



WESTERN NEUROPATHY ASSOCIATION

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WESTERN NEUROPATHY ASSOCIATION

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Neuropathy Hope

Hope through caring, support, research, education, and empowerment

A newsletter for members of Western Neuropathy Association (WNA)

CRYOTHERAPY MAY HELP PREVENT NEUROPATHY IN CANCER

PATIENTS By Mike Bassett, Contributing Writer, MedPage Today October 12, 2017

Less CIPN in patients wearing ice-cold gloves and socks after taxane therapy

Action Points

The use of cryotherapy can help prevent chemotherapy-induced peripheral neuropathy (CIPN) in cancer patients.

Note that duloxetine (Cymbalta) has been recommended for CIPN, but it has limited efficacy for chemotherapy-induced pain, and none for numbness or functional disability.

The use of cryotherapy can help prevent chemotherapy-induced peripheral neuropathy (CIPN) in cancer patients, Japanese investigators have found.

Specifically, researchers found that having breast cancer patients wear frozen gloves and socks for 90 minutes after undergoing treatment with paclitaxel helped control symptoms of neuropathy that are otherwise a common side effect of cancer treatments.

The researchers, led by Akiko Hanai, MS, of Kyoto University, reported their findings in the Journal of the National Cancer Institute.

CIPN is a frequent, disabling side effect of cancer treatments -- particularly taxane and platinum therapies, Hanai and colleagues explained. In fact, a recent study published in the Journal of Clinical Oncology reported that almost half of women cancer survivors suffer from persistent CIPN for many years after their treatment ended.

Duloxetine (Cymbalta) has been recommended for CIPN, but it has limited efficacy for chemotherapy-induced pain, and none for numbness or functional disability. Furthermore, Hanai and her colleagues pointed out, "no established strategy exists for CIPN prevention."

In this study, breast cancer patients were treated weekly with the taxane paclitaxel (80 mg/m² for one hour) and then wore frozen gloves and socks on their dominant sides for 90 minutes,

which included the duration of the chemotherapy treatment. Symptoms on the treated side were then compared to symptoms on the untreated (control) side.

The primary endpoint assessment was the incidence of CIPN (defined as a decrease in tactile sensation compared to baseline), as assessed by the Semmes-Weinstein monofilament test at a cumulative dose of 960 mg/m².

The researchers also assessed patients' abilities to perceive thermosensory disturbances and vibrations, as well as their manipulative dexterity. Patients' subjective symptoms were also assessed using the Japanese version of the Patient Neuropathy Questionnaire (PNQ).

Of the 40 patients in the study, 36 reached the cumulative dose. Four dropped out due to severe liver dysfunction, macular edema, severe fatigue, and a recurrence of pneumonia), but no patient dropped out because they couldn't tolerate exposure to the cold gloves and socks.

Hanai and her colleagues found that the incidence of both objective and subjective CIPN symptoms was significantly lower -- both clinical and statistically -- for the intervention side than the control side. For hand tactile sensitivity, rates were 27.8% versus 80.6%, and for foot tactile sensitivity they were 25.0% versus 63.9% (P<0.001 for both).

The percentage of patients who experienced a reduced perception of warmth was also clinically and statistically significantly lower for the intervention side (hand, 8.8% versus 32.4%; foot, 33.4% versus 57.6%, P<0.05 for both).

The manipulative dexterity assessment using a grooved pegboard test found that the control group had a greater delay in performing the task

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Roster of Our WNA Information and Support Groups

2017 WNA Board of Directors

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**Please contact
your group leader
or check your
local paper to
find out about
the topic/speaker
for the upcoming
meeting.**

Bev Anderson
Editor

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CALIFORNIA

Antioch-Brentwood

3rd Wednesday, 2 PM (odd numbered months)
Antioch-Kaiser, Deer Valley Rooms 1 & 2
Marty Price (925) 626-7988

Auburn

1st Monday, 11 AM
Woodside Village MH Park
12155 Luther Road
Sharlene McCord (530) 878-8392
Nov. Speaker: Bev Anderson, WNA President

