

PN News

Yolo County

VOL. 6, NO. 4

APRIL 2008

The mission of the Yolo Neuropathy Groups is to insure, through Information, Empowerment and Mutual Support that all may have hope and no one faces their peripheral neuropathy alone. Coming together is a beginning; keeping together is progress; working together is success. Henry Ford

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April Yolo Neuropathy Groups Meeting Schedule

Woodland: Mon., April 7 at 3:30 pm, Woodland Senior Center, 2001 East St.

“Where We Are & What We Need Share Time” Contact: Donna at 530-661-3705

Davis: Wed., April 9 at 2:00 pm, Physical Edge, 1460 Drew Ave, Suite 200

“Where We Are & What We Need Share Time” Contact: Martha at 916-371-1125

West Sacramento: Tues. April 15 at 2:00 pm, Trinity Pres. Church, 1500 Park Blvd.

David Teicheira, MD, Sacramento Pain Clinic “Chronic Pain Management Options”

Contact: Sandra at 916-371-1125

About April's Meetings

We've been stressing in recent months that anyone with neuropathy has gained some wisdom about what has and hasn't worked for them in treating and coping with their neuropathy, wisdom that very much needs to be shared within the neuropathy community. The Woodland group has made Sharing Meetings a high priority, and the Davis group will also have a Sharing meeting this month. We'll Share in West Sacramento in May.

David Teicheira, MD, with the Sacramento Pain Clinic, (SPC) will be featured at the April West Sac meeting on April 15. **(SPC is located at 2805 J Street, Suite 210, Sacramento, CA 95816, 916-440-8088, and see www.sacpainclinic.com)** The SPC and its companion service, Compass Center for Functional Restoration, "...is a multidisciplinary team dedicated to providing the most comprehensive outpatient rehabilitative treatment for chronic pain patients. We believe chronic pain can be managed through the integration of patient responsibility and appropriate medical treatment. Through the development of coping skills, medical management and individualized therapeutic routines, we provide a direction for all patients to move forward, function and rebuild despite the challenges of chronic pain. "

He'll be talking about the SPC's Medical Management of Chronic Pain and the Minimally Invasive Interventional Pain Management programs. When it comes to chronic pain management, most of our doctors may or may not know what traditional or new medications should be prescribed, but the Clinic not only knows what is available, but more importantly understands that *"Medications are appropriate when they produce a desired result such as improved function, are safe and are free of side effects."* As we know, that's a pretty high standard that most of our meds fail, much to our frustration. While the clinic practices state-of-the-art medicine, the treatment team believes that *"an honest relationship between the patient and the physician can result in long term control over the pain and suffering....The recipe for success is to find the right combination of medical management along with an ongoing healing conversation between the patient and caregiver."*

SPC's web site enumerates a fascinating long list of conditions and alternative treatments that is most impressive. Medtronic implants are only one of Dr. Teicheira's many specialties. He is widely acclaimed as a really remarkable clinician with board certification in Internal and Pain Medicine and has taught anesthesiology and pain medicine at UC Davis. Whether you eventually seek a referral for SPC's services or not, expanding your knowledge of treatment alternatives is an important part of becoming an advocate for your neuropathy (or other chronic) pain care to maximize your own functionality and thriving, in spite of all.

Thanks to Trinity Presbyterian Church for graciously hosting us again on April 15 in West Sacramento! There was a scheduling conflict at the library, which will soon be moving to the old bank building across from La Bou, while the existing building is demolished and the new facility is constructed. We've so appreciated the centrality of the library's space in the last year. But now we've arranged to begin meeting in the classroom of the West Sacramento Senior Center at 664 Cummins Way, beginning in May as our future home. The Center is readily accessible via the 40/41 YoloBus route from downtown Sacramento and around West Sacramento. Or drive down Jefferson and Kagle north to Cummins, turn right and proceed to the Center's site. Thanks to Jeff El-Bdour for the Center's hospitality.

