

PN News

Yolo County

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MAY 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

Martha Chandley, Editor, kairoschandley@yahoo.com & Donna Russell, Asso. Editor, dbr3705@yahoo.com

NEUROPATHY HOTLINE: Martha at 916-371-1125 & Donna at 530-661-3705

May Yolo Neuropathy Meetings

Woodland: Monday, May 5 at 3:30 pm at the Senior Center, 2001 East Street

Joel Lantsberger, Waiora Representative, Marysville (530-742-2833)

“Neutraceuticals for your Good Health”

Contact: Donna at 530-661-3705 or Delia at 530-661-3238

Davis: Wednesday, May 14 at 2 pm at the Physical Edge, 1460 Drew Ave. Ste. 300

Eric I. Hassid, MD, Neurologist, Med. Dir., Institute for Restorative Health

and Lynn Green, Medtronic area representative

“Alternative Pain Management Options”

Contact: Martha at 916-371-1125 or Donna at 530-661-3705

West Sacramento: Tuesday, May 20 at 2 pm at the Senior Center Classroom at

664 Cummins Way, corner of Cummins & Reuter in NE West Sacramento.

“Where We Are & What We Need - Share Time”

Contact: Sandra at 916-372-6093 and Martha at 916-371-1125

About our May Meetings

One of the many things we've learned about dealing with neuropathy over the years is that regardless of where or how we experience our neuropathy distress, the damage occurs at the **cellular level** anywhere along the nerve paths breaking down electrical signals from and to the brain. Our major nerves stretch from the spine to the farthest points of our peripheral limbs. Anything we can do to improve our biochemistry functioning at the cellular level, via removal of toxins, addition of more nutritious foods, and nutrient supplementation may very well enhance our possibilities for nerve regeneration and preventing long term nerve damage.

Joel Lantsberger, Marysville **Zaiora** representative, will be sharing information about two products that are helping many with a variety of health problems. **Natural Cellular Defense** is a liquid ziolite formed from natural volcanic materials that trap and then flushes out allergens, heavy metals and harmful toxins from our bodies. (See <http://zeoliteautoismstudy.com/home> and <http://www.ncdpro.com/index1.html>). The **Super Mushroom** supplement supports immune systems, defending the body against disease. The product is based on properties of a special mushroom grown in the Brazilian rain forests, shown to be the basis for the good health and longevity of a tribe there. The healing properties of a hybrid form have been developed and patented in the US and is being used effectively to counter a variety of health problems. For more info go to this web site <http://www.supermushroominfo.com> and be sure to come to the Woodland Neuropathy Group meeting on Monday, May 5 at 3:30 pm at the Senior Center at 2001 East Street.

(Beginning on June 16, the Woodland group is changing its meeting date to the 3rd Monday of the month at 3:30 pm, continuing to meet at the Woodland Community and Senior Center. Their June meeting will be a share time support meeting.)

Neurologist **Eric I. Hassid**, CEO and Medical Director of the **Institute for Restorative Health** and long-time friend and supporter of the Yolo Neuropathy Groups, will conclude our county-wide series on **Pain Management Options** at our May Davis meeting at IRH, 1460 Drew Avenue. He will be discussing a broad range of alternatives from traditional medicines, innovative compound pharmacy products, injections, topicals, supplements, etc. that are used at IRH and available at other local resources. Ever delightful **Lynn Green**, area Medtronic representative, whose help has been essential in arranging for these **Options** programs at PN groups across the region, will present more specific information about Medtronic's Neurostimulation Implants and the Intrathecal Drug Implant systems, which may be the appropriate treatment for some chronic severe pain from neuropathy and other causes. It is very important that we understand what our options can and should be, whether our regular doctors are aware of them or not. Remember, it is essential for our own good health that we educate ourselves and help educate our doctors with appropriate knowledge and wisdom that will improve our health care for all conditions and especially our neuropathies. We'll have Medtronic's wonderful handouts for you and your doctors.

The **West Sacramento** group will have a "share time support meeting" on the 20th at our new meeting site in the classroom at the **Senior Center**. Come bring your experiences, questions and wisdom to share with others. There may be some issues in the following pages that you'd like to discuss, or maybe you have discovered some new things about neuropathy that can be shared. Come to learn, encourage others and be encouraged!