Berkeley-Oakland

3rd Wed., 3-4 PM
North Berkeley Senior Center
1901 Hearst Ave.
Kathleen Nagel (510) 653-8625

Carmichael - Atria

Atria - Carmichael Oaks
8350 Fair Oaks Boulevard
For information, call:
Ryan Harris 916-342-8440

Castro Valley

2nd Wednesday, 1:30 PM
First Presbyterian Church
2490 Grove Way (next to Trader Joe)
Joy Rotz (510) 842-8440

Concord

3rd Thursday, 1:30 PM
First Christian Church
3039 Willow Pass Road
Wayne Korsinen (925)685-0953

Costa Mesa

3rd Wednesday, 10:00 AM
Call Martha Woodside
949-573-0056 for the location

Davis

2nd Tuesday, 3:30-5:00 PM
Davis Senior Center, 646 A Street
Mary Sprifke (530) 756-5102

Elk Grove

2nd Tuesday, 1 PM
Elk Grove Senior Center
8830 Sharkey Avenue
Roger White (916) 686-4719

Folsom

1st Thursday, 12:30 PM (odd numbered months)
Burger Rehabilitation
1301 E. Bidwell St., Folsom
Bev Anderson (877) 622-6298
<http://folsom.neuropathysupportgroup.org>

Fresno

3rd Tuesday, 11:00 AM
Denny's Restaurant
1110 East Shaw
Bonnie Zimmerman (559) 313-6140

Grass Valley

2nd Monday, 1:30 PM
GV United Methodist Church
236 S. Church Street
Bev Anderson 877-622-6298

Livermore

4th Tuesday, 10 AM
Heritage Estates, 900 E. Stanley Blvd.
Lee Parlett (925) 292-9280

Merced

2nd Thursday, 1 PM
Central Presbyterian Church
1920 Canal Street
(The Hoffmeiser Center across the street from
the church)
Larry Frice (209) 358-2045

Modesto

3rd Monday, 10:30 AM
Trinity United Presbyterian Church
1600 Carver Rd., Rm. 503
Ray (209) 634-4373

Monterey

3rd Wed., 10:30 AM (odd numbered months)
First Presbyterian Church
501 El Dorado Street
Dr. William Donovan (831) 625-3407

Napa

1st Thursday, 2 PM
Napa Senior Center, 1500 Jefferson St.
Ron Patrick (707) 257-2343
bonjournapa@hotmail.com

Placerville

2nd Wednesday, 1 PM
El Dorado Senior Center
937 Spring Street
Lolly Jones (505) 228-3233

Redwood City

4th Tuesday, 1 PM
Sequoia Hospital Health and Wellness Center
749 Brewster Avenue
Danielle LaFlash (415) 297-1815

Roseville

2nd Wednesday, 1PM (odd numbered months)
Sierra Point Sr. Res., 5161 Foothills Blvd.
Stan Pashote (916) 409-5747

Sacramento

2nd Tuesday, Nov. 14, 1:30 PM
Northminster Presby. Church
3235 Pope Street
Charles Moore (916) 485-7723
<http://sacramento.neuropathysupportgroup.org/>

San Jose

3rd Saturday, 10:30 AM
O'Conner Hospital, 2105 Forest Avenue
SJ DePaul Conf. Rm.
Danielle LaFlash (415) 297-1815

Many groups do not meet in December. If you do not know and are not notified, call the number in the roster to check before going. Those known not to be meeting include Antioch, Concord, Folsom, Grass Valley, Monterey, Redwood City, Roseville, Sacramento, San Jose, San Rafael, Santa Barbara, Santa Cruz.