NCCNA Membership Status & April 24th Annual Meeting and NAF Neuropathy Awareness Conference on June 26th

Because of our limited funds, the only persons receiving the full April and forward Yolo PN News newsletters are those who have paid their 2008 NCCNA dues. We're most grateful to learn that the number of Yolo identified members now numbers 35 as of the last week or so. Special thanks to those of you who've made wonderfully marvelous donations for the Yolo activities in recent months. Our NCCNA refund check(s) for the 4th and 1st quarter dues payments will arrive by mid-April, which will help a lot. But we hope that many more PNers in Yolo County and across the region desiring our newsletter, in addition to that of the NCCNA newsletter, will become new or renewing members, for the sake of the Yolo groups' work with the hope we can have full newsletters as the year progresses with the help of additional writers. **If you are new to join, the amount due is now \$16; if you're renewing, please pay the full dues amount of \$24. You're your checks out to NCCNA and send to NCCNA, P. O. Box 6985, Auburn, CA 95604. And remember, NCCNA dues paying members are eligible for a 15% discount on neuropathy specialty shoes at Shoes 'n' Feet thanks to the generosity of podiatrist/owner Tracy Basso, DPM.**

NCCNA's Annual Meeting on April 24th will be at the beautiful Sierra Health Foundations facility overlooking the Sacramento River at 1321 Garden Highway, near I-5. In addition to reviewing and celebrating NCCNA's achievements in the last year; We'll have three terrific presentations by guest speakers. **Jay Tinsman**, Sacramento licensed therapist will speak on "*Accessing Inner Resources We Didn't Know We Had,*" **Michelle Orrock**, the Statewide Communications Director for the National Federation of Independent Business, will talk about how we can engage the media and community groups in helping to spread the word about neuropathy and our support groups. After a delicious lunch, we'll have a demonstration of Nordic pole walking by **Jayah Paley** of Adventure Buddies, to help us with balance problems.

Be assured that this free event will be a wonderful time of learning and fellowship for group leaders and members coming to the event. **Please RSVP by April 15th to the toll-free number 1-877-622-6298.** For a great map showing how to get to the event, see www.sierrahealth.org/doc.aspx19. If you don't have access to the internet, here are the driving directions. **From the North:** Take I-5 south to Sacramento. Exit at Garden Highway, turning right on to Garden Highway. Turn left at Gateway Oaks Drive into the Sierra Health parking lot. The building is on the left. **From the South:** Take I-5 North and exit at Garden Highway; turn right onto Garden Highway; turn left into Gateway Oaks Drive into the Sierra Health parking lot. **From the West:** Take I-80 East toward Sacramento; **(DO NOT TAKE THE I-80 EXIT TOWARD RENO);** Take I-5 North, exiting at Garden Highway, turning right on to Garden Highway; turning left at Gateway Oaks Drive, etc. **From the East:** Take I-80 west toward Sacramento; take I-5 South, exiting at Garden Highway, etc. Or Take 50 north, take I-5 north, exiting at Garden Highway, etc.

Congratulations and thanks to NCCNA president, Bev Anderson and the NCCNA's board for their ongoing work to expand and empower the support group network across the region! It really is remarkable that just a few committed folks have accomplished so much in recent years in taking the neuropathy story into our communities and establishing groups to provide support and information for those contending with neuropathy and those who care about them.

Thanks to **Dominick Spatafora, Neuropathy Action Foundation president**, for his wonderful work in preparing for the **Second Annual "Neuropathy Action Awareness Day" to be in San Francisco on June 26th.** We will once again have access to a free round trip bus ride to the event, but the dinner will cost \$30 this year. It will be a glorious day and everyone who is up to the schedule is encouraged to attend this most informative and fun event. Our patient education experiences will come from well established and acclaimed medical professionals with expertise in neuropathy from across our region and the US, including our IRH friends Drs. Eric Hassid and Marco Vespignani, as well as a patient panel of NCCNA members. Thanks to a special NAF grant to us, we will be able to send the agenda and registration form to some who've been **PN News** subscribers only on our 2007 mailing list, with the hope they will join us at the event.

