



WESTERN NEUROPATHY ASSOCIATION

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A newsletter for members of Western Neuropathy Association (WNA)

■ COMPARING FOUR MEDICINES TO TREAT PAIN FOR CRYPTOGENIC SENSORY POLYNEUROPATHY (CSPN)

Cryptogenic sensory polyneuropathy, or CSPN, is a health problem that causes pain, numbness, and tingling. Pain is one of the worst symptoms of CSPN. Doctors can prescribe different medicines to treat CSPN pain, but few studies have compared how well these medicines work.

This adaptive randomized comparative effectiveness study (NCT02260388 completed in March 2019) compared the medication utility of four medications for treating CSPN pain: nortriptyline, duloxetine, pregabalin, and mexiletine. Researchers defined medication utility as a combination of efficacy in reducing pain by 50% from baseline and quit rate, which was the percentage of patients who stopped taking the medication for any reason. The study included 402 patients with CSPN receiving care at one of 40 clinics. Of these, 85% were white, 7% were black, 4% were Asian, and 4% were from other or unknown races; 6% were Hispanic. The average age was 60, and 53% were male. All patients had a baseline pain score of at least 4 on a scale of 0 to 10 and had not taken any of the study medications for at least seven days before the baseline visit.

Researchers randomly assigned patients to take one of the four medications. Every three months, researchers analyzed medication performance and then used adaptive randomization so that more new enrollees received better performing medications. Patients completed surveys at baseline and 4, 8, and 12 weeks later.

Patients with CSPN, caregivers of patients with CSPN, and members of The Foundation for Peripheral Neuropathy helped design and implement the study.

Results

The medications with the highest utility scores were nortriptyline (utility = 0.81) and duloxetine (utility = 0.80), followed by pregabalin (utility = 0.69) and mexiletine (utility = 0.58). Possible utility scores range from 0–1.75, with higher scores indicating higher efficacy and lower quit rates.

- For patients taking nortriptyline, 25% reported efficacy, 38% quit taking the medication, and 56% reported side effects.
- For patients taking duloxetine, 23% reported efficacy, 37% quit taking the medication, and 47% reported side effects.
- For patients taking pregabalin, 15% reported efficacy, 43% quit taking the medication, and 40% reported side effects.
- For patients taking mexiletine, 20% reported efficacy, 58% quit taking the medication, and 39% reported side effects.

For patients who did not quit medication, mexiletine had the greatest reductions in scores for fatigue and pain interference with life. All four medications improved patients' physical and mental health but didn't change pain interference with sleep.

Limitations

Quit rates included patients who dropped out for any reason, including medication cost or lack of insurance coverage. Because pregabalin cost significantly more than the other medications, more patients stopped taking it for those reasons. Medications might have reduced pain without meeting the study's defined pain reduction threshold of 50%.

Conclusions

In this study, nortriptyline and duloxetine performed better than pregabalin and mexiletine. All four medications reduced pain for some patients.

REFERENCE

Barohn RJ, Gajewski B, Pasnoor M, et al. (2020). Comparing Four Medicines To Treat Pain For Cryptogenic Sensory Polyneuropathy (CSPN)—The PAIN-CONTROLS Study. *Patient-Centered Outcomes Research Institute (PCORI)*. <https://doi.org/10.25302/05.2020.CER.130602496>

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PERIPHERAL NEUROPATHY SUPPORT GROUPS

VIRTUAL AND IN-PERSON FOR DECEMBER 2024

*Encourage, inform, share, support, and hope.
Join a meeting to help others, learn something new, and/or share experiences.
In-person or virtual – connect to others with peripheral neuropathy.*

