GOALS FOR THIS TALK

To reflect on the fact that diagnosing and treating neuropathy is not always “neat & simple”

We should have a script or “guideline” with text and directions, but it doesn’t mean pts and providers can’t or shouldn’t make corrections

Highlight 5 common mistakes that pts and providers can fall into tunnel vision
Peripheral nervous system:
Common Mistake #1

“Not All that tingles, is numb, painful, or weak is Peripheral Neuropathy”
Common Mistake #2

“It’s ALL due to my

_________ (fill in the blank)

(diabetes)

(B12 deficiency)

(Hereditary/CMT) ...
Common Mistake #3

Your neuropathy is getting worse--

No one knows why,
but they’re also not looking into it either!
Common Mistake #4

“It’s a straightforward diagnosis”
Common Mistake #5

“Unfortunately, you just have to live with it”
Restless Legs Syndrome (RLS)

It’s not just the legs!

Characterized by an irresistible URGE to move in order to help some of the pain/discomfort/abnormal sensations

Worse during periods of inactivity; can really affect sleep!

Management Strategies may include:

-- Warm soaks/nightly lotion massages/ Anti-Inflammatories/Stretching/Yoga

-- Iron supplementation (ferritin goal of 70)

-- Vitamin supplementation

-- Anti-inflammatory meds

-- Nerve pain targeting meds *should be first Rx line*

-- Parkinsons meds (but beware possible Augmentation!)
THANK YOU!

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