

# Springfield Wellness Center offers non-narcotic alternative to 'medically assisted detox'

*NAD reduces cravings and eases the pain of withdrawal*

SPRINGFIELD, LA, UNITED STATES,  
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EINPresswire.com/ -- The conventional treatment for opioid addiction is "medically assisted detox." This means that patients are given a legal, FDA-approved narcotic (buprenorphine or methadone) for the illegal one, which leaves them with a degree of opioid dependence, has other negative, long-term health effects, and does little to restore the addicted brain. According to the FDA's own commissioned report, "Methadone is a long-term substitute for addictive drugs and becomes a replacement drug because it does not alleviate the root cause of the addictive behavior – the craving for drugs or alcohol."

Indeed, both of these FDA-approved drugs for the treatment of opioid dependence are opiate agonists and are associated with withdrawal symptoms. Both are difficult to quit.

For example, according to [AmericanAddictionCenters.org](https://americanaddictioncenters.org/suboxone/withdrawal#Suboxone%20Withdrawal%20Symptoms) (<https://americanaddictioncenters.org/suboxone/withdrawal#Suboxone%20Withdrawal%20Symptoms>), withdrawal from Suboxone, which is a combination of buprenorphine and naloxone, "can last for as long as a month and include nausea, vomiting, headaches, muscle aches/body aches, irritability, cravings, depression," and more.

At [Springfield Wellness Center](#), our own patients who have detoxed from Suboxone and

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Springfield Wellness Center is the leader in NAD treatments



Nurse Carrie administers NAD to a patient

methadone say that these drug detoxes are very difficult—and that our intravenous NAD treatment has been the best at getting them through it. The medical profession’s reliance on “medically assisted treatment” may well be necessary for some patients. Yet many patients and their providers are not aware that a non-narcotic alternative is available. That alternative is intravenous NAD.

NAD (nicotinamide adenine dinucleotide) is a natural co-enzyme of Vitamin B3 that is essential to many cellular processes. It is non-addictive and there are no withdrawal symptoms or cravings from cessation of use.

Unfortunately, however, NAD levels naturally decline with age and with various stressors—including illness and substance use.

Because NAD performs so many vital roles in the body, it is uncertain which is critical to addiction detox. However, it appears that intravenous NAD helps to reset the mid-brain, where addiction occurs. Intravenous NAD also helps to improve thinking and cognitive functioning, which is vital to maintaining sobriety long-term. From our own experience administering intravenous NAD, we can say that this process:

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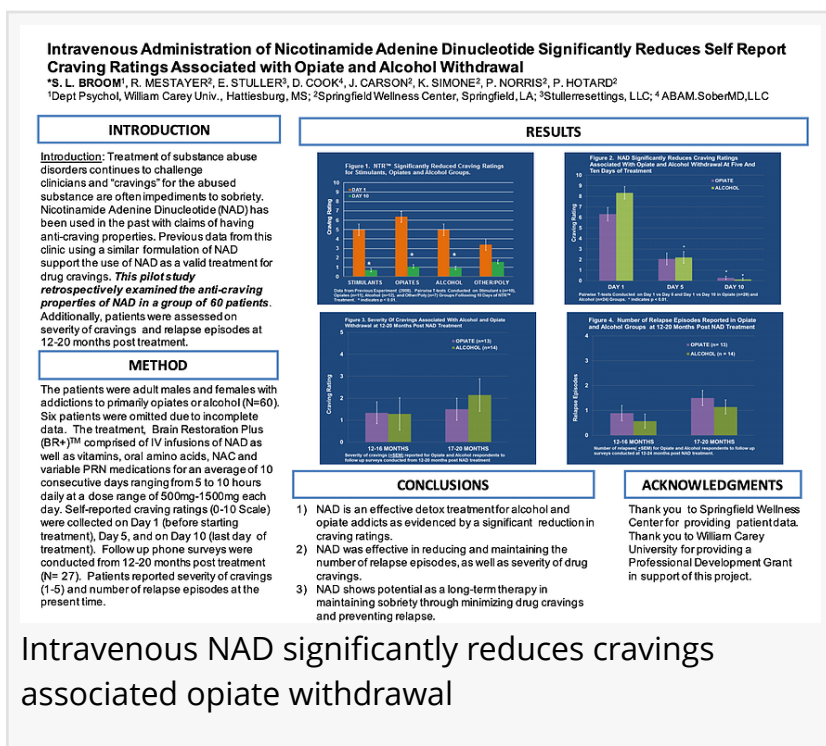
NAD “binds to opioid receptors and reduces the symptoms of withdrawal.”