A registration form is included in both of this month's mailings. If you want to be included in the bus trip to the event, please indicate that on your registration form for first come, first served access. The bus will have stops in Auburn, Roseville, Sacramento, West Sacramento and Davis. You will be notified on the bus pick up times later. **Do come with us!**

THE IRH INTEGRATED PAIN MANAGEMENT PROGRAM

Three years ago, in the midst of great suffering with severe neuropathy and spinal pain, I was privileged to participate in the precursor of the Institute for Restorative Health's Integrated Pain Management Program. It was very much a life transforming experience for me and my classmates. On realizing that I could at last "hear all the keys on the piano and see all the colors of the rainbow," I could truly rejoice and wish that all others suffering with chronic pain could experience the course as I had. Some of my learnings then have helped keep me going in the midst of recovering from the summer's spinal injury.

The next cycle of the Institute's marvelous program begins on **April 30** and anyone in moderate to severe chronic pain, regardless of the cause, is urged to consider participation. The flyer promoting the course explains that chronic pain signals can continue to fire for days, weeks, months and even years after the original injury, resulting in ongoing chronic conditions like neuropathy, arthritis, fibromyalgia or spinal deterioration. The Institute's program is designed to reduce the kinds of pain, stress and depression that afflicts many of us. Participants will learn that while chronic pain may be inevitable, suffering need not be.

The integrative medicine program begins with an initial pain evaluation sessions, training in Neurobehavioral Techniques (www.bepainfree.com) followed by a six week education program on simple and effective ways to improve physical and mental well being. The weekly two and one-half hour workshops will be led by IRH's wonderful Nurse Educators and **Dr. Marco Vespignani** leading **Healthier You** sessions A recommended Phase 4 "Back to Health Program" at the Physical Edge facility is highly recommended, but optional. And there will be an ongoing voluntary monthly support group at the Institute for program graduates that are also terrific. . **If you'd like to know more about costs and times for this program, call 530-758-4474.**

Exciting News from Our Neuragen Friends!

It was great to hear from our **OriginBioMed, Inc.** naturopath colleague, **Dr. Alexander McClellan**, with whom we worked several years ago during the NorCal Neuragen study that found the product so very helpful for neuropathy. The product is soon to be available at **Rite Aid and CVS Pharmacies**, representing 11,000 stores across the US, in addition to **Longs Drugs**, thus making it more accessible for all of us.

Building upon the tradition and work of our dear friend, **John Senneff's** wonderful books, OBM will soon be publishing a new ten chapter, very patient friendly book about neuropathy - **The Numb Toes Book**, about preventing, treating and coping with our condition. The authors are **Dr. McClellan** and **Dr. Mark Spitz**, a Seal Beach, CA podiatrist. A preview copy has arrived and a quick scan shows it's chock full of very valuable old and new information that all of us need to know about for the sake of our good health Dr. Spitz also has an article on neuropathy foot care to be included in the April or May issue of the AARP magazine. So, hooray for Drs. McClellan and Spitz for a much needed resource that will do much to empower all of us! We'll keep you informed on when, where and how the book will be available.

Dr. McClellan also reported on **new research** they are doing, seeking more information on the specific active ingredients of Neuragen to make the product even more effective, for longer lasting, sustained relief delivery systems such as patches, creams, gels, etc. We'll be learning more about these developments in the coming months. If you've never tried Neuragen, do please consider picking up a \$30 bottle for some really cooling, soothing relief for the kinds of neuropathy, fibromyalgia and back pain many of us struggle to contend with in our daily lives.

Legislative Alerts on Neuropathy Issues

Thanks to the ongoing advocacy of our **NAF President friend, Dominick Spatafora**, we've received word about developments on two legislative issues that should concern us for our own sake and that of other's. **Joint Resolution ACR 87** has now been referred to the California Assembly Health Committee for a hearing on April 22. Remember that the bill "creates a legislative task force charged with suggesting ways to promote public and physician awareness of Peripheral Neuropathy, promote understanding of the importance of early diagnosis and proper treatment and management, create programs to promote public and physician awareness of IVIG and other treatments to improve patient care, and determine how many people are affected by each type of therapy." Needless to say, it is very important that the bill is passed and if you'd like to join us in advocacy letters and/or appearances at the hearing, please let Martha know at 916-371-1125 for contact information available next week.

