What is Diabetic Neuropathy?
Diabetic neuropathy is a nerve disorder caused by diabetes. Over time, high blood sugar levels from diabetes can damage nerves throughout your body.

There are several types of diabetic neuropathy:

- **Peripheral neuropathy** - reduces your ability to sense pain, touch, temperature, and vibration in certain parts of the body. It may also affect movement and muscle strength.
- **Autonomic neuropathy** - may cause problems with the nerves that control the involuntary functions of your body, such as heartbeat, blood pressure, sweating, digestion, urination, and some aspects of sexual function.
- **Focal neuropathy** - affects a single nerve, most often in the wrist, thigh, or foot. It may also affect the nerves of the back, chest, and those that control the eye muscles. It often develops suddenly and is the most rare form.

What can cause it?
High blood sugar levels cause diabetic neuropathy. The higher your blood sugar levels, the greater your risk of developing neuropathy. The risk of nerve damage also increases as you age and the longer you have diabetes. Smoking and excessive use of alcohol may further increase the risk. Approximately 50% of people who have diabetes will eventually develop diabetic neuropathy.

What are the symptoms?
Symptoms vary according to which nerves are injured, but may include some of the following:

- **Peripheral neuropathy** - tingling, numbness, tightness, burning, stabbing pain, greatly reduced or greatly increased sensitivity to light, touch, temperature, loss of balance and coordination.

- **Autonomic neuropathy** - frequent bloating, nausea/vomiting, abdominal pain, profuse sweating, sexual problems, dizziness, weakness, and difficulty knowing when your blood sugar is low.

- **Focal neuropathy** - pain, weakness, motor problems in a single area of the body, pain in or around one of your eyes, double vision, and difficulty moving the eye.

How is Diabetic Neuropathy diagnosed?
A diagnosis of diabetic neuropathy is based largely on your symptoms, your medical history, and a physical examination. Tests such as electromyogram (EMG) and nerve conduction may be done to confirm the diagnosis. Additional tests may be needed to identify which type of neuropathy you have. These tests will identify the organ or system affected as well as guide treatment.

What are the treatment options?
There is no cure for diabetic neuropathy. Treatment focuses on slowing the progression of the disease by consistently keeping your blood sugar levels within a narrow and tightly controlled range. Taking proper care of your feet to keep them free from sores and infections is also important.

Your doctor will tailor your treatment to your symptoms. These treatments may include but are not limited to: medications, medication pumps, acupuncture, massage, biofeedback, physical therapy, Transcutaneous Electrical Nerve Stimulation (TENS), or steroid injections.

What can I do to decrease my risk or avoid progression?
In addition to having regular medical checkups, the best way to avoid progression of diabetic neuropathy is to control your blood sugar, exercise regularly, eat a balanced diet, do not smoke, and limit your alcohol intake.