Celebrating National Neuropathy Awareness Week!

May 12-16 has been designated **National Neuropathy Awareness Week** and is being observed in a variety of ways organized by **The Neuropathy Association** – see the interactive invitations at www.neuropathy.org, our regional **Northern California Chapter of the Neuropathy Association** and in our local communities. We're far from doing the kinds of fund raising community walks/runs or splendiferous dinner dances that are common with other non-profit causes, but there are some very significant bases for celebration in our worlds this year:

1. An interview on neuropathy and TNA activities will be featured on **Sky Radio Network**, an in-flight radio show airing world-wide on all American Airlines and US Airways flights in May and June. The interview will be reaching millions of travelers who may know nothing about this neurological condition that afflicts so many of us. In celebration of Mother's Day on May 11, TNA is encouraging us to send special donations in honor of, or in memory of our mothers or others who have had a special positive role in our lives. If you're not a member, this is a great time to join, by sending a check for \$35 to 60 East 42nd Street, Suite 942, New York, NY 10165-0930.

2. **NCCNA's** network of support groups will soon have activities in 40 communities across the region bringing helpful information to hundreds of PNers hungry for helpful information. Fund raising and organizational efforts are underway to create a library of patient education videos featuring experts on a variety of neuropathy issue topics that can be used by the rural community groups for their members. NCCNA's April Annual Meeting drew some 40 folks from across the region enjoying Sandra Vinson's great catered lunch and three outstanding speakers on inner resources for coping with pain, pole walking for improving balance, and publicizing neuropathy group activities. Thanks to the board for its outstanding work this last year! A year ago, NCCNA took on a special neuropathy awareness project placing posters about neuropathy on public buses in three Yolo, Sacramento and Placer Counties. One-on-one counseling and patient education materials were provided to some 150 documented persons in metropolitan Sacramento who called for help. Hundreds more riders saw and will continue to see the signs as an ongoing awareness campaign. If you're not yet a member of NCCNA, this is a great time to join by sending a check for \$12 for the balance of 2008 to P. O. Box 6985, Auburn, CA 95604.

3. The advocacy work of the **Neuropathy Action Foundation** has secured approval of **ACR 87** in the California Assembly Health Committee to create a **Legislative Task Force on Peripheral Neuropathy** sponsored by NAF. Passage in the full Assembly is anticipated to develop "ways to promote public and

physician awareness of PN, 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 neuropathy.” This sets the stage for an unprecedented focus on the realities of PN and planning for more effective physician training and patient treatments in our state. Congratulations to NAF’s Dominick Spatafora and thanks to the organizations whose representatives testified in support of the bill, including the California Medical Association, the Osteopathic Physicians and Surgeons of California, the California Academy of Physician Assistants and NCCNA.

4. NAF will once again sponsor the **Neuropathy Action Awareness Day** conference in San Francisco on June 26th with an outstanding agenda of speakers and exhibitors. The day-long and evening event will cost \$30 for each PNER and caregiver attending the event. NAF is once again providing free round trip bus service for NCCNA members and care givers living near Auburn, Roseville, north Sacramento, West Sacramento and Davis. Please send your check and completed enclosed registration form to NAF by June 5h, and the sooner the better if you want to take advantage of the bus service. Logistical details about pick-up times and locations will be forthcoming.

5. In spite of major health problems of its group leaders, Martha and Delia, the **Yolo Neuropathy Groups** (YNG) survived another year with outstanding speakers and outreach activities, with a hope that improved health and increased organizational help will find our Yolo attendance being rebuilt in the coming months. Thanks to the rebated NCCNA dues payments by some 40 YNG members and some very special donations by YNG friends in recent months, we are delighted to report that we had \$1122 in our Yolo treasury as of May 1 to cover our newsletters and outreach activities for the rest of the year. We’ll now be able to get Donna’s phone (530) number printed up on adhesive paper to apply to the Yolo bus posters to reach out to folks who may be reluctant to call Martha’s (916) number. Thanks especially for donations by our very special Sacramento friends stockbroker Bill, homemaker Carol, and county government manager Steve. Thanks for special donations by Alabama friend Carol and Montana friend Paul. Thanks to Elinor and Bill in Yountville, Sue in Rocklin, Ginnie in Walnut Creek and Johnetta in Berkeley. Thanks to our special Yolo Davisite friends Bimi, Velma and Barbara; and Woodland friends Evelyn and Larry. And thanks to many other special friends across the area and country who provide a variety of ongoing help and encouragement through the year.

