About Beating Neuropathy & Chronic Pain

“I haven’t slept well at all, and the burning and tingling is just miserable. Nothing seems to help for long. It really hurts, plus I feel tired and groggy all the time from the medication...”

These are the some of the most common things patients say when afflicted with peripheral neuropathy. Neuropathy is really just your doctor’s word for nerve “damage” It can be caused my many things, most commonly from unknown causes. It could be diabetes, chemotherapy, smoking, prescription medication, and perhaps even over-the-counter self-medication and dietary supplements. The more I work with neuropathy patients, the more the list seems to go on and on.

Often, even brilliant physicians can’t find out exactly what causes some patients’ neuropathy.

The good news is that there is very significant progress being made in the treatment of peripheral neuropathy that now allows patients to not only get excellent in-office care, but to be discharged in a very reasonable period of time to a home treatment program with follow-up.

On the following pages, you will read more about my experiences using a combination of my many years of my clinical practice since 1981. I personally invite you to go to NeuropathyDR.com to keep up to date on our system advances, research and clinical studies as they expand. We also have an ever-expanding,
vibrant community on most social media sites, the largest being Facebook.com/BeatingNeuropathy.

What Can Cause Peripheral Neuropathy?

The causes of peripheral neuropathy are in many cases, unfortunately, unknown. It’s no longer diabetes.

The most common cause of neuropathy in this day and age may actually be what’s called “idiopathic”, meaning of unknown certainty.

In our modern world, we are subjected and exposed to many environmental toxins, including heavy metals. We also are seeing patients surviving cancer and living much longer. Unfortunately, one of the undesired complications of chemotherapy is the development of peripheral neuropathy. We are also seeing patients developing compression neuropathy, such as carpal tunnel, chronic sciatica, and back pain and nerve damage associated with conditions like degenerative spinal disc disease and spinal stenosis. Part of this, of course, is because we are living longer and being more active than ever before.

Another common but often overlooked cause of peripheral neuropathy is the use of statin medication, which has expanded exponentially. It wasn’t long ago that the statins were heralded to be the cure-all for many of mankind’s greatest diseases and illnesses. This is not the forum to debate the appropriate use of statins, but if you or a family member are taking them, you do need to be aware that peripheral neuropathy is a potential complication.
There are other causes of peripheral neuropathy, like kidney disease and hormonal diseases that occur in patients with hyperthyroidism, as well as Cushing’s disease, which affects the adrenal glands and the output of cortisol.

Alcoholism can cause peripheral neuropathy, as can vitamin deficiencies, especially deficiencies of thiamin, or vitamin B1. There are still more causes: chronic hypertension, cigarette smoking, immune-complex diseases, generalized degenerative lifestyles that include obesity, poor diet combined with cigarette smoking, abuse of over-the-counter medications, and so on.

**How Do I Know If I Have Peripheral Neuropathy?**

A diagnosis of peripheral neuropathy is more about making sure of everything it’s not. Therefore, our client doctors and therapists who take care of peripheral neuropathy patients commonly work with many physicians of other disciplines.

The reasons for this should be quite obvious. It is very important that all the things we spoke about earlier, such as family history, genetics, medication usage, et cetera, are all accounted for.

Learning if you have peripheral neuropathy should, then, be very straightforward.
But, as I tell patients all the time, this is a diagnosis of exclusion; I am very serious about identifying precisely what you don’t have. I am ever-vigilant for more serious underlying conditions, and encourage the same diligence from my clinicians.

Unfortunately, far too many patients with peripheral neuropathy suffer greatly. In my experience, and the experience of many physicians, patients have symptoms for years, which gradually build to a crescendo before they present to their clinicians.

These symptoms initially may include things such as mild loss of sensation of the hands and the feet, or progressive worsening of tingling and numbness that will often wake you at night, or completely disturb your sleep.

We also find that many patients with peripheral neuropathy have a combination of these most annoying symptoms. This could include not only the presence of tingling and numbness, but also shooting pains. I have had many patients tell me that one of the most annoying symptoms, especially in colder climates, is the coolness of the feet as well as the (trophic) changes that occur in the skin, such as extreme dryness, cracking, and fragility.