	<p>Strategies for Singles with Neuropathy Support Group (1st Wednesday of the odd months) Next meeting January 1st (confirm with Erika) Host – Erika McDannell, contact Erika for Zoom link</p> <p>4th Saturday Peripheral Neuropathy Open Discussion Cancelled for December 28, 2024</p>
<p>In-Person</p> <p>2 Monday</p>	<p>Auburn CA Peripheral Neuropathy Support Group Monday, 12 noon - 1:30pm Pacific Beecher Room at the Auburn Library, 350 Nevada St., Auburn, CA Host – Pam Hart, pamula1@hotmail.com, and Cass Capel, capelkbphd@gmail.com</p>
<p>In-Person</p> <p>7 Saturday</p>	<p>Houston TX Peripheral Neuropathy Support Group Saturday, 1pm – 2:30pm Central Memorial Drive United Methodist Church, 12955 Memorial Drive Room DS100, enter at back (south) of building, follow signs Hosts – Katherine Stenzel and John Phillips</p>
<p>Virtual</p> <p>11 Wednesday</p>	<p>2nd Wednesday Chemo-Induced Peripheral Neuropathy (CIPN) Support Group Wednesday, 2pm - 3pm Pacific / 4pm - 5pm Central / 5pm - 6pm Eastern Meeting ID: 830 5538 3243, Passcode: 396320 Host - Glenn Ribotsky, contact Katherine for Zoom link</p>
<p>Virtual</p> <p>14 Saturday</p>	<p>2nd Saturday Peripheral Neuropathy Support Group Saturday, 11am - 1pm Pacific / 1pm - 3pm Central / 2pm - 4pm Eastern Meeting ID: 856 7106 1474, Passcode: 114963 Host - Katherine Stenzel, contact Katherine for Zoom link</p>
<p>Virtual</p> <p>18 Wednesday</p>	<p>3rd Wednesday Peripheral Neuropathy Support Group Wednesday, 10am - Noon Pacific / Noon - 2pm Central / 1pm - 3pm Eastern Meeting ID: 833 4473 0364 / Passcode: 341654 Host - Glenn Ribotsky, contact Katherine for Zoom link</p>
<p>Virtual</p> <p>18 Wednesday</p>	<p>3rd Wednesday CIDP and Autoimmune Support Group Wednesday, 3pm - 4pm Pacific / 5pm - 6pm Central / 6pm - 7pm Eastern Host - John Phillips, contact John for Zoom link</p>

VIRTUAL SUPPORT GROUP CONTACTS

Katherine Stenzel	klstenzel@hotmail.com	Erika McDannell	ejmcdannell@pnhelp.org
Glenn Ribotsky	glenntaj@gmail.com	Shana Phelps	shanaphelps@pnhelp.org
John Phillips	johnphillips@pnhelp.org		

Support Group information can also be found on www.pnhelp.org under the Support Group tab.

FROM THE PRESIDENT Pam Hart, WNA President

'Tis the season for gratitude and giving. I like to think of gratitude as an on-going state, but sometimes we need to stop and realize all that we cherish. I have gratitude for WNA and its Board of Directors. We are scattered all over the country – literally from New York to California! We have never met in person, but are able to come together monthly to do business and plan for ways to reach more people and to bring relevant content to all peripheral neuropathy sufferers, no matter what the cause.

I want to especially thank Shana Phelps who took a break, but is back with us and full of ideas. She is such a great resource and I am sure many have benefited from her quips during the Support Group meetings. She is also a reminder that peripheral neuropathy (PN) can affect people of all ages. I am grateful that Shana can share some of her energy with us.

Our newest Board member is Samantha Fields. Some of you may know her from the Support Group meetings also. She has already developed some SMART goals for us. I am so grateful when new Board members jump right in. Her enthusiasm and experience is a welcome injection.

Of course, we cannot forget the other Board members who make this all happen. **Katherine Stenzel edits our newsletter each month.** Did I say edit – I mean researches, vets, composes and creates the newsletter. I am very grateful for such a talented, thoughtful “editor”.

Glenn Ribotsky is our medical guru. His connections, research and experience have proven invaluable. He has been able to help people find information in much the same way Past President Bev Anderson did. I am truly grateful for his knowledge and his willingness to share.

John Phillips is one Director who walks the talk. His journey with neuropathy is certainly one that has inspired many. His unrelenting search for ‘causes and cures’ has been a template for others. I am very grateful for his willingness to start additional, more specific, support groups.

Erika McDannell is another relatively new Board member. She saw that we needed help with Social Media, marketing and a way to reach out to underserved groups. We now have WNA merchandise available for purchase because of her. We also have a WNA Singles Support Group to address the issues of living alone with PN. I am grateful that Erika saw a need and jumped right in.

I certainly cannot forget Darrell O’Sullivan. Darrell has been on the Board for almost as long as I have. He is the one who found the research that Dr. Hammock at U.C. Davis is doing for pain relief. He made a personal connection with Dr. Hammock and continues to follow the progress of EicOsis. I am grateful for his steadfast contributions to WNA.