6. Thanks to the **Yolo Community Foundation** for its Donor Recognition event last fall which gave us an opportunity to say thanks some of our special in-kind product and service donors in support of our group activities. Thanks also to the Davis Enterprise, Woodland Daily Democrat, West Sacramento Press and News Ledger for their faithfulness in advertising our meetings and thus helping us expand neuropathy awareness in our target communities.

WE HAVE, IN SHORT, LOTS OF REASONS TO CELEBRATE OUR WORK ON BEHALF OF NEUROPATHY AWARENESS THIS YEAR. THANKS TO ALL FOR YOUR CARING SUPPORT!

**RECENT MEETING REPORTS ON NUTRITION FOR NEUROPATHY,
GENTLE YOGA FOR SENIORS, AND
PAIN MANAGEMENT OPTIONS FOR NEUROPATHY
& OTHER CHRONIC PAIN CONDITIONS**

**Marco Vespignani, ND,
Institute for Restorative Health, 1460 Drew Avenue, Davis, CA 95618, 530-758-4744
“Nutrition and Supplements for Diabetic and other Neuropathies”**

Dr. Marco is the Medical Director of Restorative Health and Women’s Complementary Health Services at IRH, having received his Doctorate of Naturopathic Medicine from the prestigious Bastyr University, beginning his practice in Napa prior to joining the IRH team. As a primary care practitioner, Dr. Marco seeks to restore and maintain optimum health in his patients by emphasizing the body’s natural inherent self-healing process and

treating the whole person, not simply a generality of symptoms. Naturopathic medicine is the art and science of disease diagnosis, treatment and prevention using natural therapies including botanical medicine, clinical nutrition, hydrotherapy, homeopathy and physical medicine. Among his areas of expertise are treating neurological and hormonal conditions and environmental toxins and is thus an excellent resource for those with neuropathy

Doctors of naturopathy concerned with nerve damage begin their treatment assessments asking the question - **What do our nerves need to be healthy?** Whether the cause is diabetes, other metabolic/systemic conditions or other causes, naturopaths know that virtually all nerve damage is complicated by inadequate circulation blocking the flow of blood, oxygen and nutrients to the affected nerves. With diabetics it's like the "blood sugar" gums up the flow at cellular levels, beginning in the longest portions of the nerves cells in the feet and hands.

So increasing circulation and nurturing the cells becomes a treatment priority with a variety of means, including contrast hydrotherapy in which hot water opens the capillaries while cold water closes them. Exercising, preferably 40 minutes a day, with whatever means or style is comfortable and safe for you also increases circulation. Aerobic activity at the level of "breaking a sweat" but still being "able to talk," is ideal for cardiovascular health problems.

To oversimplify, nutrient metabolites like sugars, amino acids and fatty acids are broken down via the "Kreb cycle" into energy in the mitochondria cells. The B vitamins are essential for these biochemical processes and their deficiency is one of the major causes of neuropathy. Exposure to a variety of toxins (like heavy metals, agricultural, industrial or household toxins) can contribute to B deficiencies, thus causing neuropathies. So taking in appropriate levels of the B vitamins, including folate, is very important for neuropathy patients to protect and regenerate their nerve cells. These are composed of the axons (rather like bundled electrical wires that carry messages to and from the brain, skin, muscles and internal organs) and the myelin sheaths (a fatty insulating substance around the "wires"). Either or both can become damaged with different types of neuropathies or other neurological disorders (e.g. multiple sclerosis which primarily affects the sheaths.) If you experience the "stocking and glove" sensation type of neuropathy, you should definitely be checked for Vitamin B-6 deficiency (and excess). Vitamin B-12 deficiencies are often caused by malabsorption problems common with celiac disease and gastric bypass surgeries. Seniors particularly have problems absorbing B-12 nutrients. The methylmelanic test is the best test for accurately detecting this deficiency.