Secondly, NAF is sponsoring **AB 2649** that would prevent medical assistants from using a scalpel or any other paring instruments on anyone's feet. The bill seeks to correct for the cost cutting policies of some HMOs that allow

inadequately trained personnel to perform minor surgery on feet that are at high risk for major infections that can lead to amputations with diabetic patients. The HMO maintains that the policies allowing unlicensed medical assistant to cut the skin, corns, calluses, etc. with “otherwise healthy” patients, when diabetic patients are clearly not “otherwise healthy.” Whether diabetic or not, those with neuropathic damage to their feet need professionally trained podiatric care to protect their feet. This is a significant patient safety issue which some HMOs and others are skirting to save a few dollars. We salute NAF for providing leadership on this issue. If you’d like to help in this cause, please send a letter of support to **The Honorable Mike Eng, Chair, Assembly Business and Professions Committee**, 1020 N Street, Room 12A, Sacramento, CA 95814. **THANKS!**

Remitting and Relapsing Patterns of Neuropathy Symptoms

Retired Lt. Col. **Eugene Richardson** is a dear friend and colleague who leads two Florida support group networks who also does a lengthy monthly newsletter. He has once again graciously given us permission to share part of one of his recent articles that I found very helpful in better understanding some of our frustrations with neuropathy. What follows is a short summary of his thoughts on the above topic, from the perspective of a long-suffering (37 years) patient with CIDP, but whose acquired wisdom is very relevant for us.

One of the most frustrating aspects of neuropathy for both patients and doctors is the **remitting and relapsing patterns** in many neuropathies, particularly if either or both do not understand this strange phenomenon. He’d learned in the last 20 years or so that if he ate certain foods, slept the wrong way, walked too far, sat or stood too long, his pain and other symptoms would increase. MS doctors seem to understand about symptoms flaring up (relapsing) or going away for a time (remitting), but most doctors and patients dealing with neuropathy haven’t a clue and so aren’t prepared to help us. Some days all is well and we tell our doctors we’re OK, but then have a flare-up the next week. Since fifteen minute appointments only allow for concerns with the **here and now**, we’re likely to be dismissed and left unprepared for the for what may be around the corner.

According to **Dr. Norman Latov** and other neuropathy experts, some neuropathies develop first as acute conditions, coming on suddenly and then going away in a few months. If your neuropathy symptoms persist, you have a chronic condition that usually follows a pattern of remitting and relapsing possibly after a period of stable but sustained symptoms. Some remit, then relapse and never come back. Others remain and then relapse, with the symptoms remaining about the same and affecting the same areas. Others remit then relapse, remaining about the same but affecting more areas of the body. Others remit, and then relapse and each time the symptoms relapse they get worse. This is called a progressive neuropathy and if it is affecting many nerves and many parts of the body, it is called a progressive polyneuropathy. And there can be weeks, months, and sometimes even years between the remitting and relapsing cycles, thus confounding our doctor’s treating skills and our coping skills.

So, what must we as patients do with this maddening remitting and relapsing dance? First of all, we need to learn how to record our pain and symptoms in terms of their location, type, frequency and intensity, over an extended period of time as well as what makes the pain or symptoms better or worse. We can use a manual or computer spreadsheet to organize and record our changes over time. We’ll need columns on Dates/Times, Locations, Types of Pain, Frequency, Intensity, and Occurrence Variables.

Identifying the LOCATION of our pain or other symptom(s) helps the doctor in planning a treatment course; sometimes the exact location will tell the doctor which nerves are involved, which can help with diagnosis and treatments. The progression of a symptom from one part of the body to another location is also vital to know; for instance, for some, our symptoms progress up the leg to the knees and then jump to one’s hands, or even up to and into one’s trunk area, depending on the type of neuropathy. Knowing how many parts of the body are involved also helps the doctor in diagnosis and treatment planning.