*American Addiction Foundation*

be extremely difficult to tolerate.

- Substantially reduces cravings and lessens the pain of withdrawal, both physically and mentally.
- Supports the body’s natural energy-producing functions, DNA repair, and immune functions.

These results are confirmed by the [American Addiction Foundation](#), which reports that NAD “binds to opioid receptors and reduces the symptoms of withdrawal. It replaces the vitamins and minerals that have been depleted from substance abuse. It improves brain function and acts as an antidepressant. It greatly helps to repair and restore your body from the damage caused by addiction, and also helps counter the depression and mood swings associated with post-acute withdrawal syndrome. It reduces cravings and eases the pain of withdrawal.”



Moreover, these results are often experienced in just a few days of outpatient treatment. Although we prescribe 10 to 12 days of IV NAD treatment to fully detox from opioids, most patients report no cravings after Days 3-5. The additional days of treatment work primarily to restore clarity and more normal brain functioning. After the initial treatment, patients can return for a one-day booster if they are going through a period of abnormal stress or feel the cravings start to return.

The "[Summary Report on Nicotinamide Adenine Dinucleotide](#)" prepared by the University of Maryland for the FDA, wrote that "NAD was nominated for use in the management of fatigue, Alzheimer's disease, and detox and withdrawal relating to addiction via 20-250 mg/mL and 250-1200 mg intravenous (IV) and subcutaneous injections and oral products. Nominators provided references from published peer-reviewed literature to describe the pharmacology and support the clinical use of NAD. They further stated:

"Reasons provided for nomination [of NAD] to the 503B Bulks List included:

- There are no FDA-approved formulations of NAD.
- Existing FDA-approved drugs have greater side effects, have more interactions when taken with other drugs, and may be less effective.
- Methadone is a long-term substitute for addictive drugs and becomes a replacement drug because it does not alleviate the root cause of the addictive behavior – the craving for drugs or alcohol.
- Compounded NAD may be the only product to effectively treat the indication for which it is intended."

One subject matter expert was quoted that "addiction psychiatry meds are a Band-aid for the problem," and NAD is the first treatment that they have seen that is a restorative therapy. The report author's concluding statements recommended the use of NAD for the treatment of drug or alcohol addiction.

So why would anyone turn to "medically assisted detox" in order to quit their addiction to opioids?

Although a small percentage of patients do need to remain on opiate agonists to function, the primary reasons are cost and lack of awareness. While "medically assisted treatment" is covered by many health insurers, NAD detox treatment is not (yet). So, until studies like the "Summary Report on Nicotinamide Adenine Dinucleotide" can convince the medical establishment that intravenous NAD can—and should—be included in the standard treatment for addiction detox—and covered, accordingly, by health insurers, patients are left to pay for the treatment itself.

Nevertheless, intravenous NAD detox treatment is a compelling alternative to so-called "medically assisted detox" and should be seriously considered when choosing a detox method.

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NOTE: Springfield Wellness Center is the pioneering clinic that first introduced intravenous NAD,

a natural coenzyme of Vitamin B3, to the United States some 20 years ago. Ever since, the clinic has been offering intravenous infusions of NAD as a safe, effective drug detox protocol that reduces cravings and withdrawal symptoms without substituting another narcotic.

Required legal disclaimer: Statements about NAD have not been evaluated by the Food and Drug Administration (despite the previously referenced report). This product is not intended to diagnose, treat, or prevent any disease.

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