San Rafael

3rd Wednesday, 1 PM
Lutheran Church of the Resurrection
1100 Las Galinas Avenue
Scott Stokes (415) 246-9156

Santa Barbara

4th Saturday, 10AM (odd numbered months)
The First Methodist Church
Garden & Anapamu
Shirley Hopper (805) 689-5939

Santa Cruz

3rd Wednesday, 1PM (odd numbered months)
Trinity Presbyterian Church
420 Melrose Avenue
Mary Ann Leer (831) 477-1239

Santa Rosa

1st Wednesday, 10:30 AM
Santa Rosa Senior Center
704 Bennett Valley Road
Larry Metzger (707) 541-6776

Thousand Oaks - Westlake Village

2nd Monday, 2:30 - 4 PM
United Methodist Church of Westlake Village
1049 S. Westlake Blvd.
Angie Becerra (805) 390-2999

Walnut Creek

4th Friday, 10 AM
Rossmoor, Hillside Clubhouse
Vista Room
Karen Hewitt (925) 932-2248

NEVADA

Las Vegas

First meeting - Jan 18, 2018
3rd Thursday, 1 PM
Mountain View Presbyterian Church
8601 Del Webb Blvd.
Barbara Montgomery (818) 400 0296

OREGON

Grants Pass

3rd Wednesday, 2:00 PM
Club Northwest
2160 N.W. Vine St.
Carol Smith (541) 955-4995
<http://grantspass.neuropathysupportgroup.org>

For information on groups in the following areas or any other place you are interested in finding out about a support group, call Bev Anderson at (877) 622-6298. She is actively trying to open new groups and re-open closed groups. Check with her about a group in your area especially if you would volunteer to be the leader.

California: Alturas, Bakersfield, Clearlake, Crescent City, Eureka, Fort Bragg, Garberville, Jackson, Lakeport, Lincoln, Lodi, Madera, Mt. Shasta, Oxnard, Placerville, Quincy, Redding, Salinas, San Francisco, Santa Maria, Sonoma, Sonora, Stockton, Susanville, Truckee, Tulare-Visalia, Turlock, West Sacramento, Weed, Ukiah, Woodland, Yreka, Yuba City-Marysville. **Nevada:** Reno-Sparks. **Oregon:** Brookings, Medford, Portland, Salem.

President's Message By Bev Anderson



This is the last issue of NEUROPATHY HOPE for 2017. I trust it has been a good year for you and 2018 will be better. Do you realize that December 21 is the shortest day and the longest night as is mentioned in Robert Frost's poem "Stopping by Woods on a Snowy Evening?" We call it the First Day of Winter but it really is the turnaround day when the sun starts toward summer as it sets a few minutes later each evening lengthening the day and shortening the night until the first day of summer. I look forward to it as winter doesn't seem as deep and dark as it inches toward the light.

Thanks to all of you that responded to the November dues and donation opportunity. I don't know now as I'm writing this but I hope a few people decided to match Kathy's gift or at least join if you hadn't already. It is never too late to give but to be deductible for this year, it needs to be in by Dec. 31. Actually, Dec. 29 is better as the 30 and 31 are on Saturday and Sunday.

Isabella Z. Lively of Fairfield sent in an article that told of Dr. Arthur Ablin, Chief of Pediatric Oncology and co-founder of Family House to house families of children being treated for cancer at UC-San Francisco. In his final hospital stays he insisted on teaching doctors and students visiting him about neuropathy from which he suffered by having them examine his feet and note their appearance. I tend to do this, too. This month I was at the Auburn Post Office one afternoon. When I came out a man and his son had pushed their car onto the lot and asked if I'd let them jump start it. I agreed and it started quickly. Before I left I asked if they knew what neuropathy was. They didn't but when I mentioned tingling and numbness, the man said his arm felt that way because he had some disk problems in his upper spine. I said it is probably neuropathy and gave him a packet of information (I always carry some in my car). I hope you are telling people about neuropathy, too.

I mentioned last month that we are willing to send the newsletter to any doctor who would like to receive it and asked for e-mail addresses. We still would like e-mail addresses. However, if your doctor wants to receive it by standard mail we will also do that. Just be sure that they agree so however it comes, it won't be thrown out.

