Exercising While Living with Neuropathy

By Matthew D. Hansen, DPT, MPT, BSPTS

Those who suffer from neuropathy can maintain and improve their physical strength, as well as reduce nerve pain, with a variety of basic exercises.
IT’S ESTIMATED THAT more than 20 million Americans suffer from peripheral neuropathy, a disorder of the nerves that run between the spinal cord and the body’s skin (sensory and autonomic nerves), muscles (motor and sensory nerves) and internal organs (autonomic and sensory nerves). Approximately 30 percent of peripheral neuropathies are of unknown cause, and another 30 percent are related to diabetes. Other contributing factors may be autoimmune disorders, endocrinological or metabolic disorders, nutritional imbalances, nerve entrapment/compression, certain medications, tumors and heredity.

Autoimmune diseases that may affect the peripheral nerves and/or their connection with muscles include chronic inflammatory demyelinating polyneuropathy, lupus, Sjögren’s syndrome, rheumatoid arthritis, POEMS syndrome, Guillain-Barré syndrome and its variant axonal or neuronal neuropathy, Lambert-Eaton syndrome, myasthenia gravis and multifocal motor neuropathy. In some cases, it’s not uncommon for peripheral neuropathies and autoimmune disorders to occur concurrently, but they may be unrelated.

Diagnosing neuropathies early is one way to control the disease. But, once developed, exercise can help. Following are a brief discussion of the signs of neuropathy and some basic exercises to help control its symptoms.

Symptoms of Peripheral Neuropathy
The earlier peripheral neuropathy can be identified, the better the chances are of controlling it and preventing permanent damage. The unpredictability of peripheral neuropathy’s course may make it even more trying, with symptoms that may progress over years, come on rapidly or come and go. Sensory nerves, which run throughout the body, are the nerves most frequently affected, often in both hands and feet. Someone with neuropathy of the sensory nerves may experience pain (frequently described as burning or stabbing), tingling, numbness and/or other unusual sensations in the distribution of the nerves. Secondary complications may include poor balance or development of wounds (e.g., pressure sores on the feet) from harmful stimuli that can’t be felt, sometimes as innocent as a pebble in the shoe.

When motor nerves are involved, the most common symptom is weakness that further complicates balance, mobility and other activities of daily life. Other symptoms may include muscle cramping, fasciculations (i.e., twitching), decreased reflexes and atrophy (muscle shrinkage).

Autonomic nerves work unconsciously to control the function of the body’s internal organs. Depending on which nerves are involved, autonomic neuropathy may affect heart rate, blood pressure, digestion, bowel and bladder control, and the ability to sweat.

Benefits of Exercise for Neuropathy
Although exercise may not be able to fully reverse the symptoms of peripheral neuropathy, it can help to preserve or improve muscle strength, balance, range of motion and circulation (which increases oxygenation and the associated healing of nerve tissue). According to Greg Carter, MD, professor of rehabilitation medicine at the University of Washington, aerobic exercise “improves not only physical functioning but helps fight depression, maintain ideal body weight, and improve pain tolerance.”

Unfortunately, there aren’t many scientific studies related directly to the effects of exercise on autoimmune disease-related peripheral neuropathies. However, there are studies regarding exercise’s effects on diabetic peripheral neuropathies (though care must be taken not to draw exact comparisons). Some of these studies have actually demonstrated significant decreases in pain and other symptoms, as well as an increase in innervation of the nerves that run to and from the skin.

THE EARLIER PERIPHERAL NEUROPATHY CAN BE IDENTIFIED, THE BETTER THE CHANCES ARE OF CONTROLLING IT AND PREVENTING PERMANENT DAMAGE.

Despite all the possible symptoms of peripheral neuropathy, it’s often foot pain that keeps sufferers from exercising. Sometimes simply standing or wearing shoes can be more than someone with foot neuropathies can bear. Fortunately, there are a number of options to exercise in a partial-weight-bearing or non-weight-bearing position.
T.K.’s Story

While exercise can be beneficial for neuropathy, it can also pose a threat. Following is a first-person account from “T.K.” of the dangers exercise can pose for neuropathy patients if not performed correctly:

“In 2005, pain in my hands and feet led to a diagnosis of diabetes and diabetic neuropathy. Brisk walking on my treadmill (30 to 35 miles a week) brought me back to my high school weight [and an improved blood glucose score]. However, because of my neuropathy, brisk walking became too hard on my feet, causing blisters and temporary numbness in my toes despite my best efforts. At the suggestion of one of my doctors in 2013, I purchased an exercise machine to help control my blood sugar. Unfortunately, I used the machine incorrectly.

