



WESTERN NEUROPATHY ASSOCIATION

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Issue 11

Volume 23

Note From The Editor

Peripheral Neuropathy Support Groups – December 2025 Schedule

From The President

Changes To The Board Of Directors

Medical Interventions And Medication Management

Keep On Pushing And Pulling - There Are Neuropathy Miracles

Understanding Pain And The Personal Journey

How To Work 'Exercise Snacks' Into Your Day

Managing Nerve Pain Over The Holidays

Coping With Chronic Pain During The Holidays

In This Issue



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CELEBRATING OUR 27<sup>TH</sup> YEAR!

# Neuropathy Hope

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

A newsletter for members of Western Neuropathy Association (WNA)

## NOTE FROM THE EDITOR

Dear Members,

When I started editing the newsletter in August 2021, it was in the middle of the Pandemic. I had lots of time that needed to be filled, and editing Neuropathy Hope certainly did that! But now my time is increasing filled with traveling – month plus long cruises and next year temporarily playing house in another country. And it's become harder to research and find quality articles month after month to offer hope to the membership. After 4+ years, it's time for changes to our publications and member benefits.

**Neuropathy Hope** will transition from a monthly to a quarterly newsletter. Starting in January 2026, the January/February issue will be Jan/Feb/March but still delivered in the last week of December. Subsequent quarterly issues will be on a similar schedule. Length will remain at eight pages (or actually 7 1/4) with the Support Group listings on Page 2 removed allowing for an additional page of content. Neuropathy Hope will continue to be **delivered via email and US Mail** and is a **membership benefit**.

A new publication titled **Neuropathy Notes** will be introduced as a monthly eNews issue **delivered by email only**. Its focus will be the monthly support group schedule plus highlights of support group discussions which were previously published in the newsletter as Support Group Tidbits. It may also publicize registrations for live webinars and announce when their recordings are added to the WNA YouTube channel. This publication will be delivered to members and expanded to non-members to encourage support group attendance and participation.

A new series of **Member-Only Workshops** will be launched in February 2026. These monthly workshops will be different from Webinars – while webinars can inform and educate on a given topic, workshops take it a step further to help attendees actually take action. It could mean filling out a worksheet during the event, discussing next steps in smaller breakout groups, or just continuing the learning process after the workshop event. Four of these workshops will be an in-depth review of the quarterly Neuropathy Hope issue, with the first of those scheduled for February 11, 2026 (no workshops in January or December). Through all the Workshops, WNA will provide additional information on neuropathy to you - the members - to add to your understanding and knowledge of this terrible disease.

Thank you so much for your kind words over the last four years. They keep me going and let me know that I am **providing you hope**.

Warm hugs,  
...Katherine

### WNA Members Benefits For 2026

Neuropathy Hope newsletter	Neuropathy Notes	Member-Only Workshops
Transition to Quarterly Issues	New monthly eNews	Monthly educational workshops
<ul style="list-style-type: none"> <li>Jan/Feb/March</li> <li>April/May/June</li> <li>July/Aug/Sept</li> <li>Oct/Nov/Dec</li> </ul>	Focused on Support Groups <ul style="list-style-type: none"> <li>Monthly Group Schedule</li> <li>Tidbits</li> </ul> <i>(Support Group schedule always on website on Home Page and Support Group tab)</i>	<ul style="list-style-type: none"> <li>2nd Wednesday of the month (None in Jan or Dec)</li> <li>One hour duration in the early afternoon (time TBD)</li> </ul>
<ul style="list-style-type: none"> <li>Continue paper and email digital delivery</li> <li>Members Only</li> </ul>	<ul style="list-style-type: none"> <li>Email delivery only</li> <li>Members and non-members</li> </ul>	<ul style="list-style-type: none"> <li>Zoom Meetings Only</li> <li>Members Only</li> </ul>