If you do not know what caused your neuropathy and you have ever lived or visited in or near a place where there are deer or have had a dog or cat that did, be sure to ask your primary care doctor to order the newest blood test for Lyme Disease. Unless Lyme Disease is caught in its initial form it continues on to cause neuropathy. If you are diagnosed with spinal stenosis, that can be a cause of neuropathy as well.

I want to give special thanks to all the Group Leaders that are continuing into a new year. We have a marvelous group of outstanding people leading our groups. Many have done this for a number of years.

Thanks, too, to our excellent Board of Directors. An added thanks is due those that spent hours at our booth at the Occupational Therapy Association of California Conference in October telling attendees about neuropathy and WNA.

We welcome the Las Vegas Neuropathy Support Group that will start on January 18, 2018, Mountain View Presbyterian Church, 8601 Del Web Blvd., Las Vegas, NV 89134, 1-2:30 PM. They will continue to meet on the third Thursday of each month. Barbara Montgomery is the Leader with several assistants already signing on.

I wish you a very, wonderful time as you celebrate the many holidays of this season in your own unique ways. It is a time when family recipes and cultural memories are brought forward so children learn the traditions of their family. It is not likely that any person or family celebrates any holiday totally the same as someone else partly because each family is a mixture of the cultures of the adults who happened to find each other and combined traditions or started new ones.

Bev

P.S. If you are looking for a gift for a teacher, one who taught at some time in life, or anyone who attended school as a child, we are still offering the Chicken Soup for the Soul – Inspiration for Teachers featuring inspiring 101 stories from teachers of all ages. It is available on our website at www.WNAinfo.org (or www.pnhelp.org – goes to the same site). It is \$19 including tax and shipping.

Help With Health Care Challenges

If the number is not in your area, call the one listed and ask for the right number.

Medicare

www.Medicare.gov

...

The Affordable Health Care Act

For current information go to www.HealthCare.gov

...

HICAP Health Insurance Counseling

for seniors and people with disabilities.
www.cahealthadvocates.org/HICAP/
Call (800) 434-0222 to ask a question or to make an appointment.

...

Health Rights Hotline

Serving Placer, El Dorado, Yolo, & Sacramento Counties, regardless where you receive your health coverage.
Tollfree (888) 354-4474 or TDD (916) 551-2180.
In Sacramento, (916) 551-2100.
www.hrh.org.

...

HMO Help Center

Assistance
24 hours a day, seven days a week.
(888) HMO-2219
or (877) 688-9891 TDD

...

DRA's Health Access Project Free publications about the health care, insurance rights and concerns of people with disabilities and serious health conditions. For more information, go to <http://dralegal.org/> and click on "Projects".

DISCOUNTS FOR WNA MEMBERS

The following companies or individuals have agreed to give WNA a discount to WNA members. Give them a call or visit. If you choose to purchase the service or wares of any on this list, pull out your WNA Membership Card and claim the discount.

Anodyne Therapy

Infrared Light Therapy equipment - **\$50 off Model Freedom 300 (single leg at a time) and \$50 discount on Model 120 that does both legs at the same time.** Contact: 800-521-6664 or www.anodynetherapy.com

HealthLight Infrared Light Therapy equipment - **10% off Single Boot System and Dual boot system.** Contact: 888-395-3040 or www.healthlight.us

Auburn

The Footpath
825 Lincoln Way
(530) 885-2091
www.footpathshoes.com
WNA Discount: 10% off the regular price shoes.

Elk Grove

Shoes That Fit
8649 Elk Grove Blvd.
(916) 686-1050
WNA Discount: 20% off the regular price shoes.

Fortuna

Strehl's Family Shoes & Repair
Corner of 12th & Main
1155 Main Street
(707) 725-2610
Marilyn Strehl, C.PED
is a Certified Pedorthic
WNA Discount: 10% off the regular price shoes.

West Sacramento

Beverly's Never Just Haircuts and Lilly's Nails
2007 W. Capitol Ave
Hair - (916) 372-5606
Nails - (916) 346-8342
WNA discount: 10% off the regular price.