Identifying the TYPES of pain/symptom is very important and we need to remember that they can change over time. Are our pains/symptoms dull, sharp, stabbing, burning, tingling or numbness, electrical shocks, stinging, itching, skin hypersensitivity to touch, skin feeling stretched, pain to the bone, feels like we’re wearing socks or gloves, etc. Are we feeling weak or very tired with limited stamina, do our feet or legs feel heavy like they’re in cement? Do we have feelings of spinning or dizziness, temporary spells of paralysis; problems with gastro-intestinal or genitourinary functions such as incontinence, constipation or diarrhea, loss of sexual feelings. Do we have difficulty in breathing, inability to sweat normally (too little or too much), dry eyes or dry mouth, changes in eye sight or even hearing?. These are all common symptoms for varying types of neuropathy, although we tend to think mostly of tingling and numbness, but these symptoms can also be common side effects of our medications, so we need our doctors’ help to sort out these dynamics.

Identifying the FREQUENCY and INTENSITY patterns is also very helpful. We could use a scale of 1 to 10 for each location and type of event. For instance 1 (*or more*) D, 1W, 1M for days, weeks or monthly occurrences. Use 10+

as constant, 2-9 for getting worse with activity. Intensity might be scaled from 1 (least or little bother), 5 (interferes with ability to work/play/sleep), 10 (passed out because of pain). Or choose phrases such as Hands, Electric Shock, 5D (five times a day), or #/l (for variable intensity levels). When our doctors ask how we're doing, we can share a **summary** of our record so we don't overwhelm our doctors with all of our detailed collected data, but a summary can really help us with understanding of what's going on in our bodies.

Identifying our OCCURRENCE VARIABLES helps us understand what makes the pain or symptoms worse or better. Here we might specify the various therapies we use, our various activities that might trigger or exacerbate your distress experiences. Using common sense, if we can ascertain what makes our symptoms worse, we can stop doing it; or makes them better or less, then we keep doing what helps. Of course, any contemplated medication and exercise changes should be discussed with your doctor. But always remember that we are all different and we must consciously discover our bodies and what does and doesn't work for each of us. **With neuropathy, one size (pill, dosage, exercise, relaxation technique, diet, supplement etc.) does not fit all.** So Richardson concludes that while the remitting and relapsing patterns for our various neuropathies, actually give us opportunities gain wisdom on how to help ourselves and help our doctors help us.

In his newsletters, Richardson always encourage his readers to join The Neuropathy Association (\$35/year) and to purchase Dr. Latov's book, **Peripheral Neuropathy: When the Numbness, Weakness and Pain Won't Stop**, for \$10 through TNA (www.neuropathy.org). **PN News** readers are encouraged to do the same. You can join on line, or send your check to TNA at 60 East 42nd St, Suite 942, New York, NY 10165-0930.

THANKS SO MUCH, EUGENE RICHARDSON, FOR YOUR FAITHFUL COMMITMENT TO EDUCATING PNers ABOUT OUR DISEASES AND HOW TO DEAL WITH THEM. AND BEST WISHES FOR YOUR TWO GROWING SUPPORT GROUP NETWORKS IN Florida !

Sacto Area Clinical Trial Opportunity for Those with Depression

To follow up on **Dr. Don Walk's** marvelous presentations made earlier this year on **Chronic Pain and Depression** (see below), here's some news that might interest some of us. The **UCDMC Psychiatry Dept.** is recruiting participants for an 18 month clinical trial study that will test a new investigational drug for the treatment of patients who have had repeated episodes of depression. **Participants must be 18-70 years of age and not currently taking any narcotics, psychiatric drugs or anticonvulsants for their depression or pain.** While use of these may eliminate most of us who are depressed, some still might be eligible and interested in participating. A display ad on page 2 of the February 26th issue of **The Sacramento Bee** directs interested parties to call 916-734-7723 for a preliminary eligibility interview. **Dr. Michael Maddock**, principle investigator, welcomes our help in getting the word out.