One begins "re-insulating" the myelin sheaths via such nutrients as cold water fish and fish oils, flax seeds and nuts that are high in omega 3 fatty acids. The body continually tries to rejuvenate damaged cells to rebuild the neurons with their axons and sheaths, via processes that are enhanced or accelerated with such nutrient supplements as the anti-oxidants alpha lipoic acid (ALA), acetyl l' carnitine, acetyl l cysteine, selenium and vitamins C and E. ALA and Carnitine have been shown to reduce diabetic neuropathy pain and regenerate nerves. Melatonin is another anti-oxidant which helps with sleep. Other important nutrients for neuropathy are thiamine, niacin, chromium, and glutathione. Richly colored vegetables and fruits are important for some of these naturally occurring nutrients. Craving sugars or salts are an indication of dehydration and we need to stay hydrated for good health. Special herbs – including cayenne pepper (to reduce pain) and cinnamon, ginger and ginkgo (to lower blood sugars) are especially helpful for those with diabetic neuropathy. As a reminder, in a previous session with Dr. Marco, he stressed the importance of CoQ-10 supplements; when asked how much one should take, he quickly responded, as much as you can afford!

Anyone seeking more information about Dr. Marco's practice is encouraged to call the IRH number above. To learn more about nutrition Issues for wellness, you are encouraged to participate in his wonderful workshops to help you get off to a great start toward a **HEALTHIER** you. *And be sure to attend the **Neuropathy Action Foundation** conference in San Francisco on June 26 to hear Dr. Marco's and Dr. Hassid's presentation. (See the enclosed registration form.)*

Thanks so much, Dr. Marco! As always you were a total delight and we very much value your wisdom and commitment to helping those with neurological disorders achieve better health naturally.

**Mae Denman, Bryte Yoga and Wellness, www.bryteyoga.com
1513 Hobson Avenue, West Sacramento, CA 95605, 916-374-9704
“Gentle Yoga for Seniors”**

About the time the West Sacramento group was just getting restarted again, we were honored to have **Mae Denman, Yoga Instructor Extraordinaire**, come introduce us to gentle yoga for folks like us. Since then, several of us have greatly benefited from her leadership and coaching as we began to learn the practice of deep breathing, mindful moves and poses, and tranquil guided meditations for deep relaxation. We've gathered at her studio at the above address or at the West Sac Senior Center. Much to our delight, we're pleased to confirm that some of our aches, pains and feelings of frustration or anxiety have much improved or gone away. We've had a most gifted coach who designs our sessions to strengthen areas of weakness in our musculo-skeletal systems and addressing imbalances causing discomfort. She targets our particular areas of tension for stretching and relaxation.

Mae began practicing yoga in 1974 and taught her first class at a community center in 1980. Since then she has taught individuals and groups in a variety of settings, continuing her studies with teachers of several hatha yoga traditions. She became a certified teacher in 2000 at the Kripalu Center for Yoga. Her yoga experience is complemented by an international career in nutrition and health education, having lived and consulted in over 42 countries around the world.

With Mae's joyful, playful and deeply affirming spirit, we've experienced many hearty laughs mixed in with the sometimes challenging stretches and poses that strengthen our PN weakened muscles and increased our suppleness and balance for stiffened and shaky aging bodies. And maybe best of all, we've learned to breathe deeply and relax. Who knew yoga could be so much fun and healing for a variety of pains, neuropathic and otherwise? So it was great to have her back with us at a recent West Sac meeting, talking about the history, philosophy and great health benefits of yoga. She also led us in some of the commonly used movements that are keeping many seniors at various locations in our Yolo and other area communities standing taller and walking with greater security and less fearful of falling.

Yoga began as a spiritual exercise thousands of years ago in India with postures preparing one for deep meditation practices. In the west yoga has taken on several different forms and styles ranging from the most commercialized driven fitness in hot sweaty environments to the calmer restorative yoga of physical and emotional relief. With gentle yoga, we are encouraged to work only within our comfort levels, activating the relaxation response of slow movements, simple poses and meditation calming the nervous system. Heart rate, blood pressure and breathing slow down as our bodies and minds relax.