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UPDATE AND OPPORTUNITY FROM DR. BRUCE HAMMOCK

We met Bruce Hammock, Ph.D. as the Keynote Speaker at our Spring Medical Conference at the Jelly Belly Factory Conference Center. The focus was on research for a neurologic pain reducer with a desire for a cure to be found for neuropathy. He told about his research nearing human clinical trials. We were excited especially seeing the videos of great success of the medication in animals. Dr. Hammock is an entomologist. He was studying a moth and found an enzyme that seemed to be managing the moth. He and his assistants decided to see if the enzyme was present in ascending complexity animals. In this, they identified compounds that are being spun off into their own clinical trials to qualify as medications for use by veterinarians.

We saw a video of a cat that could not climb into its litter box and after the medication did it with ease. This was the beginning of a medication for dogs that could also be used for cats and other animals. We saw the video of the horse who could not get up due to laminitis. Horses with this disease that don't respond to current treatment have to be humanely put down as they will die in pain if they aren't. This horse was on the straw in her stall and had been there for a couple of days. The veterinarian that was to put this great-granddaughter of Seattle Slew down was ready to do the deed. With one shot of the medication Dr. Hammock and his assistant gave her, she was up and with another shot was cantering in her corral. It was amazing.

Dr. Bruce Hammock and his staff received some good news. They won recognition in a National Institutes of Health (NIH) competition of upcoming possibilities. NIH will be funding the trials at the fantastic level of 90% so they need to raise 10% of the funding which is considerable in itself. This in itself is a fairly large challenge.

The company, EicOsis Strategic Synopsis: Business, Dr. Hammock and others established to carry research from UC - Davis so if funds come from its use, the funds will come back to U.C. Davis for research is seeking funds in two ways. The funds are to advance research efforts and file an NDA in animal health and to advance the human health program through Phase 2 clinical trials. They have established two streams of financial help to these projects. The first is that contributions of any amount may be given to the project. The second is an investment opportunity. People who would like to invest do so in increments of \$10,000. There is major risk, but if the medication proves to do what is expected, it might be that a good return on the investment could be obtained. We as a corporation might contribute in the first way. However, we also can let people know that there is risk but it is an opportunity they might like to check

into if they have investment capital they would like to use to put forward what might be one of the best medications for neuropathy that has ever been proposed and take a chance it would make a good return on their investment.

Assets of this medication include: Safe with no gastrointestinal or cardiotoxicity, non-narcotic. Has druggable compounds effective and easily prepared and easily assimilated, Knowledgeable Development Team, Secure Patent Portfolio, Demonstrated Efficacy in multiple species.

EicOsis is a unique investment opportunity in the biotechnology space because the technology was advanced with non-dilutive government sponsored grants. This leveraging of research support offers investors a much faster return on investment than typical start-up biotech companies. Anyone interested in this is asked to contact: Bruce D. Hammock, CEO EicOsis, LLC, Davis CA USA - (530) 752-7519 office, (530) 752-8465 (message) (530) 752-1537, bdhammock@eicosis.com

EicOsis Research Projects for Animals

Those who were at one or both of the last two years' conferences want to know what is happening for the animals in the videos and here is the report:

Research is on-going to treat naturally occurring arthritis in dogs. Initial study results show that EicOsis Animal Health Compound significantly reduced arthritis pain in dogs. We saw it in a cat so we might presume that dog medication might also be used with cats.

Clinical Case Study: Laminitis

The lead animal health drug from EicOsis was used in treatment in the treatment of horses suffering from laminitis. This disease is 60-70% fatal in severe cases and can result from equine metabolic syndrome in addition to injury. Laminitis is extremely painful and is difficult to treat because it results from a swelling of the lamina inside the hoof. Hulahalla, a 3-year-old thoroughbred filly, developed acute laminitis in both front feet. She was treated with the standard of care, including NSAIDs and Neurontin, without success. Her condition deteriorated, blood pressure was approaching fatally high levels, and she refused to stand. Humane euthanasia was the remaining option when the sEH inhibitor was given. Within 3 hours she was able to stand. Her pain and blood pressure decreased progressively and in 3 days her gait and blood pressure were normal. The compound was discontinued with Hulahalla running normally. After 18 months, there has been no reoccurrence of laminitis, and no signs of adverse effects.