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EDITOR

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## PERIPHERAL NEUROPATHY SUPPORT GROUPS – DECEMBER 2025 SCHEDULE

*Environments of education, empowerment, support and caring for people with neuropathy.  
Attend a group, share your experiences and connect with others.*

**Strategies for Singles with Neuropathy Support Group**

1st Wednesday of the odd months

**Next Meeting January 7, 2026**

Host – Erika McDannell, contact Erika for Zoom link

**4th Wednesday Autonomic Dysfunction Support Group**

*Cancelled for December 24, 2025*

**Next Meeting January 28, 2026**

Hosts – Dan Kahn and Erika McDannell, contact Erika for Zoom link

<b>In-Person</b>  <b>1</b> <b>Monday</b>	<b>Auburn CA Peripheral Neuropathy Support Group</b> 1st Monday of the month (no meetings July, August, September) <b>12 noon - 1:30pm Pacific</b> Unity of Auburn, 1212 High Street, Auburn, CA Hosts – Pam Hart, <a href="mailto:pamhart@pnhelp.org">pamhart@pnhelp.org</a> , and Cass Capel, <a href="mailto:capelk-bphd@gmail.com">capelk-bphd@gmail.com</a>
<b>In-Person</b>  <b>6</b> <b>Saturday</b>	<b>Houston TX Peripheral Neuropathy Support Group</b> 1st Saturday of the last month in each quarter <b>1pm - 2:30pm Central</b> Memorial Drive United Methodist Church, 12955 Memorial Drive, Houston, TX Hosts – Katherine Stenzel, John Phillips and Brian Lockard Contact Katherine for additional information
<b>Virtual</b>  <b>9</b> <b>Tuesday</b>	<b>2nd Tuesday Peripheral Neuropathy Support Group</b> <b>2pm Pacific / 3pm Mountain / 4pm Central / 5pm Eastern (90 minutes long)</b> Meeting ID: 953 2710 6263 / Passcode: 613899 Hosts – Jeff Creech and Erika McDannell, contact Erika for Zoom link <i>(everyone welcome, Colorado focus on healthcare providers)</i>
<b>Virtual</b>  <b>10</b> <b>Wednesday</b>	<b>2nd Wednesday Chemo-Induced Peripheral Neuropathy (CIPN) Support Group</b> <b>2pm Pacific / 3pm Mountain / 4pm Central / 5pm Eastern (90 minutes long)</b> Meeting ID: 830 5538 3243 / Passcode: 396320 Host - Glenn Ribotsky, contact Katherine for Zoom link
<b>Virtual</b>  <b>13</b> <b>Saturday</b>	<b>2nd Saturday Peripheral Neuropathy Support Group</b> <b>11am Pacific / noon Mountain / 1pm Central / 2pm Eastern (2 hours long)</b> Meeting ID: 857 8287 7624 / Passcode: 369333 Host - Katherine Stenzel, contact Katherine for Zoom link
<b>Virtual</b>  <b>17</b> <b>Wednesday</b>	<b>3rd Wednesday Peripheral Neuropathy Support Group</b> <b>10am Pacific / 11am Mountain / Noon Central / 1pm Eastern (2 hours long)</b> Meeting ID: 833 4473 0364 / Passcode: 341654 Host - Glenn Ribotsky, contact Katherine for Zoom link
<b>Virtual</b>  <b>17</b> <b>Wednesday</b>	<b>3rd Wednesday CIDP and Autoimmune Support Group</b> <b>3pm Pacific / 4pm Mountain / 5pm Central / 6pm Eastern (2 hours long)</b> Meeting ID: 943 1735 2429 / Passcode: 579413 Host - John Phillips, contact John for Zoom link
<b>Virtual</b>  <b>27</b> <b>Saturday</b>	<b>4th Saturday Peripheral Neuropathy Open Discussion</b> <b>11am Pacific / noon Mountain / 1pm Central / 2pm Eastern (2 hours long)</b> Meeting ID: 851 7949 9276 / Passcode: 159827 Host - John Phillips, contact Katherine for Zoom link

Contact emails in the sidebar Board of Directors listing.