“By February 2014, the outer halves of my big toes were numb. I did not realize it was a warning sign and could morph into greater neuropathic pain. Thinking the numbness meant the nerves were dead and I could do no further damage, I maintained my workouts. In September 2014, my big toes and balls of my feet suddenly became hypersensitive to pressure, and the simple act of walking brought increased burning, pain, electric shocks and stabbing sensations, especially in the big toes and balls of my feet. The neuropathic pains from the wrong exercises plagued and continue to plague my every step. I can no longer use the exercise machine, have difficulty walking and spend most of my time on my side in bed. When I walk, it is on my heels and the sides of my feet. I purchased seven Cashier mats for our wood floors and stand on folded towels in the shower. I am waiting on a quad cane in hopes it will reduce the weight on my feet when I walk.”

Safety

When the feet are affected by neuropathy, exercises should always begin and end with a foot check to ensure the absence of pressure sores or blisters. Wearing socks that are designed to absorb moisture and reduce friction can help to provide protection. Supportive shoes and orthopedic inserts to cushion the feet may also assist in preventing injury and increased pain that can result from weight-bearing activity.

High-impact exercises such as aerobics, jumping or running (especially on a treadmill) should be avoided. These types of exercises not only pound the feet, but they can also be very unforgiving if someone missteps. Special consideration should be given to activities that don’t place someone with neuropathy at unnecessary danger of falls.

A proper exercise program can improve balance. However, those who experience neuropathy in their upper extremities should take care not to overstretch the shoulders and wrists. When performing resistive exercise, a neutral wrist position should be maintained, possibly with the use of weightlifting gloves, and weight should be added slowly because of the possibility of exacerbating “entrapment neuropathies” such as carpal tunnel syndrome.

Stretching Exercises

Any exercise session should start with a warm-up. Slow, sustained stretching (at least 30 seconds per stretch; repeated three to five times) can help to avoid muscle cramping, maintain or increase flexibility, and improve blood circulation along with oxygen delivery, which can lead to healing or regeneration of peripheral nerves and help to avoid soreness. Yoga and tai chi are other good activities to help increase flexibility. Following are some specific stretching exercises:

Calf stretch. Stand on a bottom step, hold onto the rail and let your heels hang off the edge to stretch the calf muscles and Achilles’ tendon (Figure 1). If pain increases, or if you have a difficult time maintaining balance, you can perform the same stretch while sitting, extending your leg(s) and using a towel around the ball of the feet to pull the ankle toward you (Figure 2). When the stretch is performed with a bent knee, it will target the Achilles closer to the ankle; when it is performed with a straight knee, it will target higher up the leg, closer to the knee and hamstrings.

Hamstring/sciatic nerve stretch. There are a number of ways to stretch the hamstring muscles, which make up the bulk of the back of the thigh. Perhaps the simplest method is to sit on a chair or sofa and extend one
leg out in front of the body, and then lean forward at the waist until a gentle stretch is felt (Figure 3). The stretch can be increased in the hamstrings, as well as target the long sciatic nerve that runs down the back of the leg, by reaching toward the foot with the opposite hand, pulling the ankle and toes toward the body and/or slowly bending the head and neck forward.

**Figure 3. Hamstring/Sciatic Nerve Stretch**

*Prayer stretch.* Not to be confused with the back stretch by the same name, the prayer stretch increases the pliability and blood flow to the median nerve that runs from the shoulder, down the arm and across the wrist. The median nerve is often involved in upper extremity neuropathies, including carpal tunnel syndrome. Press the palms together in front of the chest in a prayer position and slowly raise the elbows and lower the hands while still keeping them pressed together (Figure 4). Hold the position once a moderate stretch is felt, but ease up or discontinue the activity if tingling or numbness returns.

**Partial-Weight-Bearing Exercises**

Partial-weight-bearing activities are performed in a position or medium (e.g., water) that allows part of the body’s weight to be transferred to the feet but not all of it. Biking (especially recumbent biking), water aerobics and wading in a pool are great partial-weight-bearing activities. The buoyancy principles of water can be particularly beneficial because the body’s weight is only roughly 50 percent of normal when a person stands in water up to hip/waist level and just 10 percent of normal when a person stands in water that is up to his or her chest.

**Non-Weight-Bearing Exercises**

If any degree of weight-bearing is a cause for increased pain, non-weight-bearing (a.k.a., open chain range-of-motion) or isometric exercises can also be performed.

