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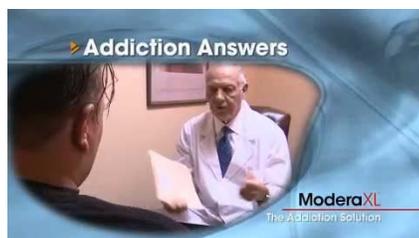
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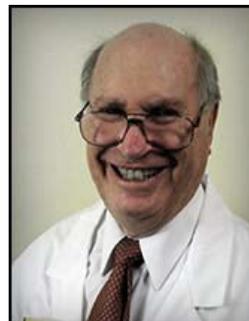
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A ModeraXL Moment with...

Seymour Ehrenpreis, Ph.D.

"Ehrenpreis" in German means "prize of honor." What a fitting description. This is exactly how the people at Medical Support Solutions feel about having Dr. Seymour Ehrenpreis as a valued member of the ModeraXL Team.

Seymour Ehrenpreis holds a PhD in Biochemistry and Pharmacology. He is a former Chairman, and Professor Emeritus of Pharmacology and Molecular Biology at the Chicago Medical School. There, he taught thousands of students, and also gave them his best as an industry leader on best practices in drug prescription.



MEET... the ModeraXL Team

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Four-time author

Seymour Ehrenpreis, PhD is the author of four books including, *The Clinician's Handbook of Prescription Drugs*, which he co-authored with his son, Eli D. Ehrenpreis, MD. He has led clinical studies on quitting smoking for the federal government. He also has dozens of scientific publications and patents, including original patents on DLPA (known as DL-phenylalanine), an essential amino acid.

Through his research in chronic pain, Dr. Ehrenpreis found increases in DLPA, a form of the amino acid phenylalanine, could raise endorphin levels and cut down on pain.

Endorphins are the body's natural painkillers. They have also been linked to feelings of euphoria or a so-called "natural high." Instead of relying on addictive substances like codeine or morphine for treating chronic pain, Dr. Ehrenpreis sought a non-addictive solution. This was very important and exciting work, especially when applying it to effective addiction treatment solutions with ModeraXL.

Here are excerpts of a 2009 interview with Dr. Ehrenpreis and award-winning journalist, Question. Baldrick was conducting his own research for a documentary on "*Innovative Practices in 21st Century Addiction Treatment*":

Question: Dr. Ehrenpreis, you have literally written the book on prescription drugs. You've been awarded patents on amino acids. And you have delved into non-addictive solutions for treating chronic pain. Since you are a professional with such a well-rounded perspective on addiction treatment, can I first get your explanation of how the disease occurs?

Seymour Ehrenpreis: *I wrote the insert for addicts on the ModeraXL packaging. So, let me explain it this way. Most drug or alcohol addictions occur because of the rewards center or pleasure center in the human brain. What happens when a person starts taking an addictive substance is it creates a mobilization of neurotransmitters*

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or endorphins in the brain which provides pleasure. The person feels elated or may even get a "high."

After the initial reward of pleasure or "high," the person then figures, "I'll get a better high if I take more." The problem is these neurotransmitters in the brain become more depleted with every intake of the addictive substance. Or, you could say they become deranged.

If the person continues with their addiction, he or she no longer derives pleasure from it, but continues to take more and more of the addictive substance or even adds new ones. Addicts don't do this for pleasure. They are trying to restore the status of the high in their brain. Eventually it does not succeed because there are simply too few remaining endorphins still functioning in the brain.

Then, even after a person stops using drugs or alcohol, addiction continues. There comes the powerful onset of cravings trying to restore the reward system or pleasure in the brain. Cravings want the addict to recreate the pleasure, elation, or the high. That is the vicious cycle of addiction the way I view it.

Question: Dr. Ehrenpreis, based on what I know, is it safe for me to say you were originally a skeptic when you were introduced to study ModeraXL?

Seymour Ehrenpreis: *Yes. Naturally, I had skepticism. Unquestionably, many clinicians will have skepticism because of the so called "placebo effect." But even if a placebo really worked, it seemed to me that it was extremely valuable in helping people with addictions.*

Question: So how did you become involved?

Seymour Ehrenpreis: *It was four years ago when I was contacted by Keith Skinner, (the mad scientist at ModeraXL). I then visited the facility where they were doing intravenous delivery of ModeraXL with essentially the same materials. Honestly, I wasn't 100% satisfied with what they were doing at the time. So, we didn't pursue each other further.*

A few months ago, Keith contacted me again. He invited me to come for another visit. He told me about the progress they had been making and said they were doing an uncontrolled clinical study with a group of addicts over a two week period.

My work had primarily been as a professor and animal type clinical researcher. I had never been involved in a study using addicts. So, I was intrigued and decided to participate. I must add that because of my work in the field of chronic pain, it interested me greatly that this product could work on helping people overcome their addictions.

Question: What was your role in the ModeraXL study?

Seymour Ehrenpreis: *In the study I was responsible for interviewing addicts. First, I interviewed them before they were introduced to ModeraXL. Then, a couple of weeks later after they were given ModeraXL, I again conducted interviews with the same people. And I must say, I was very pleasantly surprised at the outcome.*

Question: Will you elaborate? What surprised you?

Seymour Ehrenpreis: *First of all, I was surprised they could get real results in only two weeks or less. I know addicts are extremely difficult to treat. I thought if the ModeraXL did work, it would need at least a month. What I found was of the more than fifteen addicts I interviewed, the results I saw from ModeraXL were very, very positive.*

One example that was a particularly pleasant surprise to me was with a certain mother and son who were both addicts. When they returned for my interviews a couple of weeks later, both of them were no longer smoking and drinking. The mother told me something that

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was a most powerful statement for me. She said she received a visit from her father after she started with ModeraXL.

On the second day of his visit, the father asked his daughter if she had stopped smoking. She did. He quickly noticed she was no longer smoking. He also said he was happy to notice his daughter acting very differently. Who would be a better observer than her own father?

There is no question in my mind about the value of the study we did. I am willing to accept ModeraXL as a valuable treatment for addiction unless other alternatives can be found. To me, it is a very open minded way of looking at what is in the best interest of the patient.

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