Support Group information can also be found on [www.pnhelp.org](http://www.pnhelp.org) under the Support Group tab.

## FROM THE PRESIDENT Glenn Ribotsky, WNA President

### Ch-Ch-Changes

Unlike David Bowie, I'm not going to ask any of you to turn and face the strange--though enough of us in our neuropathy journeys have certainly had to do that anyway--but I am going to talk about a number of changes that you will see coming to this space and other WNA spaces in 2026.

First, this very newsletter, Neuropathy Hope, will be transitioning from a monthly to a quarterly. This is primarily to refocus it as source material for articles highlighting the current state of research into neuropathy causes and treatments and to provide more opportunities for WNA members and others to share some first person experiences. (It's also a chance to give Editor-In-Chief Katherine Stenzel to not have to meet insane deadlines every 30 days as she's been doing for so many years.)

But this does not mean you won't be getting a monthly communication. A good part of every newsletter until now has involved listings of our ever-growing support group options; that's going to be shifted from Neuropathy Hope to a new Neuropathy Notes document that all members will receive monthly, and which will include announcements of support groups, webinars, and another new initiative: members-only workshops, which will be special presentations on various subjects open just to WNA members (so get those renewals in!) You'll be reading the details about all of it in this month's newsletter.

Our Board is constantly debating how best to serve our membership, and the above initiatives are the result of not only those discussions but of feedback from our members. Hopefully you'll find these changes useful in making it easier to find exactly what you're looking for among WNA's activities (and don't be afraid to give us feedback on the new formats as well).

The WNA Board of Directors wishes everyone a happy and healthy (as possible) holiday season. See you in 2026.

Glenn  
[glenntaj@yahoo.com](mailto:glenntaj@yahoo.com)

## CHANGES TO THE BOARD OF DIRECTORS

**Samantha Fields resigned her position in September** due to continuing health problems. From her email to the Board of Directors: I need to step down from my role as a Director on the WNA Board. Ongoing health concerns are making it hard for me to keep up with any of my responsibilities, and I think it's best to step back at this time. I've really appreciated the chance to serve with all of you and to be part of the work WNA is doing. Thank you for the support and kindness you've shown me during my time on the Board.

Warmly,  
Sam

**Jim Picone was approved as a Director in October.** In Jim's words: I am honored to join the WNA Board of Directors. As a member, I have seen first-hand how much this organization has helped so many people learn about their issues and in doing so help others as well. I hope to be able to lend my experiences to WNA to bring an additional perspective to the organization and help reach out to people in need.

Thanks for the opportunity to serve.  
Jim

### HEALTH CARE CHALLENGES WEBSITES (updated)

**SHIPs**  
**State Health Insurance  
Assistance Programs**  
[www.shiphelp.org](http://www.shiphelp.org)  
(877) 839-2675

Help for navigating the complexities of Medicare. Search the website for your specific state program.

**Medicare Rights  
Center**  
[www.medicarerights.org](http://www.medicarerights.org)  
(800) 333-4114

Non-profit that works to ensure access to affordable health care for older adults and people with disabilities.

**Medicare**  
[www.medicare.org](http://www.medicare.org)  
(800) MEDICARE  
(800) 633-4227

Get started with Medicare, options, news.

**Benefits and  
Insurance for  
People with  
Disabilities**  
[www.usa.gov/  
disability-benefits-  
insurance](http://www.usa.gov/disability-benefits-insurance)  
(844) USAGOV1  
(844) 872-4681

For those with a disability, learn how government programs and services can help in your daily life.