SOCKS SUGGESTION FROM MARY ANDERSON OF OUR SACRAMENTO SUPPORT GROUP

Leader, Charles Moore, says “Mary found the articles in the March/April 2017 issue of Diabetes Management. The socks might prove useful even if you do not suffer from diabetes”. This would be true if you have any tendency for swelling in the legs.

1) **Rejuva Socks.** These are compression socks that feature attractive plaids and other designs to avoid the ubiquitous and boring black or white.

In addition, these socks include extra wide top bands that hold the socks up without binding. Info: www.rejuvahealth.com.

2) **Neuropathy Therapy Socks.** “Therapeutic padded sole protects and cushions feet, with built-in gel pads. Provides soothing comfort as it reduces friction, callus formation and foot ulcerations. “Buy 1, Get 1 free. Order toll free: 1-800-530-2689

SENSITIVE FEET AND DIABETES: WHY MY FEET HURT?

By Elisabeth Almekinder, RN, BA, CDE

This is a rather complete presentation of neuropathy as diabetes relates to it with a good deal of information for people with any type of neuropathy. The following is a story from the presentation.

John's story

John came to me for diabetes education in his eighteenth year following the diagnosis of his diabetes. He had never taken any classes to learn about diabetes in depth. He was willing to set some great goals to get started, including learning to count his carbohydrates, and giving up his cola. He was a very humble and honest man, and he told me the truth.

“I'm not going to exercise,” he said. “I'll just go ahead and tell you that right off the bat.”

“Why is it that you are not going to exercise?” I asked.

“My feet hurt,” John said. “I can hardly walk on them long. They hurt so much that I almost fall. It hurts to touch them, and at night, I toss and turn trying to get comfortable. That's why I can't exercise,” said John.

We were able to get John's diabetic peripheral neuropathy diagnosed by his physician, and he started Neurontin. Learning to manage his diabetes, and bring his A1C from 9 percent to 6.8 percent, helped lessen the nerve pain.

As advised, John began to keep a pattern management notebook. This way, he was able to keep his blood sugars in his target range at all times of the day, improving the overall management of his diabetes.

Although John still has some pain in his feet and legs, he doesn't have severe problems related to his diabetic neuropathy any longer. He takes care of his feet, performing daily foot checks and foot care, and visiting his doctor every three months. He has managed to keep the pain in his feet and legs from returning to the severity that he once experienced. By better managing his diabetes, he has successfully prevented severe neuropathy pain.

What's more, John started an exercise program. He joined the Silver Sneakers, and then a walking group. He has lessened his depression, improved his diabetes and related ailments, and has made new friends. He combines aerobic exercise with strength training, and gets about 200 minutes of physical activity a week. He argues that he has never felt better.

The full article may be accessed at <https://www.thediabetescouncil.com/sensitive-feet-and-diabetes-why-my-feet-hurt/> Used by permission.

DISCOUNTS FOR WNA MEMBERS

Continued from page 4

Neuropathy Support Formula

(1-888-840-7142) is a supplement that a sizable number of people are taking and reporting it has helped them. The company gives members of WNA a discount and free shipping. The 30-day supply is \$40 (normally \$49.97). It can be auto-shipped monthly for the same. A 3-month supply via auto-ship is \$95.00. They also have a Nerve Repair Optimizer that is available for \$20 with free shipping. Marsha, the manager, said that if anyone wants more information about the product, they can call and ask for her. If she is not readily available, leave your number and she will call you back.

Free DVD on “Coping with Chronic Neuropathy”, introduced by Dominick Spatafora of the NAF and endorsed by major university neurologists, is available by contacting the Neuropathy Support Network at www.neuropathysupportnetwork.org/order-neuropathy-dvd.html

Additional Discounts

Do you know a business that might offer our members a discount? Tell them that they will be listed each month in our newsletter and on our website so our members will know of their generosity and patronize their business. Call (877) 622-6298 or e-mail info@pnhelp.org.

