

Case Report

Title

The resolution of chronic forearm pain with MegRelief, therapy and lifestyle modification

Abstract

Addiction to opioids is on the rise as are the detrimental side effects of them. Dependence on over-the-counter medication for doing daily tasks is increasing as well. Unfortunately, there are not a lot of FDA-compliant natural solutions for pain available. The methods of pain control that would be ideal are ones that are topical, lack systemic side effects, noninvasive, self-administered, and provide a rapid onset of relief. MegRelief has all of those components and we are reporting on a case that answers the question of whether natural pain relievers along with therapeutic intervention can help people avoid use of over-the-counter pain medication and opioids.

Key Words

Topical pain relief, opioid-sparing analgesia, rosemary, nutmeg, peppermint

Intro

Nutmeg oil has been proven to alleviate chronic inflammatory pain through inhibition of COX-2 expression and substance P.¹ Research shows that rosemary has the ability to alleviate pain as well.² Studies also show that peppermint oil possesses anti-inflammatory activity.³ According to the CDC, in the United States, 23% of all adults-over 54 million people-have arthritis. About 24 million adults are limited in their activities from arthritis, and more than 1 in 4 adults with arthritis report severe joint pain. According to the American Academy of Orthopedic surgeons, in 2014, there were 370, 770 total hip replacements and 680, 150 total knee replacements. In recent years, consumption of over-the-counter drugs such as non-steroidal anti-inflammatory (NSAIDs) and pain medicine has rapidly increased. NSAIDs may cause gastrointestinal ulcers, serious cardiovascular events, hypertension, acute renal failure and worsening of pre-existing heart failure.⁴ The other issue being combated with alternatives to existing pain medicine is the opioid crisis. Although the CDC states that opioid use has declined since 2010, the number of deaths due to overdosing has increased. Creams that are currently on the market are not all natural. They contain solvents, alcohols, dyes, preservatives and ingredients that can potentially cause cancer. This study is being done to show that MegRelief-an all-natural oil-is effective at relieving pain.

Case description

A 25 y/o male with no past medical history complained of forearm pain that was limiting his ability to do his artwork. He spent eight hours per day on his computer for work and then an additional four hours drawing after work. After a few weeks of experiencing pain, he reached out to a physical therapist for guidance. Over the next six weeks, he did the following: incorporated stretching of his forearms at least once per hour at work, alternated days where he sculpted, drew and rested, performed forearm, wrist and hand exercises and massage using MegRelief at the beginning and end of each day and soaked his forearm in a MegRelief soak once per week. See the attached document. After the six-week time period, the subject reported that it was the combination of education about the cause of his condition, therapy intervention and use of MegRelief that ultimately allowed him to do art without pain. The subject did not use over the counter pain medication to relieve his pain.

A 65 y/o female with a medical history of bilateral total knee replacements, a right total hip replacement, left rotator cuff surgery, gallbladder removal and three deliveries via cesarean section complains of arthritis pain that started when she was 50 years old. For eight years, she took ibuprofen multiple times per day and at 58, she started taking injections. The effectiveness of the injections wore off so she proceeded with the aforementioned joint replacements. She decided after having those surgeries that she didn't want to have any more so she decided to try MegRelief daily (spraying it on her shoulders, hands and low back) and moving on a regular basis to include walking, strengthening exercises and water aerobics for a six-week time period. She used MegRelief on her hands, shoulders and low back at least once daily and commented on how convenient it was to "just spray it on the spot that hurts and leave it." The subject did not use over-the-counter pain medication to relieve her pain, but states she "would have had to take something if she didn't have MegRelief."

Discussion (include limitations)

This case report highlights the effectiveness of combining natural pain relief with therapeutic exercise, lifestyle modification and education to reduce the amount of over-the-counter medicine and opioids used in reducing pain.

One of the most effective things that can be done to prevent people from getting addicted to opioids is making them aware of options for effective pain relief that does not include over-the-counter medication because as the pain increases, stronger medications will need to be used which increases the chances that their pain regimens will include opioid medications at some point.

Physical therapists are perfectly positioned to help fight the opioid crisis as they treat patients with chronic and acute pain and see them long enough to monitor the effectiveness of their pain relief regimen. Patients are often instructed to take pain medicine in preparation for therapy and topical creams are used for pain relief within the clinical setting, but patients are not routinely taught how to incorporate natural pain relief into their daily routines.

Making it a practice to do so would help patients avoid using over-the-counter medications that can have negative effects on the kidneys, liver and digestive system. As MegRelief has all natural ingredients and has proven effective in this case along with the guidance of a physical therapist, future studies should be performed where the effectiveness of natural pain relief options incorporated into the patient's physical therapy plan of care is investigated.

Some of the limitations to this report is that the participants did not track their pain scores and the results cannot be generalized to a larger population.

Disclosures and Acknowledgements

The author reports no conflict of interest in this work.

References-add the proper format later

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