*Editor: From the article titled “A Smart Guide To Pain”, this section is Tool No. 7 in the Pain Management Toolbox. Again – another instance of mainstream media focusing a major article on pain. Note all of these may not be applicable as the article is not specifically for neuropathic pain.*

The following are some of the many available options for pain relief and management:

**Neuromodulation**, including spinal cord stimulation an implanted device that sends low levels of electricity directly into the spinal cord to relieve pain; deep brain stimulation; and local (external) electrical stimulation, applying brief pulses of electricity to nerve endings under the skin to provide pain relief (Scrambler Therapy, TENS).

**Injection therapies**, in which medication is injected directly into the site of discomfort. These include epidural steroid injections, nerve blocks, joint injections and trigger point injections.

**Dry needling**, which can be initially painful, involves placing this, sharp needles through the skin and into what are known as “trigger points,” areas of muscle that have become knotted and tender. The needling can decrease tightness, improve blood flow and reduce pain. It’s called “dry” because there are no medications in the needle.

**Non-painkiller injections.** They may include:

- **Botox**
- **Gel injections** (hyaluronic acid to mimic cushioning fluid in joints), often used for knee pain, such as mild to moderate arthritis.
- **Prolotherapy injections** (concentrated sugar water to relieve pain in joints, ligaments and tendons)
- **Regenerative medicine** (orthobiologics): a newer category, including injectables made from your own blood or tissue, or applications of dressings using biomaterials (such as placenta), used to restore tissue in skin grafts and other wound or surgical sites.
- **Platelet-rich plasma injections and “cell therapy”:** PRP injections involve taking the patient’s blood, isolating and concentrating the platelets, and injecting billions of them into the joint, ligament or tendon. Some newer injectables, called cell therapies, collect cells and tissues from bone marrow or fat tissue. The cells are collected, cleaned and injected into the patient’s joint, ligament or tendon.

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## KEEP ON PUSHING AND PULLING - THERE ARE NEUROPATHY MIRACLES

Nancy Nowak, Palm Desert, CA WNA Member

I share this story with you in hopes it gives you the energy to keep on investigating and asking questions about your neuropathy. Pain and discomfort slow you down and often make it hard to keep on trying to solve your health issues.

I was diagnosed with neuropathy about four years ago. My family physician did a workup and at first we thought it was from a low B12 level, but that was not the case. I saw a neurologist and he diagnosed me with Idiopathic Length Dependent Axonal Peripheral Polyneuropathy. My nerve pain quickly worsened and my gabapentin dosage went higher and higher and barely masked the nerve pain.

Early this year I began to have weakness in the back of my thighs which I thought was from my neuropathy. I could barely stand up straight without weakness, pain and loss of balance. My doctor felt different and ordered an MRI of my lumbar spine. This showed stenosis, a full blockage of my L3 and L4 that was causing no nerve]s to get to my lower legs. I saw a spinal surgeon, had an L3 and L4 Decompression and Fusion in March 2025 and slowly recovered to full mobility. I am withdrawing off my gabapentin and am on half the dose from before my surgery. I have reminders on my phone to take it!

I keep going back and asking myself why the neurologist didn’t consider this as a possibility, but I have had to let this go and enjoy life without chronic pain. Keep asking and pushing your medical team, do your research and don’t feel bad that you might be taking up their time with your questions and suggestions. If they are irritated at you, find another doctor! The last few months have revitalized me. Every time my reminder for gabapentin comes up on my phone I smile. Every week I reduce the dose I cheer. I am reminded about how much power we have to be in charge of our own well-being and good health!

# UNDERSTANDING PAIN AND THE PERSONAL JOURNEY

Scott Farmer, MBA; ACPA Chronicle; Summer 2025

Pain is often described in terms of symptoms, diagnoses, and treatments—but for those who live with it, pain is far more than a clinical experience. It is a deeply personal, often isolating journey that affects every aspect of life: physical function, emotional wellbeing, relationships, identity, and hope. Bridging the gap between how pain is treated and how it is lived is essential to improving care and restoring dignity to those navigating pain.