Range-of-motion exercises (similar to stretching but without the hold) help to improve circulation and stimulate nerve conduction. Begin the routine by sitting in a chair and performing 10 to 20 ankle pumps on each side; then perform the same number of foot circles, first clockwise, then counterclockwise (Figure 5). You can slightly increase weight-bearing through the feet by performing toe and heel taps: Lift your toes as high as you can, then tap them against the floor as you lift the heels; perform the opposite motion by tapping the heels and lifting the toes. Then, move up to the knee joint by lifting one of your feet into the air with an extended knee, lowering it to the floor and repeating 10 to 20 times on each side.

Open chain range-of-motion exercises can be repeated in the fingers, wrists and elbows by following the same pattern. Open and close the fingers and hands; alternately bend the wrists up, then down; and bend and straighten the elbows. Range-of-motion of the hips and shoulders can also be performed, but is not described here because the two joints represent more than a dozen motions, and most neuropathy symptoms are experienced in the distal limbs, farther away from the trunk of the body (i.e., the hands and feet). For a more detailed description of non-weight-bearing activities, a physical therapist, personal trainer or well-designed home exercise video can be of assistance.

To perform isometric exercises, contract the targeted muscle, hold the contraction for three to five seconds, relax and repeat.

**Balance**

It’s always a good idea to place at least one hand on a stable structure (e.g., a countertop, stair rail, table or steady chair) when practicing balance activities. As a given activity becomes easier to perform, dependence on upper-extremity support can
More free time to live my life my way.

HYQVIA, the only once-a-month subQ Ig*1
For adults with primary immunodeficiency

Schedule an appointment with your physician to see if HYQVIA is right for you.

* subQ Ig, also known as subcutaneous immune globulin.

Reference
1. HYQVIA [prescribing information], Westlake Village, CA: Baxter Healthcare Corporation. September 2014

Please see the Detailed Important Risk Information on the adjacent pages and the Brief Summary of HYQVIA Prescribing Information, including Boxed Warning, on the reverse side.

To learn more about HYQVIA, visit www.HYQVIA.com
HYQVIA (Immune Globulin Infusion 10% (Human) with Recombinant Human Hyaluronidase) is the only once-a-month subQ Ig with recombinant human hyaluronidase (hy•la•ron•ah•dase) and Ig. The hyaluronidase temporarily opens the subQ space, allowing a larger amount of Ig to reach the subQ tissue and be absorbed into the bloodstream to help fight infection. It’s the reason you can infuse your monthly dose of HYQVIA using 1 needle, 1 infusion site, 1 time a month.

**INDICATION AND USAGE**

HYQVIA (Immune Globulin Infusion 10% (Human) with Recombinant Human Hyaluronidase) is an immune globulin with a recombinant human hyaluronidase indicated for the treatment of Primary Immunodeficiency (PI) in adults. This includes, but is not limited to, common variable immunodeficiency (CVID), X-linked agammaglobulinemia, congenital agammaglobulinemia, Wiskott-Aldrich syndrome, and severe combined immunodeficiencies.

Limitation of Use: Safety and efficacy of chronic use of recombinant human hyaluronidase in HYQVIA have not been established in conditions other than PI.

**Detailed Important Risk Information**

HYQVIA can cause serious side effects. Call your healthcare professional or go to your emergency department right away if you get:

- Hives, swelling in the mouth or throat, itching, trouble breathing, wheezing, fainting or dizziness. These could be signs of a serious allergic reaction.
- Bad headache with nausea, vomiting, stiff neck, fever, and sensitivity to light. These could be signs of swelling in your brain.
- Reduced urination, sudden weight gain, or swelling in your legs. These could be signs of a kidney problem.
- Pain, swelling, warmth, redness, or a lump in your legs or arms, other than at the infusion site(s). These could be signs of a blood clot.
- Brown or red urine, fast heart rate, yellow skin or eyes. These could be signs of a liver or blood problem.
- Chest pain or trouble breathing, blue lips or extremities. These could be signs of a lung problem.

These are not all the possible side effects with HYQVIA. Talk to your healthcare professional about any side effects that bother you or that don’t go away.