*If a likely root cause(s) can be identified, they should be addressed as completely as is medically and humanly possible, especially with things like obesity (as little as being 10 pounds overweight) smoking, alcohol, statin drugs, and so on. You have **GOT** to take the bull by the horns on this one!*

We also have to be on the lookout for neuropathy from treatments such as chemotherapy for cancer or other illnesses.
Another area which concerns me greatly is when patients self-medicate with over-the-counter medications, or maybe even herbal preparations that possibly could be contaminated with heavy metals or plant toxins.

I strongly advise you to seek professional counseling before creating irreversible damage to your liver or kidneys.

As I stated above, the diagnosis of peripheral neuropathy really is a diagnosis of exclusion. It is very important to have a clinician working with you able to perform the most thorough evaluation possible, looking at all your records, especially trends over the past 5 years in things like blood lipids (cholesterol, triglycerides, LDL, et cetera) and fasting blood sugar levels (GBS and HBA1c) to make sure that any possible correctible causes, such as metabolic syndrome are addressed.

**Are All the Peripheral Neuropathies the Same?**

No. All the peripheral neuropathies are not the same. We find, though, that the patients who present with peripheral neuropathy, regardless of the cause, do have remarkably similar symptoms.

To find out what components of peripheral neuropathy you have, you’ll need a very thorough evaluation. Laboratory tests may very well be performed. These would include things such as a chemistry panel, kidney and liver function. We will also want to double check your blood sugar levels and, more than likely, perform a hemoglobin A1c.
This particular test is very good at identifying patients who may be borderline diabetic. Whatever your condition, it is important to work closely with your entire healthcare team.

I have found many patients who present with neuropathy symptoms have not yet been diagnosed with diabetes but may very well suffer from metabolic syndrome.

There is some very understandable patient information I wrote for you at NeuropathyDR.com. Your body’s abnormal handling of blood sugar and fats over time may unfortunately lead to the development of neuropathy and other diabetic complications—well before the formal diagnosis is made.

Something else that really affects all peripheral neuropathy patients is that drug-only treatment to is of very limited effectiveness. And most of the time drugs are only masking it!

Patients often try many drugs, costing many hundreds if not thousands of dollars out of their own pockets on medications that prove to ultimately be ineffective.

As you can see by now proper neuropathy treatment is indeed a specialty.

But most clinicians are just not adequately trained or up on the most modern tools and systems we now available.
What Can I Do Starting NOW?

For the best results in relieving the painful and debilitating effects of Peripheral Neuropathy, we strongly recommend seeing a NeuropathyDR Clinical Affiliate. They will provide a thorough evaluation and create a treatment plan just for you. If you can’t physically get to one of our clinics you can even do Telemedicine evaluations with our closest treatment center from anywhere around the world! However, since we understand that there may not be an affiliate located in your area yet, the NeuropathyDR team is proud to offer a wide range of treatment information and tools that can be helpful when used independently.

Our most popular home care system is our self-guided care kit which includes a unique treatment system only available in our clinics and NeuropathyDR.com/HomeCare

It’s the very same one used in our clinics. Hundreds of these kits are in usage around the world right now. Most patients experience less pain and better sleep almost immediately. Contact your nearest clinic or go straight to our website to get one for yourself!
We also have made available to you our nutrition support formulas including our famous metabolic dose packs, soothing topical cremes and other products which combine precisely the right combination many patients will benefit from. Remember, *International shipping* is also available.

You’ll find everything you need to know about us and all the support you need at [NeuropathyDR.com](http://NeuropathyDR.com)

I hope you have found this information helpful! I encourage you to be an advocate for yourself, and seek clinicians who really listen to you!

Above all, don't trust your neuropathy care to just anyone. There are a lot of imitators and untrained people out there offering just about anything under the Sun to “Cure” neuropathy and just about anything else.

Here at NeuropathyDR, you are our number one focus! Call us 24/7 at 781-659-7989 and ask for a call back for personalized assistance.

**Lastly, please join our on-line community at** [Facebook.com/BeatingNeuropathy](http://Facebook.com/BeatingNeuropathy)!

Respectfully,

Dr John Hayes Jr. & The NeuropathyDR Team