## The Human Side of Pain

Pain is invisible. There are no outward signs, no casts or bandages. As a result, many people with pain encounter skepticism, stigma, or misunderstanding. Loved ones, coworkers, and even healthcare providers may unintentionally diminish their experience with phrases like “you don’t look sick” or “just push through it.” This disconnect adds emotional burden to the already exhausting task of managing pain daily.

Understanding pain as a personal journey begins with listening. Every person’s story is different: the cause of their pain, how it began, how it impacts their life, what they’ve tried, what’s worked, and what hasn’t. By honoring these individual stories, we affirm that pain is not just a medical condition, it is a lived experience.

## Moving Beyond the Biomedical Model

Traditional approaches to pain management have often focused on finding a cause and fixing it. But pain doesn’t always follow a straightforward path. In many cases, there is no quick fix. What’s needed instead is a broader, more compassionate approach—one that includes not only medications or procedures, but also emotional support, movement, coping tools, and education.

Programs that embrace a biopsychosocial model of care recognize the full complexity of pain. They incorporate mental health support, physical therapy, peer support groups, and self-management strategies. Importantly, they empower people with pain to be active participants in their own care, rather than passive recipients of treatment.

## The Role of Communication and Empathy

Bridging perspectives requires more than new treatment models—it requires a cultural shift in how we talk about pain. Clinicians, caregivers, and communities must adopt language that validates rather than dismisses. Healthcare professionals must cultivate skills in empathy and trauma-informed care, understanding that for many, pain has been accompanied by years of being unheard or misjudged.

Equally, those living with pain must feel safe to share their experiences, ask questions, and advocate for themselves without fear of judgment. When both parties—patients and providers—meet in a space of mutual respect and open communication, healing becomes more possible, even if pain persists.

## The Power of Peer Support

One of the most powerful bridges between perspectives is peer support. Organizations like the American Chronic Pain Association (ACPA) provide not just information, but connection—linking people with pain to others who truly understand what they’re going through. These connections reduce isolation, restore hope, and provide practical tools for daily living.

Hearing someone say, “I’ve been there too” can be transformative. It reminds individuals they are not alone, that their pain is real, and that there are paths forward.

In the personal journey of chronic pain, success does not always mean the absence of pain. Sometimes it means regaining function, returning to activities that bring joy, sleeping better, improving mood, or simply being heard. These “small wins” are deeply meaningful and deserve recognition.

By reframing success in terms of quality of life, we align care goals with what truly matters to those living with pain.

## How To Work ‘EXERCISE SNACKS’ INTO YOUR DAY

June 20, 2023/Diet, Food & Fitness/Exercise & Fitness [clevelandclinic.org](https://www.clevelandclinic.org)

When you hear the words “exercise snacks,” you may think of a smoothie, a piece of fruit, a hard-boiled egg or a protein bar. But the idea of exercise snacks isn’t about what you eat pre- or post-workout. It’s a way of getting closer to the recommended 150 minutes of moderate-intensity aerobic exercise each week by doing short bursts of intense activity — moving around vigorously for a minute or two at a time. “We’re living a more sedentary life. We have a lot of office jobs. We’re sitting around a lot more,” says exercise physiologist Katie Lawton, MEd. “Exercise snacks work as a reminder to just get up and move every so often.”

For those of us who struggle to find 30 minutes or more to work out each day, exercise snacks throughout the day can help make your wellness and fitness goals more attainable. The quick, easy workout can add up to some sustainable health benefits comparable to traditional workouts.

### What are exercise snacks?

Exercise snacking is defined as a brief period of high-intensity movement or exercise that typically lasts for no more than two minutes. And it’s something that you can and should do at various points in your daily life. The concept for these short bouts of intense movement is similar to high-intensity interval training (HIIT), which is based around the idea of exerting your body for a short period of time, then resting for a short period, and then repeating the movement. But with exercise snacks, the workout, or movement, lasts around two minutes, with an extended rest period of an hour or more in between.