For Mae, yoga means creating unity of mind, body and spirit. Listening to one's body and aligning one's breath with movement and intention in each position is at the heart of yoga. As part of a treatment plan for neuropathy, yoga embraces the Mind/Body connection, integrating our experience of self in a healthy and restorative way. For the Body, yoga stretches and tones muscles, releases chronic tension, improves circulation and energizes and refreshes the body. For the Mind, yoga calms restless thoughts, cultivates concentration, supports mental clarity and confidence, and promotes self-awareness. For the Spirit, yoga encourages self-acceptance, honors one's inner wisdom and invites deep restorative stillness. All of which may sound very esoteric to the Western ear and mind, but there is profound and empowering truth in yoga's claims, especially for those dealing with chronic pain and stress. Interested? Give her a call at 916-374-9704 to learn about her classes in Davis and West Sacramento. Or go to her website at www.bryteyoga.com.

Thanks so much, Mae, for teaching us about and inviting us into the practice of yoga for our good health. We appreciate your commitment to helping seniors and disabled persons with your healing fitness regimen and delightful personality!

David Teicheira, MD

83 Scripps Drive, Suite 310, Sacramento, CA 95825 916-923-0900

“Pain Management Options”

Dr. Teicheira is Board Certified in Pain Medicine, Anesthesiology and Internal Medicine. He graduated from the USC School of Medicine in 1985, completing his residencies in Internal Medicine and Anesthesiology there, as well as a fellowship in Pain Management at UCD Medical Center, where he has been an Assistant Professor of Anesthesiology and Pain Medicine. His medical procedures will continue to be done at the **Sacramento Pain Clinic** at 2805 J Street in mid-town Sacramento, but his consultation offices are now at the above address. Consultations must be arranged via an authorized referral from one's primary care provider and insurer.

His new practice brochure notes that **“Healing is a Journey....Choose Your Guide...”** Choosing Dr. Teicheira as your guide won't be much like choosing “your father's/mother's - or maybe even your own - old pain doc” because he sees himself primarily as a **coach and cheer leader**. As his brochure succinctly puts it:

The goal in pain management is to achieve a new balance in your life, between what you can do and what is difficult to do. This has to be individualized for each particular person's. It is best accomplished with a balanced approach, finding the optimal combination of medications, procedures, stress management, restorative exercise, healthy diet and changing your relationship to pain, from one based on fear and misery to one based on understanding and acceptance.

Central to his approach is changing the way we respond to pain, reprogramming our brain's response. Pain's function as a behavior management mechanism tends to have us back away from activity, lest we “hurt ourselves,” but he insists that it's virtually impossible to really hurt ourselves with regular, normal activity. Some flare-ups can and do occur, but we can learn to achieve and maintain a balance between what we're “willing to pay” in exchange for continuing a desired activity. By taking slow, safe, small steps in a learning process, we can build a repertoire of what can and will work for us. It's essential to understand that if we stop using our body, our body will stop working to maintain muscle mass that's too easy to lose and very hard to recover. So we need to keep moving; indeed, the more we do, the more will our pain be lessened, as exercise releases pain relieving endorphins.

While real physical damage and pain awareness communicates through some of the same nerve paths, but they actually function differently. **We come to recognize that our sense of chronic pain is an illusion of danger.** Rather than unconsciously choosing to suffer with the pain, we can learn to choose a neutral response, being present to the experience but refusing to be overcome by it. We can learn to “welcome it back” with an embrace of having fun or relaxation. Even though we may feel badly at times, staying active via gentle yoga, tai chi or chair yoga, overrides the pain signals that usually trigger our fears and despair. He invites us to give up the fear response and learn to say, “Oh, yes, I remember you, but you no longer scare me and I am learning to live well even if you're here with me. “ **And by the way, he encourages all his patients to participate in a “gentle yoga” program on a regular basis because of yoga's healing attributes for those dealing with chronic pain.**

Dr. Teicheira's illustrated discussion of the **neuroanatomy of pain** was really fascinating and enlightening – here's hoping this is a reasonably accurate, valid summary... Pain nerves are damage sensors, firing in the distorted electrical charge communications along the neuron's nucleus, axon, myelin sheaths and the small fiber dendrites at the ends of the nerves. These allow the nerves to communicate with one another via the chemical neurotransmitters. The axons bundle nerve “wires” together and are insulated by the fatty myelin sheaths. Nerve damage can be in either or both major components of the nerves, sometimes in extended lengths, sometimes in short, intermittent segments. Neuropathic pain occurs when portions of the nerves dies off; the remaining nerves get “unhappy” and start making new chemicals - nerve growth factor neurotransmitters, which cause the pain. Brain imaging studies have shown a difference in manifestations of “pain” and “misery” in that “misery” lights up the central part of the brain, while “pain” awareness shows up with less intensity elsewhere in the brain. When we experience “burning” our nerves actually aren't on fire, it's that the brain is getting bad data as a sign of actual new damage. Actually information about past damage is stored in the nerve nucleus.