While there can be potential health risks in participating in any clinical trial study that determine the safety and efficacy of proposed new medications, participation is a much needed community service in the ongoing search for effective drugs to help with our various medical problems. Choosing to participate should be done with maximum clarity of what will and will not be asked of us. Read all documents very carefully and sign nothing unless and until you fully understand what will be involved. With or without placebo vs. active medications, you may or may not be personally helped, but your involvement can help others. The lead article of the latest issue of **TNA's Neuropathy News** encouraged PNers to take part in clinical trials that may lead to safer and more effective new medications for us.

Recent PN Meeting Reports

Don Walk, MD, Psychiatrist & Social Security Disability Adjudicator

"Chronic Pain and Depression"

Who would ever have thought that a presentation on Chronic Pain and Depression could make us laugh out loud, however hesitantly or sheepishly, with a few startling twinges of embarrassing recognition of "Oh yes, I've been there!" But laugh we did at both events and Dr. Walk outdid himself in West Sac. Our laughter was a confirming sign of Dr. Walk's wonderful healing ability with his marvelous insights and incredible capacity to mimic the behaviors and attitudes of folks he's known and helped over his career. He brought his many years experience as a clinician and now part-time adjudicator for Social Security applications for disability benefits based on mental health issues, some of which were often associated with chronic pain conditions. It was a phenomenal experience of going "low" but coming out "high" with the liberation of newly embraced intimations of how to help ourselves and one another in the pain/depression cycles so many of us experience with neuropathy. **Wow, Dr. Walk, what a tremendous gift you were!!!**

The reality is that chronic pain, whatever the cause, is very destructive of our physical and mental capacities, so when depression sets in, it radically compounds our problems. If we're still working, our occupational status becomes compromised and tenuous; our employers may not be able to accommodate growing fragility. We become willing to try almost anything, often becoming victimized by the demoralizing repeated failures of this or that promised relief. And if we're in chronic pain and stress, we may become more likely to contend with falls, further exacerbating our functional problems. Our growing anger and despair may tempt us to file a law suit with exaggerated visions of a quick, huge financial settlement for life-time security, little knowing that many suits lead to interminable delays and may result in only little or no payments or protracted appeals, in spite of an attorney's early enthusiastic promises.

Our pain may not be obvious to others, who wonder what our problem is; as we actually may look great. But those with discerning eyes can see our pain in the way we walk or sit or behave. For a variety of cultural and personal ego factors, many of us will remain in denial about our own depression or that of others. After all, to recognize and own it requires a response and we may be paralyzed with fear or haven't a clue on what to do. We may adopt dysfunctional behavioral patterns in response to our employer's, family's or friends' criticisms and rejections, further damaging our sense of self worth and closing off any hopes for a future of meaning and fulfillment. Our whole life may be falling apart; we may be losing everything we've valued. We become trapped in our withdrawal and cry a lot in our isolation.

But our depression becomes obvious to discerning and empathetic eyes that see the common symptoms such as 1) withdrawal and lost interest in normal activities; 2) increased or decreased appetite; 3) agitation or suppression/retardation 4) low energy and high fatigue levels; 5) inability to concentrate, as with "brain fog"; and 6) suicidal thoughts or actions.

If we can get past the denial and anger, we need to access a knowledgeable and empathetic doctor with whom you can be honest about physical and emotional status to ask for appropriate medications. They really can help us get back into the process of living again, sleeping at night, normalize our daily functioning, resuming physical activity, and help soothe and stabilize our relationships. We begin to reach out with more security that we'll receive help from others to sustain us through the scares and disappointments that are common with the vicissitudes of ordinary life, much less the stresses of chronic pain. It's essential to develop or re-connect with a caring support network that can help us through the transitory stresses and feelings of despondency that are common with chronic pain.