“Form your exercise around your day,” suggests Lawton. “The idea of exercise snacks can fit easily around your life, no matter how busy or stressed you are. It’s a very short time commitment.”

### Benefits of exercise snacks

While more research is needed to fully understand how exercise snacks can benefit your health, recent studies show that the benefits of exercise snacks may include improved cardiovascular function, endurance, flexibility and muscle strength along with reduced blood sugar levels.

But doing an exercise snack occasionally isn’t going to do much to improve your overall health. “The biggest factor with exercise snacks is going to be consistency, making sure you’re doing it on a daily basis and moving on a daily basis, rather than doing a day here then maybe one day next week,” notes Lawton. “It’s not going to be very impactful if you’re just doing it when you remember to do it. If you can do exercise snacking consistently over a span of a month or two months, I think you’re going to see an impact.”

So, how often should you be exercise snacking? “Research shows that three times a day, seven days a week can improve your cardiovascular health,” adds Lawton. “You want to break up that sedentary time you’re sitting or working at a desk, which can be bad for your health.”

### Examples of exercise snacks

Another great reason to try exercise snacks? You don’t need to head to the gym or sign up for a class — and there’s no need for special exercise equipment like weights, kettlebells or resistance bands. Some examples of exercise snacks include stair climbing, jumping jacks, jumping rope, lunges, sprints, push-ups, chair squats and mountain climbers. *(Editor – For chair exercises, refer to the September 2025 issue of Neuropathy Hope)*

The exercise snack options are endless — any activity or exercise that gets you up out of your seat and moving works. And make sure you’re doing these activities vigorously — meaning that it’s difficult for you to say more than a few words with needed to take a breath.

“Before vigorous exercise or any kind of cardiovascular exercise, you want to do a short warm-up and get your heart up a little bit,” advises Lawton. “You don’t want to go from a seated position to going all out up and down stairs.” Lawton says that if you have a heart condition like an arrhythmia or coronary artery disease, or even any orthopaedic issues, you should discuss doing exercise snacks with a healthcare provider first.

But overall, the idea of exercise snacks can be beneficial and help you reach your fitness goals or even just give you a boost of energy in the middle of your day.

## MANAGING NERVE PAIN OVER THE HOLIDAYS *austinfootandankle.com/blog/* retrieved September 26, 2025

The holidays should be a time of joy and celebration, no matter who you are or what personal health challenges you may be facing. That being said, there's no denying that those who struggle with neuropathic pain have some extra challenges and obstacles they must deal with at this time of year. This doesn't mean you can't have fun! It just means you may need to take some wise precautions in order to get through the New Year as comfortably as possible. Here are our holiday "survival tips" for those dealing with neuropathic pain.

**Watch What You Eat** This is, of course, true all year long for people with neuropathy and other forms of neuropathic pain. But maintaining discipline can be especially tricky this time of year with so many delicious temptations. As always, it's about setting reasonable limits and sticking to them. We're not saying you can't enjoy a festive meal. But if you have nerve issues, it's especially important not to go overboard on carbs. That can cause blood sugar to rise (with or without a diabetes diagnosis) and damage your nerves over time.

For most of us, it's about **portion control**. You can enjoy some of a carb-heavy dish, or a couple of cookies, but they should represent only a quarter to a third of your plate at most. Balance it with healthy portions of leafy, non-starchy veggies—ideally those that haven't been cooked in tons of butter or oil.

**Keep Yourself Moving** The holidays are a great time to sit back and relax a bit. But for those with nerve troubles, keeping the blood flowing to the legs and feet is especially important—particularly after a big meal. Even taking a 10-minute walk after a meal can not only help ease any guilt you might feel after eating too much mashed potatoes, but can help you prevent or reduce nerve pain symptoms, too. For your regular exercise, shoot for at least 30 minutes of safe cardio at least three times per week. This doesn't necessarily have to be overly intense or difficult—power walking will fit the bill, as will taking a bike ride or going for a swim.