I am ever so thankful for Thrifty Bargain. This is the thrift store that donates to WNA each month. Brian and Ted Mock, as PN sufferers themselves, have provided a great stimulus to WNA. When they advertise, WNA is always boldly featured.

I am most grateful for all WNA members. Your membership helps to support our mission. We rely on you to attend Support Group meetings, read the Newsletter and to reach out to others. Word-of-mouth support is the best form of advertising. Just mentioning WNA to friends, family, doctors, nurses and therapists is the most effective way to introduce people to our helpful content.

Now for the giving part. Please remember WNA on Giving Tuesday (December 3rd). Please remember **Western Neuropathy Association (WNA)** as part of your year-end giving. Please remember WNA in your final bequests.

Blessings and Gratitude for a Peaceful Holiday Season,

Pam

pamula1@hotmail.com

**GIVING
TUESDAY**

DECEMBER 3, 2024

HEALTH CARE CHALLENGES WEBSITES (updated)

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■ DIFFERENCES BETWEEN NEURALGIA, RADICULOPATHY AND NEUROPATHY

Neuropathy; New York-Presbyterian (nyp.org); retrieved August 28, 2024

Neuropathy, often called peripheral neuropathy, is not one condition but a group of conditions that result from damage to nerves in the peripheral nervous system. The peripheral nervous system is made up of nerve structures beyond the brain and spinal cord that communicate with the rest of the body. These nerves are responsible for sending out sensory information to your skin and muscles (the somatic nervous system) and involuntary functioning organs such as the heart and stomach (the autonomic nervous system).

Neuralgia vs. neuropathy

Some people use the terms neuropathy and neuralgia interchangeably, but they are different: Neuropathy refers to nerve damage while neuralgia is a type of nerve pain. Neuralgia can be a symptom of neuropathy.

Often described as a severe shooting, burning, or stabbing pain, neuralgia can result from damage, irritation, or dysfunction of a nerve. Possible causes include infection, pressure (from a blood vessel, tumor, ligament, or bone), some medications, injury, and certain conditions such as diabetes, multiple sclerosis, and chronic kidney disease.

Types of neuralgia include:

- **Trigeminal neuralgia:** This refers to pain from the trigeminal nerve, often caused by pressure from a blood vessel. This type of neuralgia usually occurs on one side of the face and is characterized by recurrent episodes or “attacks” of severe pain. Trigeminal neuralgia mostly affects people over 50 years old.
- **Postherpetic neuralgia:** Postherpetic neuralgia is caused by shingles — a viral infection involving rash and blisters. This type of neuralgia is usually concentrated on one side of the body and can range from mild to severe.
- **Glossopharyngeal neuralgia:** This rare type of neuralgia occurs in the glossopharyngeal nerve (in the throat) and causes pain in the neck area.

Radiculopathy vs. neuropathy

When a nerve root in the spinal cord becomes pinched, it is referred to as radiculopathy. This affects the spinal vertebrae, tendons, and intervertebral discs. Radiculopathy is often mistaken for neuropathy because both conditions cause similar symptoms, such as pain, weakness, numbness, and tingling.

The difference between radiculopathy and neuropathy is that radiculopathy is caused by a pinched nerve in the spinal cord, while neuropathy is caused by nerve damage to the peripheral nervous system.

Radiculopathy can be caused by a herniated disc, thickening of the spinal ligaments, spinal infection, benign growths on the spine, and bone spurs in the spine. It is important to see your doctor to determine which condition you’re experiencing in order to receive the correct diagnosis and treatment.

■ EXERCISE AND NEUROPATHIC PAIN

Leitzelar BN, Koltyn KF. (2021). Exercise And Neuropathic Pain: A General Overview Of Preclinical And Clinical Research. *Sports Medicine- Open*, 7(1):21. doi: 10.1186/s40798-021-00307-9.

This paper reviewed previously evaluated exercise programs containing various types of cardio and resistance training schedules. The following exercise programs were effective in reducing neuropathic pain.

