What You Need to Know About Neuropathic Pain

by LANA BARHUM

Chronic Neuropathic Pain

The number of people in the United States living with chronic neuropathic pain is 8.8 percent according to researchers at the Mayo Clinic in Rochester, Minnesota. However, it is possible this number is inaccurate due to people being misdiagnosed or incorrectly describing pain levels (e.g., mild vs. severe or sharp vs. dull).

If you are one of the 8.8 percent, you have many questions about what neuropathic pain is, its causes, and how it is diagnosed and treated. Here is some information that may help you to better understand what you are dealing with.

What Is Neuropathic Pain?

Neuropathic pain is different than nociceptive pain. The later occurs as a result of an acute (abrupt onset) injury and, in most cases, is short-lived, but neuropathic pain is chronic, meaning it will persist, reoccur, and/or get worse over time.

Neuropathic pain is generally associated with your peripheral nervous system, which includes the somatic and autonomic nervous systems. Your somatic nervous system is responsible for transmitting signals from your brain to your organs, including muscles and skin, while your autonomic nervous system transmits signals from your senses, including taste and touch.

The type of pain associated with the peripheral nervous system may come from various health conditions, including diabetes and spinal stenosis. But neuropathic pain can also result from a brain or spinal cord injury.

Risk Factors and Causes

Anything that leads to a loss of function in your sensory nervous system can cause you to develop neuropathic pain.

Nerve problems, from conditions such as carpal tunnel syndrome, can cause neuropathic pain as well as trauma from a nerve injury.

Certain heath conditions can put you at risk for developing neuropathic pain, including diabetes, cancer, HIV/AIDs, stroke, multiple sclerosis, and shingles. Vitamin deficiencies, chemotherapy treatments, alcoholism, infections, trauma, some medications, and toxins are also to blame.

When the cause of neuropathic pain cannot be determined, it is called idiopathic neuropathy. Idiopathic simply means having no known origin.

Prevention

The best way to decrease your risk for developing chronic neuropathic pain is avoid developing it.

>Maintaining a healthy weight will decrease your risk for diabetes. The National Institute of Diabetes and Digestive and Kidney Diseases reports up to 70 percent of diabetics have some form of neuropathy. Diabetic neuropathy can be prevented by keeping blood glucose at normal levels. This will protect all the nerves throughout your body.

You also shouldn't smoke or drink alcohol in excess. One study out of the Mayo Clinic found that of 205 smokers, 62 percent developed neuropathic pain.

It is also believed 25 to 66 percent of chronic alcoholics have alcohol neuropathy, as estimated by the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, and reported in the British Journal of Clinical Pharmacology.

Symptoms and Diagnosis

Symptoms of neuropathy might include a gradual onset of numbness, tingling, or a pins and needles feeling in the hands and feet. Symptoms may spread up into the arms and legs.

You may also experience pain that is sharp, stabbing, freezing, or burning. Lack of coordination, balance issues, muscle weakness, and paralysis are common if your motor nerves have been compromised.

If your autonomic nerves are affected, you may experience heat intolerance, sweating, blood pressure changes, and bowel, bladder, or digestive issues.

Neuropathy may affect one nerve or multiple nerves. Most people with neuropathy have multiple affected nerves in different places.

It is important to seek out medical attention as soon as your start noticing tingling, pain, and weakness in your hands or feet. Early diagnosis and treatment may help you control symptoms and prevent further nerve damage.

Diagnosis of neuropathy is generally based on symptoms and a physical exam. If you have diabetes or a recent case of shingles, a diagnosis can be easy to make, but with other conditions or no known cause, making a diagnosis could take some time.

Electrodiagnostic medicine, or EDX, is the most common way to find out whether a nerve has been damaged. EDX utilizes nerve studies to access touch, pain types, temperature, and vibration according American Board of Electrodiagnostic Medicine.

Your doctor may also request blood work to determine what other conditions might be causing your symptoms, imaging to look for injuries, and nerve and skin biopsies to look for any abnormalities or reduction in nerve endings.

Treatment and Coping

There are different types of medications to treat neuropathic pain. Your doctor may want to start with an antidepressant or an anti-seizure medication, as both of these have been successful in treating neuropathic pain.

Sometimes by treating the condition causing symptoms, you may find relief from your neuropathic pain. For example, if you have diabetes, you can manage your pain by managing your blood sugar.

Exercise, diet and relaxation can also help. Other options your doctor may want you to try include nerve stimulation and physiotherapy (a combination of physical medicine and rehabilitation).

Some alternative therapies are also viable options for managing neuropathic pain. Various studies have shown acupuncture helps. One 2007 study, with results published in the European Journal of Neurology, found 76 percent of people treated with acupuncture had improved symptoms.

Other alternative therapy options include chiropractic care, fish oil supplements, and various herbs.

You can help yourself by seeking out support from loved ones, support groups, or a mental health provider. There are plenty of people who understand, who can share their experiences, and with whom you can discuss your feelings.

If stress is exacerbating your pain, learn to relax. Try listening to calming music, taking warm baths, or going for walks.

Make sure you pay attention to possible complications of neuropathic pain, including burns and skin trauma due to loss of feeling and numbness, infections to injured areas of your body, and falls associated with balance issues.