One of the issues considered in determining **how well analgesics work** is how many people are needed to show treatment effectiveness. For instance, it takes two people for the TCAs (like elavil) and some opioids; three people for morphine, four for gabapentin or Lyrica, and six for tramadol. In short, the TCAs continue to be the most effective medication for neuropathic pain; however they (and other pain medications) do have real negative side effects that must be taken into consideration. When asked about Klonopin, he replied that it continues to be well respected and he uses it with some patients.

He reminded us that chronic neuropathic pain tends not to respond well to opioids, but they can take the edge off and are better than nothing. One must be careful with potentials for addiction; but he stressed the difference between dependence and addiction. Part of his practice involves weaning some patients off addictive opioids. Regardless of the medication chosen, if it doesn't prove to be truly helpful within a month, it's probably not going to work. While we and our doctors may HOPE that a particular medication will be effective for us, we all really need to realize that **HOPE IS NOT A STRATEGY FOR PAIN MANAGEMENT!** On the other hand, we need to recognize that we'll likely need a combination of medications and/or other approaches for the best treatment models. Finding that right mix will require some time and experimentation, so both the prescribing doctor and the patient need to give adequate time in the search.

Not covered in his lecture, but enumerated in his practice brochure, is this list of **commonly treated conditions** in his practice: back and neck pain, failed spine surgery pain, neuropathy pain, reflex sympathetic dystrophy, occipital migraines (starting at the base of the brain), post-surgical pain (when nerve damage leads to ongoing pain commonly seen with hernias, chest, mastectomy, arm and leg pains); pelvic and bladder pain, herniated discs, myofascial pain, diabetes pain, and cancer pain.

In addition to the centrality of his "coaching and cheer leading," as well as the more traditional medications we're familiar with, **Dr. Teicheira's treatment options** include spinal cord stimulation, peripheral nerve stimulators, spinal injections, nerve blocks, radiofrequency ablations ("pruning" small nerves), joint injections (including facet and sacroiliac joints), percutaneous discectomy (disc decompression through a needle), diagnostic injections and discograms, sympathetic blocks, trigger point injections, botox injections, and other diagnostic and therapeutic procedures.

Thanks to **Lynn Green, area Medtronic representative**, we were provided with helpful packages of descriptive patient information materials from Medtronic that built upon Dr. Teicheira's presentation about pain management options he can offer his patients. Among them are the invasive procedures of **spinal cord stimulation** and **intrathecal pump implants** that he uses with some of his pain patients. However, he clearly cautioned that anyone approaching him for these procedures with an attitude they can not live without them, may be denied after a screening test or temporary trial placement based on well-established protocols concludes the patient is not a good candidate for the procedure.

(The following information is based upon Dr. Teicheira's presentation, the Medtronic brochures and conversations with satisfied patients who have gotten the implants for their own pain management and a surgical nurse who has had an implant herself, but has also assisted Dr. Teicheira in implant procedures. You would need to have extensive conversations with your pain specialist about what is involved when considering a trial experience with either procedure. As with other outpatient or hospital surgical procedures, there are potential hazards, such as infections, with the implant or removal process; these need to be discussed and understood.)

Neurostimulation (also known as spinal cord stimulation) uses a small electronic system (similar to a "pacemaker") that is placed under the skin in a specific area of the back, depending on the targeted area. Special wires, called leads, are then run over to the spinal cord, sending electrical impulses that are directed to cover the specific areas where pain is experienced or toward the causal base of the pain. The wires create an electrical magnetic field in which a pleasant buzzing sensation The stimulation blocks pain signals from traveling up the spine and reaching the brain. During the trial period, usually lasting two to three weeks, the battery charged system is worn externally. Some people find the buzzing so annoying they simply reject the treatment altogether. Others find it a welcome and comforting alternative to the old pain. Once implanted, the system's batteries can last up to nine years with periodic recharging via a brief and simple procedure. Should the patient determine the system is no longer desired, for whatever reason, it can be surgically removed.