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## COPING WITH CHRONIC PAIN DURING THE HOLIDAYS *drfanee.com/blog/* retrieved September 26, 2025

All of the parties, shopping, decorations, events, and presents during the holidays are good in and of themselves, but they can also cause loads of added stress to your body. And when you're dealing with chronic pain, that's no small thing. Here are a few tips to help you cope with potential stress during this season so you can focus on the joy all around you instead of your pain.

**Be Realistic** Having realistic expectations for what you can handle is the key to managing your body this holiday season. Starting off with unrealistic ideas about what you can and can't do only sets you up for more stress.

If you know your physical ability is less than it was last year or your pain stops you from going all out for the holidays, cut back your schedule accordingly — and don't feel bad about it. You may even want to make a list of what you're planning to do (and not do) that you can review easily so you're more likely to stick to it.

**Share The Load** You don't have to do everything on your own. The holidays aren't meant to be a do-it-yourself endeavor, so feel free to divide the workload among family and friends.

You don't have to cook the entire holiday dinner — assign a dish to everyone who's coming. Have family members help you decorate. Pay your neighbor kid to shovel your driveway if it snows. Find all of the ways you can to outsource the work so you're not bearing the load alone and so your body has a chance to relax.

**Take Regular Breaks** If you don't schedule downtime for yourself, it won't happen. Plan ahead so you have time every day to rest and relax. Try not to schedule big events on back-to-back days, and remember that you probably can't keep up the same pace as before you had chronic pain.

**Keep Lines Of Communication Open** Even though this tip is last, it might be the most important. Your family and friends love you, so don't worry about disappointing them if you can't make an event or fulfill a duty when your pain flares up. Just tell them how you're feeling and what you need in an open and honest way, and you may be surprised at how well they react and jump in to serve you.

With some planning and lots of self-care, you can make this holiday season more about the joy than your chronic pain.



## WESTERN NEUROPATHY ASSOCIATION

A California public benefit, nonprofit,  
tax exempt corporation

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[www.pnhelp.org](http://www.pnhelp.org)



From all of us at WNA

## IN THIS ISSUE

Dear Readers,

December brings the added stress of **THE HOLIDAYS!** Families, food, and shopping – Oh My! All of the physical activity and mental anguish means our neuropathy symptoms/pain can increase.

Most of you know how strongly I feel about exercise. As Bill Porter, WNA member in Virginia, says all the time in our support groups, “Motion is lotion, rest is rust.” **Page 6** discusses **Exercise Snacks that you can sneak into your day** to help your heart, blood and nerves.

**Page 7** has two articles on **managing pain over the holidays.** What I notice now as I’m writing this, is that the tips for managing pain over the holidays – are the same tips to use to manage pain each and every day. So if you do use some of these tips during December, and they resonate with you and help you with your stress, continue with these in 2026. And if you find one that really helped you, write me and I’ll share it with your fellow members in a future issue. Articles in the newsletter can’t bring us hope unless we try them to see the result.

May these give you Hope.

..Katherine

[klstenzel@hotmail.com](mailto:klstenzel@hotmail.com)



### Western Neuropathy Association (WNA)

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tax-exempt corporation.

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WNA Headquarters: [info@pnhelp.org](mailto:info@pnhelp.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.

*This newsletter is designed for educational and informational purposes only. The information contained herein is not intended to substitute for informed medical advice. You should not use this information to diagnose or treat a health problem or disease without consulting a qualified health care provider. Western Neuropathy Association (WNA) does not endorse any treatments, medications, articles, abstracts or products discussed herein. You are strongly encouraged to consult a neurologist with any questions or comments you may have regarding your condition. The best care can only be given by a qualified provider who knows you personally.*