**What is the most important information that I should know about HYQVIA?**

- HYQVIA can cause blood clots.
- Call your healthcare professional if you have pain, swelling, warmth, redness, or a lump in your legs or arms, other than at the infusion site(s), unexplained shortness of breath, chest pain or discomfort that worsens on deep breathing, unexplained rapid pulse, numbness or weakness on one side of the body.
- Your healthcare professional may perform blood tests regularly to check your IgG level.
- With your consent, your healthcare professional may provide blood samples to Baxter Healthcare Corporation to test for antibodies that may form against the hyaluronidase part of HYQVIA.
- Do not infuse HYQVIA into or around an infected or red swollen area because it can cause infection to spread.
- Talk to your healthcare professional if you become pregnant. Women who become pregnant during HYQVIA treatment are encouraged to enroll in the HYQVIA Pregnancy Registry by calling Medical Information at 1-866-424-6724.

**What are the possible or reasonably likely side effects of HYQVIA?**

After HYQVIA infusion a temporary, soft swelling may occur around the infusion site, which may last 1 to 3 days, due to the volume of fluid infused. Mild or moderate pain, redness, swelling, or itching may occur at the site of infusion and generally go away in a few hours.
You may be eligible to save up to $4,000 on HYQVIA

If you are starting or currently receiving treatment with HYQVIA (Immune Globulin Infusion 10% (Human) with Recombinant Human Hyaluronidase) for PI, you may be eligible to save up to $4,000 on your deductible/co-payment/co-insurance costs over 12 months.

To enroll, call us. We’ll take care of the rest.

Terms and Conditions

- To be eligible, patients must: 1) be starting or receiving treatment with (and have a current prescription for) HYQVIA with an IgG9 or IgG10, as applicable, for adult (≥16 years of age) Primary Immunodeficiency (PI); and 2) have commercial insurance that covers medication costs for HYQVIA treatment and allows for co-pay/coupon assistance.
- This manufacturer coupon program is not valid for prescriptions reimbursed, in whole or in part, by Medicaid, Medicare, Medigap, VA, DoD, HICAP, or any other federal or state healthcare programs, including state pharmaceutical assistance programs, and where prohibited by the health insurance provider or by law.
- The coupon program provides a maximum benefit of $4,000 for eligible out-of-pocket costs and expires 12 months from date of activation. Eligible costs include deductible, co-payment, and co-insurance costs for HYQVIA. Non-medication expenses, such as ancillary supplies or administration-related costs, are not eligible.
- Patients are eligible for a maximum benefit of $4,000 in total Baxter support in any 12-month period, including any amount received as part of the GAMMAGARD LIQUID SubQ CoPay Program.
- Acceptance of this offer must be consistent with the terms of benefits provided by patient’s health insurance provider.
- Offer limited to one card per person and expires 12 months from date of activation and may not be combined with any other coupon, discount, prescription savings card, rebate, free trial or other offer.
- This program is only valid for residents of the United States, excluding Puerto Rico and other U.S. territories.

- Baxter reserves the right to change or discontinue this program at any time without notice.
- This is not health insurance.

Patient Instructions

By using this coupon, you are certifying that:
1) You meet the eligibility criteria and have read and agree to the terms and conditions of this program;
2) You will not, at any time, submit any costs for the product dispensed pursuant to this coupon to any government program for reimbursement;
3) You are permitting your personal information, including name, address, phone number, email address, and information related to health insurance and treatment, to be shared with Baxter and/or companies working with Baxter for the purpose of administering this program.
4) You will notify your health insurance provider or any third party payer of the use of this program if required to do so at any time.
5) If your insurance situation changes, it is your responsibility to notify Baxter immediately by contacting the MyigSource Patient Support Program.

For questions about this program, patients and caregivers can call the MyigSource Patient Support Program at (855) 250-5171. For pharmacy instructions please visit www.HYQVIA.com

Local reactions are less likely after the first few infusions. The most common side effects of HYQVIA are headache, fatigue, nausea, fever, and vomiting. Antibodies to the hyaluronidase component of HYQVIA were formed in some patients taking HYQVIA. It is not known if there is any long term effect. In theory, these antibodies could react with your body’s own PH20. PH20 is present in the male reproductive tract. So far, these antibodies have not been associated with increased or new side effects.

What is HYQVIA?

HYQVIA is a liquid medicine containing immune globulin and recombinant human hyaluronidase. HYQVIA contains IgG antibodies, collected from human plasma donated by healthy people. The antibodies help your body to fight off bacterial and viral infections. The hyaluronidase part of HYQVIA helps more of the immune globulin get absorbed into the body to fight infection.