The **Intrathecal drug delivery system** uses a small pump that is surgically placed under the skin of the abdomen to deliver pain medications through a soft tube (catheter) directly into the Intrathecal space where fluid flows around the spinal cord. Trial periods of the system are also required to determine patient viability. Intrathecal drug delivery can increase pain relief and provide comfort for people with severe pain, although the range of pain relief will vary from person to person for a variety of factors. Studies have reported many people who did not experience enough pain relief with high doses of oral medication achieved pain relief with Intrathecal drug delivery and were able to improve their activities of daily living. Smaller doses of medications are effective with the pumps. Medtronic offers a variety of Intrathecal drug delivery systems tailored for different symptoms and body types, including programmable (i.e. with releases of specific variable levels of medication) and nonprogrammable devices. This system can also be surgically removed should the patient choose to terminate this treatment option.

According to Dr. Teicheira, there are **decided advantages** to using either, or potentially both of these systems for those with some disabling and severe pain syndromes, particularly occipital migraines and sciatica or radiculopathy. The Medtronic booklets note their use may reduce the need for oral medications and thus their potential negative side effects; the rate of electrical stimulation or drug delivery can be adjusted to maintain the best possible comfort/pain control needs; and the delivery system devices are designed to fit different body types. Anyone interested in pursuing these and other treatment alternatives with Dr. Teicheira or other especially trained pain specialists will need to secure appropriate authorized referrals through your primary care giver and be open to exploring a broad range of means to manage your pain in a partnership relationship with your doctor.

Improving our dietary practices are very much a part of his treatment philosophy and style. He stressed the body's need for omega 3 fatty acids such as cold water fish or fish oil (1200 mg/day), ground flax seeds or flax seed oils, and walnuts. It would take about 2 ½ months to begin to see positive results of these additions to our diets. The American diet tends to use more omega 6 fatty acids, like corn oil, that can worsen inflammatory conditions such as arthritic joint pain. We need the correct ratio of omega 3 and 6 oils. He said that soy protein protects against developing neuropathic pain, vitamin E decrease neuropathic pain, and time-released vitamin C is helpful in protecting against neuropathic pain. High levels of sorbitol, a slowly metabolizing sugar alcohol from excess glucose that can damage eye and nerve tissues, are common with obesity. Its use in low cal, sugar free processed food products can cause diarrhea and other irritable bowel syndrome problems.

Someone asked if he had a **solution for pain med-induced constipation**, a frustrating problem for many PNers. Dr. Teicheira quickly said yes and wrote the following recipe on the board: **Combine 1 cup of flax flour, 1 cup of Metamucil laxative mix, and ¼ cup of triphala powder. Use two tablespoons of this mixture in 8 ounces of water and drink it at night through a straw.**

[Triphala is a commonly used ayurvedic herbal formula of three fruit substances providing nutritional support and detoxifying blood and liver cleansing actions. It is also commonly used for maintaining normal blood sugar levels. It is generally available at most Indian food import or health food stores. For more information about triphala, go to <http://www.planteherbs.com/articles/triphala.html>.]

Dr. Teicheira was extremely generous in sharing his time and expertise with us as he makes presentations at several of the NCCNA support groups around the area. His gentle, playful spirit, in the midst of his deep sensitivity to our frustrations with neuropathy pain and distress, was a most welcome and encouraging experience. One section of his brochure captures his wonderfully caring approach to our problems and needs –

Please Understand ... Chronic pain, especially when it involves many areas of the body, requires patience and a commitment to change. Health is a balancing act between the inevitable wear and tear that we experience, and the healing that we are capable of. The healing process requires the same commitment as if you are responsible for a priceless and irreplaceable machine ... which, of course, you are.

Thanks so much, Dr. Teicheira for being available to us in our groups, your office and the Sacramento Pain Clinic for giving us better health choices for neuropathic and other chronic pain problems.

GETTING TO OUR YOLO NEUROPATHY MEETINGS

We know from past phone and group conversations, as well as the April survey of Davis members and friends, that some of us no longer drive or can only drive short distances because of sensory loss in our feet or diminished eye sight. These limitations need not preclude attendance for those of us who are otherwise still up and about. However limited the transit systems are in our Yolo communities, their services are expanding via more vehicles and more fixed route and Para transit services that can help some of us get to our meetings. Here are some contact numbers for info on schedules and costs. Give them a call to see about arranging for rides to get to our meetings and other activities that will enhance your well being and save on gas costs!