We'll mail an agreement form to the business, and once we have it, we'll add them to this list.

NOTE TO WNA

I enjoy your newsletter. I wanted to tell you that foot massages every 10 days has helped my neuropathy. I am able to sleep up to six hours per night, which is very good for this 87-year-old.

– James Hall

STEM CELL CLINIC DAMAGE REPORT

Progress is being reported in stem cell research and a cure or two have been announced. However, the random selection and insertion of cells that we have warned everyone about being done by high priced, non-authorized so called clinics has done major damage recently reported by a new member. The gentleman has a medical background and knows quite a bit about the human body, but got neuropathy and wanted desperately to rid himself of it. He contacted one of the leading stem cell clinics, decided the doctors knew what they were doing as they said they did, and tried it.

He now has a blood disease of some kind and liver problems he did not have before. He has gone to many doctors, including stem cell researchers and no one has been able to help as these are problems coming from cells from a body other than his own as far as is known.

Some of these clinics, according to the news, have been closed down. That may have happened to the one he visited. Given that problems like this have happened because of these clinics, research is now required to find a way to reverse something that shouldn't have happened in the first place. Please don't put yourself in this position.

CENTRAL NERVOUS SYSTEM MAY CONTRIBUTE TO DIABETIC PERIPHERAL NEUROPATHY

One of the key contributors to peripheral nerve disease in patients with diabetes is the central nervous system (CNS), a new report suggests.

Published in the journal *Pain*, the study, conducted by Dr. Solomon Tesfaye of Sheffield (UK) Teaching Hospitals NHS Foundation Trust and colleagues found changes within the central nervous system (CNS) were associated with the development of diabetic peripheral neuropathy (DPN), according to a press release. According to the release, about 25% of people with diabetes have symptoms of DPN, including progressive and severe pain and insensitivity to trauma, leading to an increased risk of foot ulcers, infections and amputation.

"Although [diabetic peripheral neuropathy] has been considered a disease of the peripheral nerve, from numerous studies it is becoming apparent that there are indeed changes within the CNS that appear to be concomitant with the evolution of painful and painless

[diabetic peripheral neuropathy]," the researchers wrote.

Tesfaye and colleagues used advanced MRI and magnetic resonance spectroscopy techniques in their study. They reported a number of findings suggesting CNS plays a role in the development of DPN, including: differences in the cross-sectional area of the spinal cord, particularly before DPN symptoms appear; atrophy in the primary sensory cortex; differences in blood supply in the thalamus; changes in the brain areas thought to be involved in detecting the location and intensity of pain, as well as emotional responses; and reductions in the brain grey matter, particularly in areas that process somatosensory perceptions.

Reviewing evidence resulting from the use of advanced imaging techniques in several studies, Dr. Tesfaye and colleagues determined that CNS factors might explain the development of diabetic peripheral neuropathy.

See <http://www.clinicalpainadvisor.com> Used with permission

ACUPUNCTURIST SPEAKS IN SACRAMENTO GROUP

Margo Miller, Acupuncturist, presented a talk on the "Sacramento Acupuncture Project."

Margo noted that acupuncture depends upon meridians throughout the body and the flow of Qi (the body's energy)

The needles used in acupuncture are very thin, so thin one can barely see them...

Unlike traditional Western acupuncture, the community acupuncture patients do not lie on a flat table. The room where community acupuncture takes place is furnished with a number of zero gravity chairs placed for ultimate privacy. Zero gravity has to do with the reclining position the chair can assume. The position mimics the posture astronauts take during liftoff on space missions. The

website shows a photo of a zero-gravity chair.

What qualifies the Acupuncture Project as "Community Acupuncture?" The treatment is a communal or shared treatment. It is also very low cost based on a sliding scale \$15-35 per treatment. The business cards that Margo distributed read: "You decide what you can afford."

