

Diabetic nerve damage (neuropathy)

Diabetes can damage the nerves that travel between your spinal cord and your muscles, skin, and other parts of your body. High blood glucose (sugar) levels change the chemicals in the nerves or damage the blood vessels that supply oxygen to the nerves.

These changes can be very gradual and you may not notice them.

Your feet are most commonly affected. This is why it's essential that you get a foot screening and assessment by a practice nurse, GP or podiatrist every year. You can then agree on a treatment plan to suit your needs.

Keep your blood glucose (sugar) levels under control to reduce your risk of getting neuropathy.

Types of diabetic neuropathy

The three main types of neuropathy are sensory, motor, and autonomic. These can cause different symptoms, depending on the affected body part.

Sensory neuropathy

This is the most common type. It usually affects nerves in your feet and legs but can sometimes affect nerves in your hands and arms.

Sensory neuropathy can cause a feeling of numbness, tingling, or pins and needles. Some patients develop a feeling as if they are walking over sharp stones.

Neuropathy is sometimes called painful neuropathy, because it may also cause:

- burning pains in your legs, especially in bed at night
- shooting pains
- over-sensitivity to even the slight touch.

You may not notice any symptoms but still have signs of sensory neuropathy when your feet are tested. This lack of sensation can sometimes lead to problems with foot ulcers.

Motor neuropathy

This is less common. It might cause weak muscles, especially in your legs. It can alter the shape of your feet and cause problems with shoes. Both of these might lead to problems with walking.





Autonomic neuropathy

This affects the nerves that control internal organs. The symptoms depend on where the problem lies.

You could have:

- nausea or vomiting if it affects your stomach
- constipation or diarrhoea if it affects your intestines
- difficulty peeing if it affects your bladder
- problems with erections if it affects your penis
- dizziness and palpitations if it affects your heart and blood vessels
- dry skin, especially in the feet, if it affects your sweat glands.

Treating diabetic neuropathy

Several different tablets and creams are available for this. Some will work better for some people than others.

It's important to tell your doctor if your medication isn't working or is causing side effects. Your doctor may refer you to the Diabetes Centre or to the Pain Clinic for other forms of treatment.

Self-care for diabetic neuropathy

Look after your feet. For more information, see *Self-care for your feet* on www.healthinfo.org.nz.

If you have reduced feeling in your feet you are at high risk for foot problems, including ulcers. You will need foot checks from a podiatrist at least every year.

Keep your blood glucose (sugar) levels under control to stop diabetic neuropathy getting worse.

Don't smoke.

Eat well and keep physically active.

If you find a problem with your feet, contact your podiatrist, GP, or after-hours GP clinic for advice as soon as possible.

Written by Podiatrist Special Interest Group. Adapted by HealthInfo clinical advisers. Last reviewed July 2019.

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