Yolo Bus & Yolo Bus Special (Paratransit) 1-800-371-2877 or 666-2877. From downtown Sacramento and between Yolo communities, call for schedule info. **Congratulations to the YCTD for getting special grants to expand its large, fixed route bus and Paratransit vehicle inventory allowing the creation of more routes to provide more services for us all, and particularly the seniors and disabled among us!**

Community Care Car (Woodland only) 530-662-7800

Davis Community Transit (Davis only) 530-757-4408

Davis Unitrans (Davis only) 530-752-2877 (free for seniors)

West Sacramento Senior Center Transportation (West Sacramento only) 916-371-5819

YoloBus Paratransit, Woodland Community Care Car and Davis Community Transit all provide low-cost door to door service. You will need to arrange to be on their service lists and will need to call one to five days ahead to arrange for service. The Woodland Senior Center is readily available via the YoloBus 42A-B on East Street, and is located south of the County Fair Mall. The Davis PE/IRH site is several blocks north of the Kaiser Permanente facility at Cowell Blvd. and Drew Avenue in south Davis and is accessible via the **W Line of Unitrans** with a several block walk to 1460 Drew, a very frequent destination for YoloBus para transit riders.

For the new **West Sacramento Senior Center** location at 664 Cummins Way, you can catch the YoloBus 40 bus from downtown Sacramento at L and 7th Streets about 1:20 pm with a brief stop at the Transit Center at Merkley and West Capitol for a quick ride at 1:40 pm to the Center, arriving well in time for the 2 pm meeting. For those 62 and over, you can call the Center at 916-373-5819) before 1 pm the day before to reserve a \$2.50 lunch and a van pickup for the Center lunch. For those who still drive, the Senior Center site at Cummins and Reuter is readily available by driving north on Reuter off Sacramento Avenue or driving north on Kegle (extension of Jefferson), turning right onto Cummins, preceding east on Cummins to the Center site. **This will be our ongoing meeting home while the Turner Library is demolished and the replacement multi-use facility is built over the next two years.**

Some People and Things that Might Help with Your Neuropathy

Chiropractors. Remembering that our major nerves come off our spines, connecting to our internal organs, skin and muscles, we need to be reminded that one of the medical disciplines that may know most about treating our spines is chiropractors. That's very much been brought home to me in the last month with my improving condition thanks to "**Dr. Bob**" Harrison, DC at East Yolo Chiropractic Center, Inc, 2939 West Capitol Avenue in West Sacramento, 916-371-7882. He provides very generous discounted services for seniors for chiropractic care. Dr. Bob has begun a new allergy diagnostic and treatment service and has offered to treat two of our Yolo group related members with the new procedures at no cost. If botanical and food allergies are a concern for you, or if your neuropathy may be based on medications, industrial, agricultural or heavy metal toxins, you may want to talk to Dr. Bob about his offer.

Another West Sac member recommends **Charyl Silva, DC** (1044 Jefferson Blvd, 916-372-8383 in West Sac). A new provider at the Institute for Restorative Health is **Kyle Prusso, DC**, who is proficient in musculoskeletal chiropractic, biomechanics and pain management; he can be reached at 1460 Drew Avenue, Suite 300 in Davis and 530-758-4474.

We'd like to know of other alternative medicine practitioners (and medical doctors) who have been helpful for you in dealing with your neuropathy.

The Davis Senior Center Health and Wellness Expo begins at 8:30 on Wednesday, May 28 with a wide range of activities. The cost is \$5 and advanced registration is required. Call the center at 530-757-5690. Last year's event was a terrific experience with lots of great information.

You need not be alone with your neuropathy.

The Neuropathy Hotline is here to help.

Call Martha at 916-371-1125

or Donna at 530-661-3705

**The Yolo Neuropathy Groups
are here to help.**

Come join with us soon.

YOLO NEUROPATHY GROUPS
C/O MARTHA CHANDLEY
1399 Sacramento Avenue, Unit 108
West Sacramento, CA 95605

TO: