurosurgical and neuroscience career as an integrative medical doctor at *Albert Einstein University* in New York City. I was therefore very impressed when I received the *NY State Department of Health* May 2017 newsletter, written by Howard A. Zucker MD, JD, the New York State Department of Health Commissioner. This is his monthly medical newsletter, sent to all NY State medical doctors. It called attention to a previously considered rare disorder of Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS).

Dr. Zucker describes this chronic pain syndrome, associated with unremitting fatigue, weakness, insomnia/nonrestorative sleep, and pain, with immunological, cognitive, and autonomic dysfunction. Patients can

suffer many years of unremitting symptoms, with long term physical and emotional suffering, as well as moderate economical and quality of life losses. Dr. Zucker urges physicians to consider chronic inflammatory neuroencephalomyelitis when a patient presents with the above constellation of symptoms, particularly if presenting with a duration of greater than 6 months. This illness is a common presentation of increasing frequency, as environmental toxic influences, often along with low grade occult infections, and adverse dietary influences, are all increasing at an alarming rate.



As our ecosystem and world become increasingly toxic and our food and water supply contaminated or adulterated, we, as an integral part of that ecosystem, also become toxic. Subsequently, our immune and nervous systems become increasingly involved, manifesting illness such as ME/CFS, along with most neuroinflammatory presentations.

In my practice of holistic neurological medicine and as a neurosurgeon, I encounter patients daily with acute and chronic pain syndromes. My evaluation always considers such causes as nerve impingement, injured joints or discs, lesions, and spinal malalignment, etc. In many cases, however, there is often a deeper, more elusive physiological cause to their pain syndrome, involving neurotoxicity and possibly the presence of concurrent low-grade infections.

In the hospital, patients are seen acutely, often when a trauma has occurred, or a physiologic process has reached a critical stage or crisis. These patients are managed according to standard emergency medical and surgical protocols. Conversely, in the outpatient setting, i.e., a medical doctor's office, most patients present with chronic pain syndromes, for which they are often desperate to find a remedy, as only palliative measures have been offered previously. Many of these patients have been suffering unnecessarily for varying lengths of time and have not just been impacted physically

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and emotionally, but also economically and personally, subsequent to living with chronic pain and dysfunction.

The good news is that pain syndromes are often reversible once the underlying structural and physiologic causes are identified. Such reversible syndromes would include migraine, cluster and tension headaches, occipital headaches and neuralgias, neck and low back pain, facial pain, (Trigeminal Neuralgia and TMJ pain), thoracic pain, Shingles (Herpes Zoster) and Post-Herpetic Neuralgia, Myofascial Pain, Fibromyalgia, pelvic and abdominal pain, including dysmenorrhea, bladder pain, stomach and bowel pain, upper and lower extremity pain including Restless Leg Syndrome, Thoracic Outlet Syndrome, Carpal Tunnel Syndrome, all forms of peripheral neuropathy, and Chronic Regional Pain Syndrome (RSD), etc.

Neurotoxicity occurs when toxins accumulate in the neurological tissue of the body and undermine the functioning of the brain and nervous system. Long-term exposure to environmental toxins such as heavy metals, low grade infections, radiation, chemicals, food additives, pesticides, etc. can result in neurotoxicity. Chronic exposure to and bioaccumulation in the brain of heavy metals such as arsenic, lead, mercury, cadmium, iron and aluminum, can lead to neurotoxicity, as can exposure to poisonous plants, animals, and molds.

The symptoms of neurotoxicity are largely reversible once identified and properly managed. Neurotoxicity symptoms resemble those of disease conditions such as the chronic pain syndromes listed above, but also depression, Attention Deficit Hyperactivity Disorder (ADHD), chronic fatigue syndrome, the Autism Spectrum, as well as an array of autoimmune diseases, (Celiac disease, Irritable Bowel Syndrome, and psoriatic or rheumatoid arthritis, etc)... all diseases notoriously unresponsive to conventional therapy. My experience in managing these conditions is that neurotoxicity is usually a contributing, underlying factor.

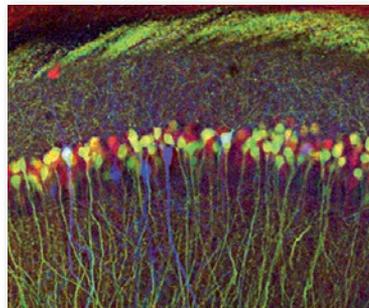
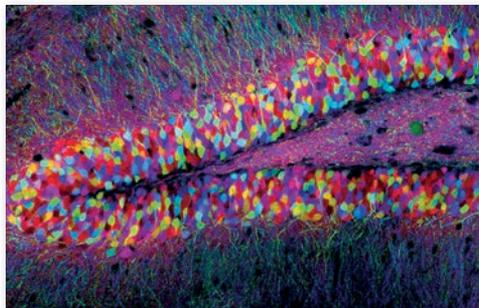
Once you've recognized that you might have a reversible pain syndrome, then what would be your next step for long-term cure and relief? Correct identification of all contribu-

tory, causal issues is required, and appropriate treatment undertaken. If the underlying cause of your pain or illness is toxicity, and your treatment plan does not include a detoxification regimen, your overall recovery is very likely to be incomplete and slower than it needs to be. Standard suppressive pharmaceutical management of pain syndromes typically does not provide long-term relief and cure, and the side effects can be overwhelming. Having the underlying neurotoxicity issues identified and safely managed is a necessary part of your care to provide long-term relief and cure,

with the additional benefit of elevation of your general health as well.

If you suffer from chronic pain/neuro-inflammatory illness, and you would like to continue to have access to an integrative medicine diagnostic and treatment approach, including the option of the prescribing and sale of herbal remedies and supplements by a physician, then please contact the New Mexico Medical Board at the numbers

and email address listed to follow. They are currently using a delayed medical records processing claim of mine to make it illegal in this state for MD's to prescribe and sell herbal remedies and supplements as part of integrative care. **The NMMB can be reached by phone at: 505-476-7220 and by email at: nmbme@state.nm.us.**



If you're dealing with acute or chronic pain and would like a comprehensive holistic neurological evaluation and treatment approach, please contact my office for an appointment at 505-503-8325, www.drpamelacostello.com