

My Diabetes



My Diabetes Project – Diabetes information and services in Europe for women and their families is coordinated by:

European Institute of Women's Health

www.eurohealth.ie

Neuropathy (nerve damage)

1. Peripheral neuropathy can cause tingling, pain, numbness, or weakness in your hands and feet. You may sometimes have open sores on your feet and legs that heal very slowly or feel that the muscles and bones in your feet have changed shape. Your doctor should conduct a foot exam to check for injuries, sores, blisters, or other problems each time you go in for a visit. At the very least, have a complete foot exam once a year, or more often if you've had foot problems in the past. Some of the tools your doctor may use to check your feet include a monofilament, which generally looks like a bristle from a hairbrush, or a tuning fork. If your doctor suspects you may have nerve damage, he or she will conduct nerve conduction studies to check the speed with which your nerves send messages and an electromyography (EMG) to see how well your nerves and muscles are working together.
 - a. Treatment—it will become more important than ever to keep your blood sugar levels in your target range. Your doctor may be able to prescribe medicine to help relieve pain and reduce any burning, numbness, or tingling. If you are experiencing any depression associated with your nerve damage, talk to your doctor as they might be able to recommend counseling or other medication.

2. Autonomic neuropathy affects your autonomic nerves, which control things like the bladder, intestinal tract, and genitals. A common symptom of autonomic neuropathy is paralysis of the bladder, meaning that the nerves of the bladder no longer respond to pressure as your bladder fills with urine, keeping it in the bladder and potentially causing urinary tract infections. This is also associated with erectile dysfunction, diarrhea, constipation, and gastroparesis (the stomach loses its ability to move food through the digestive system, causing vomiting and bloating). The exact cause of autonomic neuropathy is still not completely known, and scientists are looking into better treatments. A physical exam and special tests can diagnose autonomic neuropathy, but it is important that you report any possible symptoms or changes in your body's functioning to your doctor in order for a proper diagnosis to be issued.
 - a. Treatment—it depends on the type of problems you're having, but a combination of medication and help from a specialist can usually help reduce some of the pain or discomfort you're experiencing as a result of autonomic neuropathy.

3. Other types of neuropathy:
 - a. Charcot's joint (neuropathic arthropathy) occurs when a joint breaks down because of a problem with the nerves and usually occurs in the foot. In most cases, the foot has lost all sensation and the muscles lose their ability to support the joint properly, and walking just makes it worse. If the foot becomes injured, the bone structure of the foot could eventually collapse, and while it may heal on its own over time, the foot will become deformed. People who develop this condition already have neuropathy and may experience swelling, redness, heat, a strong pulse, or insensitivity of the foot. Tell your doctor immediately if you experience any of these symptoms, as early treatment can stop bone destruction and help the healing process.
 - b. Cranial Neuropathy affects the pairs of nerves that are connected with the brain and control sight, eye movement, hearing, and taste but most often affect the eye muscles. You'll first notice pain on the side of the face near the affected eye, and then the eye muscle will become paralyzed, causing double vision. These symptoms will usually get better or go away within 2 or 3 months.
 - c. Compression Mononeuropathy happens when a single nerve is damaged in one of two ways: it is crushed at places where it must pass through a tight tunnel or over a lump of bone, or blood vessel disease caused by diabetes restricts blood flow to a part of the nerve. Carpal tunnel syndrome is one of the most common forms of compression mononeuropathy and occurs when a nerve (called the median nerve) in the forearm is compressed at the wrist. Symptoms include numbness, swelling, or prickling in the

fingers while doing things like driving a car, typing on a computer, or even just resting at night. Hanging your arms by your side for a few minutes can help to stop the pain, but if your symptoms are severe than you can undergo surgery that will relieve the pain.

- d. Femoral Neuropathy is more common in people with Type 2 diabetes and shows up by pain and muscle weakness in the front of the thighs, which will eventually lead to the muscles wasting away. Diabetic amyotrophy is a similar condition, except the weakness will occur on both sides of the body but there is rarely pain. This issue is likely caused by blood vessel disease.
- e. Focal Neuropathy affects both single nerves and groups of nerves, and causes sudden weakness or pain. Some side effects are double vision, paralysis on one side of the face (called Bell's palsy), or pain in the front of the thigh or other parts of the body.
- f. Thoracic/Lumbar Radiculopathy is similar to femoral neuropathy except the pain is in the torso and affects the chest or stomach on one or both sides. It is also more common in people with Type 2 diabetes and will get better with time.
- g. Unilateral Foot Drop makes it difficult or impossible for you to pick up your foot and is caused by damage to a nerve in the leg (called the peroneal nerve) because of compression or blood vessel disease. This problem can improve.