An additional difference between traditional and community treatment the acupuncturists at the Sacramento Project use needles only in the forearms and lower legs, and may include the head and ears. Their website is www.sacacupuncture.com. It contains information and an article that appeared in the Sacramento Bee.

■ FOUR SUPPLEMENTS TO DISCONTINUE AFTER 50

Unless you have specific information from your doctor, these are four supplements you are advised to discontinue after age 50.

Folic Acid it can cause neuropathy in some people and can mask a B12 deficiency which can also be a cause of neuropathy.

Calcium It can increase the risk of kidney stones and may build up in arteries and cause heart problem. If you don't consume dairy products or leafy greens, you might need some.

Iron Unless there is a diagnosed iron deficiency not taking an iron supplement is recommended as it can inhibit absorption of antibiotics and blood pressure lowering drugs. Some people develop too much iron which can cause problems.

Vitamin E There is little proof of benefit. They can produce heart failure in some populations, boost the likelihood of prostate cancer, and cause chemotherapy drugs to be less effective. Actually, no one needs it.

See January 2017 issue of ON HEALTH, a Consumer Reports publication page 9 "4 Supplements to Question after 50."

■ SAFETY OF THE FLUOROQUINOIONES ANTIBIOTICS INCLUDING CIPROFLOXACIN

By William B. Donovan, M.D.

Bulletins of the FDA have contained warnings about the toxic effects of this class of antibiotics on the nerves, specifically peripheral neuropathy. Quoted below are excerpts from 2016 and 2013. I might mention that the son of one of our Monterey Neuropathy Support Group members is one of the victims.

(7-26-2016) "The U.S. Food and Drug Administration (FDA) approved changes to the labels of fluoroquinolone antibacterial drugs for systemic use (i.e., taken by mouth or by injection). These medicines are associated with

disabling and potentially permanent side effects of the tendons, muscles, joints, nervous system that can occur together in the same patient.

"The risk of peripheral neuropathy occurs only with fluoroquinolones that are taken by mouth or by injection. Approved fluoroquinolone drugs include levofloxacin (Levaquin), ciprofloxacin (Cipro), moxifloxacin (Avelox), norfloxacin (Noroxin), ofloxacin (Floxin), and Gemifloxacin (Factive). (FDA Bulletin 8/11/2013)

Cryotherapy May Help Prevent Neuropathy In Cancer Patients – Continued from page 1

compared to baseline (-2.5 second delay on the intervention side, compared to a +8.6-second delay on the control side; P=0.005).

PNQ scores were significantly lower on the intervention side as well.

Study limitations included the fact that "placebo effects" were inevitable in the study, the non-dominant hand and foot always served as the control (as was the case in previous cryotherapy studies), and that the researchers didn't follow the subjects after completion of chemotherapy because post-treatment therapies could impact the patients' sensory status.

"We conclude that cryotherapy is a simple, safe, and effective strategy for the prevention of CIPN in patients with cancer undergoing paclitaxel treatment," Hanai and colleagues concluded. "Cryotherapy could support the delivery of optimal chemotherapy by preventing a dose delay or reduction, as well as inhibiting the deterioration of quality of life in cancer

patients during and after treatment."

In an editorial accompanying the study, Dawn L. Hershman, MD, of the Herbert Irving Comprehensive Cancer Center at Columbia University in New York City, said that despite the success of this trial, it remains unclear whether cryotherapy would benefit patients undergoing platinum therapy.

If the current results are confirmed, however, cryotherapy should prove superior to agents that are customarily used to treat CIPN, such as duloxetine, Hershman wrote. "[C]ryotherapy has the advantage of a limited side effect profile, it is low cost, and appears to prevent components of CIPN other than neuropathic pain."

This work was supported by the Japan Society for the Promotion of Science and the Promotion Plan for the Platform of Human Resource Development for Cancer administered by the Ministry of Education, Culture, Sports, Science and Technology in Japan.



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Our mission is to provide support, information and referral to people with neuropathy and to those who care about them, to inform and connect with the health care community, and to support research.

Dues - \$30 a year

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