- Preclinical evidence demonstrating **treadmill running** protocols consisting of 30–60 min of exercise performed 3–5 days/week for 1–15 weeks were effective in reducing neuropathic nociception.
- **Swimming** protocols were also effective and consisted of 30–60 min/day of swimming performed 5–7 days/week for 4–10 weeks.
- Clinical evidence demonstrated 10–12 weeks of **moderate-intensity combination training** (i.e., aerobic and resistance exercise) or 15 weeks of HIIT reduced sensory (i.e., pain intensity, pain characteristics) or affective (i.e., how troublesome the pain is) components of neuropathic pain.
- One program consisting of 16 weeks of **moderate-intensity aerobic exercise** led to reductions in pain interference but not pain intensity.

Future studies should include consistent patient-reporting and clinical outcomes as well as the potential mechanisms. Systematic investigations into the mode, intensity, frequency, and duration of exercise that reduce neuropathic pain are needed. As a result, the literature can move towards a consensus and practitioners may begin to provide specific exercise recommendations for patients experiencing neuropathic pain.

■ 10 FUN ACTIVITIES FOR GRANDPARENTS WITH LIMITED MOBILITY

GrowingBolder.com; November 30, 2021

While a grandparent's love never grows old, aging can make it harder for grandparents with limited mobility to enjoy all the activities they once did.

It may be harder to get up and down, lift a child, or engage in outdoor sports. But there's no need to let mobility issues limit the fun. Here are some time-tested favorite activities.

Indoor activities for grandparents with limited mobility

- **Reading.** Pre-schoolers enjoy being read to, while older children may prefer to be the reader, especially when there is an appreciative audience. Who else has the patience and time to delight in listening to "Where the Wild Thing Are" for the umpteenth time? One grandmother bought a duplicate book of bedtime stories. Then she called up her grandchildren at their bedtime and read them to sleep.
- **Coloring.** Coloring books are available for every age and variety of interests – even for adults. There are lots of variations for coloring, including a blank piece of paper that allows the grandparent and grandchild to take turns adding a random design and then telling a story about what it represents.
- **Photo albums.** Looking through a photo album together provides a magical opportunity when life seems to slow down for a few precious moments. Photos can provoke memories and anecdotes that often trigger intimate conversations. And no one else can share as much family history as grandparents. Grandchildren especially love to hear stories about when they were younger or their parents were children.
- **Video games.** Technology can be your best friend. An increasing number of grandparents have turned to gaming as a way to connect with their children and grandchildren.
- **Board games.** When our son was 14, he spent a week with his grandparents. They played Sorry, Clue and other board games. When he came home, he announced that he now knew what he wanted to do when he grew up. "I'm going to retire," he said. Checkers, chess, Monopoly and other board games never grow old. And sometimes, grandparents are the ones who have the most time to play these activities.
- **Surprise box.** Children love surprises. All it takes is some imagination. My grandmother kept magazines with paper dolls for me to cut out. Your surprise box might include crafts; a special snack; a party supply magnifying glass; an inexpensive toy or puzzle; or photo props, such as fake mustaches or a feather boa.

Outdoor activities for grandparents with limited mobility

Grandparents who are confined to a wheelchair, or using a cane or walker, may be reluctant to try outdoor activities, especially with toddlers. There are still ways you can enjoy the great outdoors. Here are a few suggestions.

- **Treasure hunt.** Hide some clues outside or get someone to help you. Then invite your grandchildren to go on a backyard treasure hunt.
- **Gardening.** Grandchildren can be great helpers outdoors. They can water plants or help garden with a child-size rake or hoe.
- **Nature art.** Give your grandchildren a list of natural objects that can be found in your yard. When they bring them indoors, have some construction paper and paste so they can make nature art.
- **Join in.** Grandparents with limited mobility may not be able to take part in rowdy games. But there are some games that are perfect. Grandma or grandad can be "it" in a game of Red Light, Green Light.

Just because your mobility may become limited doesn't mean your role is any less important. So, fire up your creativity. No one can replace grandparents when it comes to unconditional love, patience, and snickerdoodles!

WHAT IS COZY CARDIO? THE RELAXING WORKOUT TREND, EXPLAINED

Lauren Bedosky and Sanjai Sinha, MD; *GoodRX.com*; June 26, 2024

If you've scrolled social media lately, you may have seen people raving about cozy cardio. But what exactly is it?

The cozy cardio workout became popular on TikTok and Instagram after content creator Hope Zuckerbrow coined the term in 2022. The fitness trend involves doing low-intensity, low-impact cardio. For example, you might hop on a portable treadmill and go for a walk while watching your favorite show. Sounds convenient, right? But is it effective? Learn more about cozy cardio, including its benefits and how to add it to your routine.