Before starting HYQVIA, tell your healthcare professional if you have or had any kidney, liver, or heart problems, a history of blood clots, because HYQVIA can make these problems worse. Also tell your doctor if you have IgA deficiency or a history of severe allergic reactions to immune globulin (IgG) or other blood products, or are pregnant, trying to become pregnant or are breast feeding.

How should I take HYQVIA?

HYQVIA is infused under the skin (subcutaneously) up to once every 4 weeks. You can get HYQVIA at your healthcare professional’s office, clinic, or hospital. You can use HYQVIA at home. You and your healthcare professional will decide if home self-infusion is right for you. Do not use HYQVIA at home until you get instructions and training from your healthcare professional.

Who should not take HYQVIA?

Do not take HYQVIA if you are allergic to IgG, hyaluronidase, or other blood products, or have IgA deficiency with antibodies to IgA.

To report suspected side effects, contact Baxter Healthcare Corporation at 1-866-888-2472 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

Please see Brief Summary of HYQVIA Prescribing Information on following page, including Boxed Warning.
More free time with HYQVIA

Infusing 1 time a month with HYQVIA doesn’t mean your infusions will take longer. Typically, infusions take less than 3 hours with HYQVIA [Immune Globulin Infusion 10% (Human) with Recombinant Human Hyaluronidase]. Instead, you’ll have more free time.

Please see the Detailed Important Risk Information on the adjacent pages and the Brief Summary of HYQVIA Prescribing Information, including Boxed Warning, on the reverse side.

INDICATION AND USAGE
HYQVIA [Immune Globulin Infusion 10% (Human) with Recombinant Human Hyaluronidase] is an immune globulin with a recombinant human hyaluronidase indicated for the treatment of Primary Immunodeficiency (PI) in adults. This includes, but is not limited to, common variable immunodeficiency (CVID), X-linked agammaglobulinemia, congenital agammaglobulinemia, Wiskott-Aldrich syndrome, and severe combined immunodeficiencies.

Limitation of Use:
Safety and efficacy of chronic use of recombinant human hyaluronidase in HYQVIA have not been established in conditions other than PI.

Selected Important Risk Information about HYQVIA
HYQVIA can cause blood clots. Call your healthcare professional or go to your emergency department right away if you have pain, swelling, warmth, redness, or a lump in your legs or arms, other than at the infusion site(s), unexplained shortness of breath, chest pain or discomfort that worsens on deep breathing, unexplained rapid pulse, numbness or weakness on one side of the body. These could be signs of a blood clot.

Do not use HYQVIA if you are allergic to immune globulin (IgG), hyaluronidase, or other blood products, or have IgA deficiency.

These are not all the possible side effects with HYQVIA. Talk to your healthcare professional about any side effects that bother you or that don’t go away.
Brief Summary of Prescribing Information
HYQVIA [Immune Globulin Infusion 10% (Human) with Recombinant Human Hyaluronidase]

The following summarizes important information about HYQVIA (pronounced Hi-Q-via). Please read it carefully before using this medicine. This information does not take the place of talking with your healthcare professional. If you have any questions after reading this, ask your healthcare professional.

What is the most important information that I should know about HYQVIA?

- HYQVIA can cause blood clots.
- Call your healthcare professional if you have pain, swelling, warmth, redness, or a lump in your legs or arms, other than at the infusion site(s), unexplained shortness of breath, chest pain or discomfort that worsens on deep breathing, unexplained rapid pulse, numbness or weakness on one side of the body.
- Your healthcare professional may perform blood tests regularly to check your IgG level.
- With your consent, your healthcare professional may provide blood samples to Baxter Healthcare Corporation to test for antibodies that may form against the hyaluronidase part of HYQVIA.
- Do not infuse HYQVIA into or around an infected or red swollen area because it can cause infection to spread.
- Talk to your healthcare professional if you become pregnant. Women who become pregnant during HYQVIA treatment are encouraged to enroll in the HYQVIA Pregnancy Registry by calling Medical Information at 1-866-424-6724.

What should I tell my healthcare professional before I start using HYQVIA?
Before starting HYQVIA, tell your healthcare professional if you:

- Have or had any kidney, liver, or heart problems or history of blood clots because HYQVIA can make these problems worse.
- Have IgA deficiency or a history of severe allergic reactions to IgG or other blood products.
- Are pregnant, trying to become pregnant or are breast feeding.

What is HYQVIA?
HYQVIA is a liquid medicine containing immune globulin and recombinant human hyaluronidase. HYQVIA contains IgG antibodies, collected from human plasma donated by healthy people. The antibodies help your body to fight off bacterial and viral infections. The hyaluronidase part of HYQVIA helps more of the immune globulin get absorbed into the body to fight infection.