Three questions arise in the grieving and "overcoming" processes of dealing with chronic pain: 1) what did I used to be or do that gave my life meaning? 2) What skills and talents did or do I now have to give meaning to my life? 3) What can and will I do now and what supportive help will I need? Our answers will vary over time as we progress in our journey. Two things will be especially helpful. Getting back to work or volunteerism and increasing our social interactions will help restore our self esteem. Reaching out can and will empower our movements forward.

A question raised at the Davis meeting inspired Dr. Walk to bring in an article from the March 2008 issue of **Consumer Reports on Health** that provided six **doable** steps to restore mental clarity. It reports on a study of 100 older adults experiencing forgetfulness, attention lapses and clouded thinking. Rather than fears of dementia and cognitive loss, they found the complaints were more related to sleep disturbance, mood changes, common life stressors and overall mental health. **So here are some things we can do to clear away brain fog:** Check for medical reasons, such as high blood pressure, and chemical, hormonal or metabolic imbalances. Review your meds, both prescribed and OTC as some thirteen classes of meds can adversely affect our mental acuity. Learn to reboot your brain by dealing effectively with intense and persistent stressors, such as multi-tasking. Improve your sleep patterns. Do **physical** exercise as it increases oxygen to the brain. And finally, reach out to someone(s) for support.

Thanks so much, Dr. Walk, for so generously giving us of two very illuminating and talks that helped us better understand our frustrations and needs! And thanks especially for the healing laughter you evoked from us while dealing with tough issues!

**Sue Marie Mazzoni, CMP, CNHP, Awakening Wellness, at Cut -n- Loose,
712 Lincoln, Woodland, 95695 (530-669-5853)**

"Massage Therapy and Essential Oils for Neuropathy"

Our February Woodland speaker, Sue Mazzoni, is a Certified Massage Practitioner, a Certified Natural Health Practitioner, as well as a **Young Living Essential Oils** distributor who operates from the **Cut-in-Loose** shop in Woodland, but also makes home service calls. Her talk emphasized the benefits of proper nutrition, massage and essential oils for relieving neuropathy distress. The presentation was very well received by those present, who expressed a strong interest and desire to learn more in a future session. The following are highlights of the visit, as captured by

Donna Russell.

All foods are either acidic or alkaline. Acid-forming foods, such as polished white rice, white flour, white sugar, coffee, tend to support inflammation and infections. The acid-binding (alkaline) foods are root vegetables and spinach; fruits like figs, cranberries, tangerines and oranges, raisins, grapes and apples; nuts like walnuts, almonds, pecans and coconut. Avoid pork and shell fish as they can be high in toxins. Eat protein before 5 pm because it can ferment in the colon overnight. It takes 12 hours to digest a meat! Protein enzymes are the foundation of nutrition. What is sweet to the mouth is bitter to the liver. Everyone should have a bowel movement after every meal.

Why use essential oils and how do they work? The “active ingredient” of the oils from plants are **oxygenators**. In the plant they fight off viral, bacterial and fungus infections, ward off bugs and other things injurious to the plant. Among the “hot” oils are basil, oregano and thyme. The essential oils each have numerous identifiable positive values for the body. For instance, the “thieves’ oil” containing eucalyptus, cloves, cinnamon, and rosemary are great for improving one’s immune system. We have 3000 pores on the bottoms of our feet, so foot massages with essential oils amplifies the value of the stimulation/circulation effect. Within 20 minutes after you apply an essential oil to your feet, it’s absorbed into our systems. Indeed, everything on our skin goes systemic, so we need to be careful to avoid toxic products.

The best oils for PN are geranium, juniper, peppermint and heliocrism because of their warming capacities. Specifically, **Juniper** reportedly regenerates nerve tissue; **Geranium** stimulates the adrenal cortex of the kidney, dilates the bile ducts, corrects hormone imbalances, and stops bleeding. **Peppermint** is anti-inflammatory, aids digestion, decreases menstrual cramps, and awakens you if you are sleepy. **Oregano** is anti-infective. **Frankincense** and **Lavender** stimulate and support the immune system. **Lavender** is especially calming, promoting relaxation and sleep. Mazzoni and her granddaughter passed around samples of several essential oils and one person reported instantaneous relief with the peppermint for a headache!