Cozy cardio is any low-intensity, low-impact aerobic workout that you can do in a relaxed, comforting environment (often at home). "It could be as simple as walking on a treadmill at a moderate pace while watching TV or reading a book," said Alayna Curry, a women's fitness specialist and instructor certified by the National Academy of Sports Medicine. Walking is a popular option for cozy cardio. But gentle indoor cycling, a simple yoga flow, or a slow-paced dance routine could also work. The key is to pick something you enjoy and keep the intensity low.

Benefit – Cozy Cardio is accessible

Intense aerobic activities, like running, help strengthen your joints, bones, and heart. Yet, many people may need or prefer less-strenuous, low-impact exercise. This includes beginners and people with joint pain (Editor – and nerve pain.) Cozy cardio workouts can help you stay active without overworking your joints, bones, and muscles. Swimming and cycling, for example, are often accessible for people with achy joints. These low-impact activities even improved arthritis symptoms in a group of adults in one study.

So, cozy cardio may be a better option if you experience pain while doing traditional cardio. And there's a low barrier to entry because you can do cozy cardio from the comfort of your home. That's good news if a gym membership isn't in your budget or if you have anxiety about exercising in public.

Benefit - Cozy cardio may help you commit to a fitness routine

If you don't love working up a sweat with vigorous workouts, it can be hard to stick with an exercise routine. "It's important to find a form of exercise that you enjoy, if you want to stay consistent," said Curry. For many people, cozy cardio may be less intimidating than other workouts. You can choose activities you enjoy and do as little or as much exercise as you want.

Personalizing your cozy cardio sessions can make it easier to stick to a fitness routine. Choosing your workout intensity may increase how much you enjoy exercise — and how well you stick with it. Plus, you get to create your ideal environment. For example, you might dim the lights and listen to an audiobook while cycling on a stationary bike. Fun distractions can make exercise feel easier, allowing you to work out longer or more often.

Benefit - Cozy cardio can help you return to exercise after a break

Jumping into a workout routine after a break can be intimidating, especially if you start with vigorous exercises. The gentle nature of cozy cardio can help you to ease back into exercise. You can increase the intensity as you build strength and fitness. That makes it a good option for people recovering from injuries or surgery.

"In my work with post-operative patients and those with chronic joint issues, incorporating gentle, rhythmic activities has supported recovery and maintained fitness levels," said Robert McLaughlin II, MD, a board-certified orthopedic surgeon with Boston Concierge Orthopedics in Massachusetts.

Benefit - Cozy cardio takes a holistic approach to exercise

Not every workout has to be intense. And you don't need to push through a vigorous cardio session to benefit from exercise. "Cozy cardio also takes the focus of exercise off of metrics, like calories burned, heart rate, and rate of exertion," said Curry, "and instead celebrates the simplicity of moving your body to improve your overall well-being." Low-intensity cardio can still improve your heart health and fitness. A review found that low-intensity exercise improved physical and cognitive function in older adults.

Cozy cardio puts more focus on the mental health benefits of exercise. "The relaxed nature of cozy cardio makes it meditative and calming," McLaughlin said, "providing a mental break and physical activity." And that makes it a great way to relieve stress.

Cozy cardio duration

Ultimately, how long and how often you do cozy cardio is up to you. Because it's low-impact and low-intensity, you can probably do it more often than traditional cardio.

The key is to get 150 minutes of moderate-intensity aerobic activity per week. Cozy cardio may or may not be intense enough

– Continued on page 7

■ WELCOME TO SAMANTHA FIELDS, NEW DIRECTOR ON THE EXECUTIVE BOARD!

Samantha Fields brings a strong background in advocacy and community engagement to WNA. With years of experience in the health and disability sectors, she is eager to help shape the organization's mission to support people with peripheral neuropathy. Samantha hopes to strengthen connections between WNA and key community resources, increasing accessibility and inclusivity for all members.

■ GIN-SOAKED RAISINS OFFER RELIEF FOR ARTHRITIC PAIN

Joe Graedon, *PeoplesPharmacy.com*, September 16, 2024

(Editor – I first read about gin and raisins in the WNA Complementary and Alternative Treatments for Neuropathy document found on our website under NEUROPATHY >Treatment. This eight-page collection of support group member recommended treatments, dated May 2015, is an interesting read of somewhat traditional treatments along with some uncommon remedies. And is probably due for an update!)

