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**To: High Chemical Company**

**RE: Sarapin Testimonial**

I give you permission to share this information with other professionals.

I have been using Sarapin as the major part of my pain practice since 2001. Most of my practice treats patients with a failed surgery or with spinal stenosis.

With repeat procedures patients typically receive geometrically longer periods of relief. Since most of my patients are very chronic, dense, pain patients usually with failed surgery or spinal stenosis, often they get only a days relief with the first treatment, then two days, four days, a week, two weeks, etc. after additional treatments. Typically the patient gets a treatment every 3-6 months for maintenance. Less severely afflicted patients may get a week or more of relief with their initial treatment, then geometrically longer benefits with additional treatments.

Under sterile conditions I inject a combination of Sarapin, Lidocaine, plus a homeopathic anti-inflammatory agent (or triamcinolone) in a ratio of 12:7:1. I inject down to the level of the transverse process at L5 and S1, but only 1 inch deep at upper lumbar, cervical and thoracic spine to avoid pneumothorax or perforating a kidney. I use a 25 gauge 3 1/2 inch spinal needle for L5/S1 and a 27 gauge 1 1/2 inch needle elsewhere.

Sincerely,



**Alston C. Lundgren, MD, FAAMA, FAAFP**

**“Specializing in Difficult-to-Treat Medical Conditions”**