Who should not take HYQVIA?

- Do not take HYQVIA if you are allergic to IgG, hyaluronidase, or other blood products.
- Have IgA deficiency with antibodies to IgA.

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- HYQVIA is infused under the skin (subcutaneously) up to once every 4 weeks.
- You can get HYQVIA at your healthcare professional’s office, clinic, or hospital.
- You can use HYQVIA at home. You and your healthcare professional will decide if home self-infusion is right for you.

What are the possible or reasonably likely side effects of HYQVIA?

After HYQVIA infusion a temporary, soft swelling may occur around the infusion site, which may last 1 to 3 days, due to the volume of fluid infused.

The following local reactions may occur at the site of infusion and generally go away in a few hours. Local reactions are less likely after the first few infusions: mild or moderate pain, redness, swelling, and itching.

The most common side effects of HYQVIA are headache, fatigue, nausea, fever, and vomiting. Antibodies to the hyaluronidase component of HYQVIA were formed in some patients taking HYQVIA. It is not known if there is any long term effect. In theory, these antibodies could react with your body’s own PH20. PH20 is present in the male reproductive tract. So far, these antibodies have not been associated with increased or new side-effects.

Call your healthcare professional or go to your emergency department right away if you get:

- Hives, swelling in the mouth or throat, itching, trouble breathing, wheezing, fainting or dizziness. These could be signs of a serious allergic reaction.
- Bad headache with nausea, vomiting, stiff neck, fever, and sensitivity to light. These could be signs of swelling in your brain.
- Reduced urination, sudden weight gain, or swelling in your legs. These could be signs of a kidney problem.
- Pain, swelling, warmth, redness, or a lump in your legs or arms, other than at the infusion site(s). These could be signs of a blood clot.
- Brown or red urine, fast heart rate, yellow skin or eyes. These could be signs of a liver or blood problem.
- Chest pain or trouble breathing, blue lips or extremities. These could be signs of a lung problem.

These are not all of the possible side effects for HYQVIA. For more information about HYQVIA, go to www.HYQVIA.com. For more information on patient resources and education, please visit www.immunedisease.com.
decrease until just one or two fingers are in contact with the supportive object.

1) Begin by doing simple weight shifts. With the feet spread shoulder width apart, shift all of your weight to the right leg and slowly come up on the toes on the left. Now shift your weight back to the left leg and slowly come up on the toes on the right.

2) After performing several repetitions of weight shifts, slowly rise up on your tiptoes, then rock back on your heels.

3) Now, march in place by alternately lifting just your heels off the floor. As the activity becomes easier and remains nonpainful, progress to lifting the feet higher and higher off of the floor.

4) Finally, side-step around the kitchen counter in one direction and then the other, by leading with one foot, then bringing the opposite foot next to it. As balance improves, you can take larger steps.

The Right Kind of Exercise Is Key

The exercises presented in this article can be used as a starting point or as a routine to revert to when the neuropathy is aggravated. When it is, foot or hand braces may help to reduce symptoms during regular daily activity, and can be removed to perform non-weight-bearing range-of-motion exercises. If these activities can be performed easily and pain-free, safely experiment with more weight-bearing activities that don’t increase fall risk.

T.K.’s purpose in sharing his story was to inform and warn neuropathy patients and healthcare professionals who treat them of the dangers of over-exercising and/or of performing the wrong kind of exercise due to a tendency to exacerbate neuropathic pain: “Increased pain in exercise and numbness for neuropathy patients are signs that something is wrong and must be investigated. The irony is that I unknowingly caused compression/trauma-induced neuropathic pain while trying to control my blood sugar! Exercise is good, but the wrong type and kind for a neuropathy patient with damaged nerves is dangerous…. If I can prevent just one person from inadvertently causing severe neuropathic pain or more damage to damaged nerves by spreading the word about hazards of the wrong type and kind of exercise, perhaps some good can come from my misfortune.”

Keep in mind that when it comes to neuropathy, it’s all about taking one step at a time.

MATTHEW D. HANSEN, DPT, MPT, BSPTS, is a practicing physical therapist in Utah and president of an allied healthcare staffing and consulting agency named SOMA Health, LLC. He completed his formal education at the University of Utah, Salt Lake City, and has additional training in exercise and sports science, motor development and neurological and pediatric physical therapy.

References


Author’s note: Specially designed home exercise videos can be purchased at www.freedom2move.org or www.sitandbefit.org.