Many people daily take nine raisins that have been drenched in gin as a nondrug approach to get relief for arthritic pain. *(Editor - From the WNA document - This is a recipe that has been touted for a variety of ailments. Some people have found it helpful.)*

Millions of people have stiff, sore joints. Some rely on NSAIDs such as ibuprofen (Advil, MotrinIB) or naproxen (Aleve) to get relief for arthritic pain. However, while these medications can be helpful, they do have downsides. These are most likely to show up with long-term use. That's why many people are interested in trying home remedies such as gin-soaked raisins.

How Do You Use Gin-Soaked Raisins to Get Relief for Arthritic Pain?

Peoples Pharmacy has been writing about this home remedy for over 30 years. As with many home remedies, there are no published studies or precise instructions. Gin is an alcoholic beverage flavored with juniper berries and occasionally other herbs. Some people report relief for arthritic pain after about four to six weeks of eating nine gin-soaked raisins daily.

The raisins (use golden raisins) are allowed to soak until the gin evaporates (about a week). Many people store them in the refrigerator, but that is not necessary. The gin keeps them from going bad.

Do Raisins Interact with Prescription Medicines?

Most people never consider that a home remedy or dietary supplement might interact with a prescription medicine. That is why this question is important. We wish more people would inquire about such interactions.

We doubt there is an interaction between medications and the gin-soaked raisins. As long as you stick to the recommended dose of nine raisins a day, you are getting about one drop of alcohol. On the other hand, there has been no research on the potential for interactions, so you may have to be vigilant on how your body is responding.

Not for Everyone

Gin-soaked raisins don't work for everyone. The golden raisins used contain sulfites, so they are not appropriate for those who are sensitive to those compounds. It is also not a good remedy for alcoholics or recovering alcoholics. And the raisins must absolutely never be given to the family dog. Raisins are toxic to dogs!

WHAT IS COZY CARDIO? THE RELAXING WORKOUT TREND, EXPLAINED - Continued from page 6

to be moderate. Moderate intensity means you reach 60% to 70% of your maximum heart rate. Still, it can help you meet this recommendation. You can also use cozy cardio sessions to recover from strenuous aerobic or strength-training workouts.

Cozy cardio equipment

You might prefer to do cozy cardio in the comfort of home. If that's the case, you may need a treadmill, walking pad, indoor bike, or other cardio machine. You can also do cozy cardio without equipment. Turn on an online dance or yoga class or create your own moves. Curry suggested wearing comfortable, lightweight clothes. You can even wear pajamas. The key is to avoid tight clothes.

Play relaxing music and light some candles. While doing cozy cardio, you should almost forget that you're exercising.



WESTERN NEUROPATHY ASSOCIATION

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GIVING TUESDAY
REMEMBER WNA ON DECEMBER 3, 2024

Happy Holidays
from all of us at WNA

IN THIS ISSUE

Dear Readers,

With this December issue, there is finally some 'light' reading to enjoy.

For those of you that attend the virtual support groups, you know that I am a big proponent of exercise. And by that I mean activity that raises your heart rate. Any type of exercise is good as long as you get your blood flowing. So you may ask yourself why I'm including an article on **Page 6** titled '**Cozy Cardio**'. If the title sounds like drinking hot tea while reading a good book, then you are correct. Throw in some easy walking, light yoga or stretching, and you have Cozy Cardio. While Cozy Cardio will probably not raise your heart rate, it could be a light alternative to other heavier activity. It could also be an easy way to ease into an exercise program by setting aside this time regularly for Cozy Cardio and then raising the activity level later.

Gin Soaked Raisins? A unique treatment for sure! But some people with neuropathy find relief with this combination. I remember Bev Anderson (WNA founder) saying that one time this treatment was not included in a version of the Alternative and Complementary Treatments list and there were a lot of upset members! It's included now. **Check out Page 7 for the details.**

May these give you Hope.

..Katherine

klstenzel@hotmail.com



Western Neuropathy Association (WNA)

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tax-exempt corporation.

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www.WNAinfo.org

WNA Headquarters: admin@WNAinfo.org

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

All contributions and dues are tax-deductible.

Tax ID # 68-0476041

We are supported by dues-paying members, contributions by members and friends, and occasionally, small grants and fundraisers.

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