What about prices? She explained they range from \$9 to \$150 for a small amount, noting that it takes 3,000 pounds of roses to get one quart of rose oil! Sue says “Your health is your wealth. Think of buying essential oils as part of your health care budget.” If you’d like a list of her oils and their benefits, email Donna Russell at dbr3705@yahoo.com and she’d be happy to send you a multi-page resource list as a Word document in regular email.)

Thanks Sue Mazzoni for a most delightful and informative presentation! Do come again to teach us more about massage and essential oils.

Invitations to Tell our Neuropathy Stories

There is a great need for old and new quasi-technical, but patient-friendly book resources that have been featured in this and past issues of **PN News**. But they also featured statements by PNER patients whose stories about their symptoms, quests for diagnoses, medical and alternative treatments and coping strategies deeply enriched the journeys of individual book readers. TNA, NCCNA and local support groups continually ask their members and friends to share their stories, recognizing their great value in educating the PN community and the general public about neuropathy. In gratitude for all who have shared in the past, we are all encouraged to share your stories to and here are some ways to do just that:

Locally: Insist upon periodic “share/support” and not just “speaker” meetings in your group’s corporate life. Come to share your questions and stories – we all have wisdom that can help others. Neuropathy is horribly complex and we need all the perspectives we can get from one another. Your stories are also wanted for future issues of PN News and you can email Martha at kairoschandley@yahoo.com or mail them to her at the address on the following page.

Regionally: NCCNA sponsors a marvelously evolving web site at www.pnhelp.org overseen by NCCNA board member and webmaster **Penni Smith** who has been appealing for your stories for some time as an essential service of the site for those seeking information about neuropathy and how to cope with it. You can submit your stories via email to her at info@pnhelp.org or via snail mail to her at 5696 Cold Springs Drive, Foresthill, CA 95631. If you have questions on how to write or submit your story, you may call her at 530-367-4673. She’ll be delighted to hear from you.

Nationally: **The Neuropathy Association** has several resources that can use your questions and stories: At

the website, www.neuropathy.org there is a national bulletin board that would welcome your questions and stories. **Natacha Pires**, the delightful medically trained TNA staffer, who has been working hard to solicit articles from PN members from across the nation for both the web site and the periodic newsletter: **Neuropathy News**. You may email her at npires@neuropathy.org or send her material by snail mail to The Neuropathy Association, 60 East 42nd St. Suite 942, New York, NY 10165. You can also fax her at 212-692-0668 or call her at 202-692-0662.

Some years ago PNER **Mims Cushing** wrote a marvelous book about her experiences, ***If You're Having a Crummy Day, Brush Off the Crumbs***, that is available through TNA. She is now working with neurologist, author and TNA co-founder **Norman Latov, MD**, to develop a collection of patient stories for a new book. They are looking for informally written stories about a variety of patient experiences that make patient education more accessible to the lay person. You can email her with your stories at mimspvb@comcast.net or by snail mail to **Mims Cushing, 7028 Cypress Bridge Drive North, Ponte Vedra Beach, FL 32082**. She'd like you to identify your city, your support group leader's name and, if you're willing, your age.

PLEASE BE A PART OF EDUCATING YOUR SISTER/FELLOW NEUROPATHY PATIENTS AND THE GENERAL PUBLIC! LET'S SHOUT IT OUT THAT THERE REALLY CAN BE A GOOD LIFE WITH NEUROPATHY, HOWEVER FRUSTRATING IT MAY BE AT TIMES!

Hope to see all of you at our local group meetings in the coming months. Come to learn, be encouraged and encourage others. Please join us in our mission to our Yolo communities!

Yolo Neuropathy Groups
c/o Martha Chandley
1399 Sacramento Ave. Unit 108
West Sacramento, CA 95605

TO: