



WESTERN NEUROPATHY ASSOCIATION

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Issue 10

Volume 18

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WESTERN NEUROPATHY ASSOCIATION

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Neuropathy Hope

Hope through caring, support, research, education, and empowerment

A newsletter for members of Western Neuropathy Association (WNA)

HEADLINE NOTE: *Lyme disease is a cause of neuropathy that is often not identified as such. Many people with idiopathic neuropathy may well have chronic Lyme disease. Caught early, it is curable. If not, it settles in for a lifetime. Other diseases that come along with tick bites can be fatal. This issue of Neuropathy Hope is to make all of us more aware of Lyme disease. It can be anywhere not just in known hot spots like Connecticut, much of New England, and other miscellaneous designated areas across the country. Ticks don't follow these boundaries. We never see Placer County as a hot spot, but we know people that have contracted it there. In this issue, we have a story from Folsom in Sacramento County and one from San Diego that illustrates how insidious it is. If you have not been tested with the latest tests for Lyme disease now is the time to request it. We always hear of deer ticks but have you heard of dog ticks carrying it and that wild rabbits figure in transmitting it.*

TOUCHED BY LYME: TICK-BORNE MYSTERY IN FOLSOM, CA

By Dorothy Kupcha Leland

Can you say “tularemia”?

When the eight-year-old boy bent his head down, his mother noticed an odd little bump under his hair. Looking more closely, she saw it was a tick. “We live near wetlands,” she explained to me. “We pull ticks off our dog all the time. No big deal.” She plucked out the tick with tweezers, threw it away and forgot about it.

About a week later, the boy fell ill with a fever, aches and pains. He also had lymph nodes in his neck the size of golf balls. The doctor diagnosed flu and ear infection, and gave antibiotics. The boy got sicker.

Mother took her son back to the doctor and this time told him about the tick bite. No matter, doctor said. The tick had nothing to do with this flu. How do you know? pressed mom. Can't be Lyme, said the doctor. No rash.

What about this weird sore on his head? asked mom. It hurt to the touch and “looked gross.” Doctor thought it might be a staph infection, took a sample, and sent it off to a lab.

A few days later, the lab returned an eye-popping answer: tularemia, also known as rabbit fever. A potentially fatal disease carried by dog ticks (different, bigger ticks than those which harbor Lyme disease). Doctor discontinued Amoxicillin and ordered Cipro. The boy's health improved dramatically. His mom reports he's been totally fine for months now.

It was the first known case of locally acquired tularemia in Sacramento County. According to



public health officer Dr. Glennah Trochet, there have been a few cases of tularemia over the years, all contracted elsewhere. Typically, it would be someone who'd been hunting out of the area, she said. This was different. The boy had a tick bite, a confirmed case of tularemia, and hadn't left home. So Trochet's office asked the vector control district to look for ticks where the boy had been bitten in Folsom. They found 30 dog ticks, and shipped them off to the CDC for testing. Turns out six—20%—were infected with tularemia. “Of course, we don't know what else they might have been infected with,” admitted Trochet. “They only got tested for tularemia.”

I asked her: Now that you know this disease is here, will you continue to look for it? Find out where else it might be?

No, said Trochet. The budget's been cut 60%. There's no money for such tick surveillance. Now

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Roster of Our WNA Information and Support Groups

2019 WNA Board of Directors

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(888) 556-3356
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**Please contact
your group leader or
check your group
page on the
WNA website –
www.WNAinfo.org
to find out about the
topic/speaker for the
upcoming meeting.**

Bev Anderson
Editor

Newsletter Design by

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CALIFORNIA

Auburn

Next meeting Oct. 7
1st Monday, 11 AM
Woodside Village MH Park
12155 Luther Road
Sharlene McCord (530) 878-8392

Gastro Valley

2nd Wednesday, 1:30 PM
First Presbyterian Church
2490 Grove Way (next to Trader Joe)
Joy Rotz (510) 842-8440

Concord

3rd Thursday, 1:30 PM
First Christian Church
3039 Willow Pass Road
Wayne Korsinen (925) 685-0953

Davis

2nd Tuesday, 3:30-5:00 PM
Davis Senior Center, 646 A Street
Mary Sprifke (530) 756-5102

Elk Grove

Next meeting, Oct. 8
2nd Tuesday, 1 PM
Elk Grove Senior Center
8830 Sharkey Avenue
Roger White (916) 686-4719

Folsom

3rd Wednesday, 1:00 PM
Association Resource Center
950 Glenn Dr., Suite 150
Bev Anderson (877) 622-6298

Fresno

3rd Tuesday, 11:00 AM
United Community Church of Christ
5550 N. Fresno St.
Bonnie Zimmerman (559) 313-6140

Grass Valley

2nd Monday, 1:30 PM
GV United Methodist Church
236 S. Church Street
Bev Anderson 877-622-6298

Livermore

4th Tuesday, 10 AM
Heritage Estates
900 E. Stanley Blvd.
Bev Anderson 877-622-6298

Merced

2nd Thursday, 1 PM
Central Presbyterian Church
1920 Canal Street
(Hoffmeiser Center across from the church)
Larry Frice (209) 358-2045

Modesto

3rd Monday, 10:30 AM
Trinity United Presbyterian Church
1600 Carver Rd., Rm. 503
Ray (209) 634-4373

Monterey

3rd Wed., 10:30 AM (odd numbered months)
First Presbyterian Church
501 El Dorado Street
Dr. William Donovan (831) 625-3407

Napa

1st Thursday, 2 PM
Napa Senior Center, 1500 Jefferson St.
Ron Patrick (707) 257-2343
bonjournapa@hotmail.com

Placerville

2nd Wednesday, 1 PM
El Dorado Senior Center
937 Spring Street
Bev Anderson (877) 622-6298

Roseville

2nd Wednesday, 1PM (odd numbered months)
Sierra Point Sr. Res.
5161 Foothills Blvd.
Stan Pashote (916) 409-5747

Sacramento

3rd Tuesday, 1:30 PM
Northminster Presby. Church
3235 Pope Street
Bev Anderson 877-622-6298

San Diego

3rd Monday, 1:30 PM
The Remington Club
16925 Hierba Dr.
Chhattar Kucheria (858) 774-1408

San Francisco

2nd Monday, 11 AM – 12:30 PM
Kaiser French Campus
4141 Geary Blvd. between 6th & 7th Ave.
Rm. 411A - Watch for signs.
Merle (415) 346-9781

San Jose

3rd Saturday, 10:30 AM
O'Conner Hospital, 2105 Forest Avenue
SJ DePaul Conf. Rm.
Kathy Romero (407) 319-2557

Santa Barbara

4th Saturday, 10AM (Sept., Oct., Jan., March, May)
St. Raphael Catholic Church
5444 Hollister Ave., Conference Room
Nancy Kriech (805) 967-8886

Santa Cruz

3rd Wednesday, 12:30 PM (odd numbered months)
Trinity Presbyterian Church
420 Melrose Avenue
Mary Ann Leer (831) 477-1239

Santa Rosa

1st Wednesday, 10:30 AM
Steele Lane Community Center
415 Steele Lane
Judy Leandro (707) 480-3740

Walnut Creek

4th Friday, 10 AM
Rossmoor, Hillside Clubhouse
Vista Room
Karen Hewitt (925) 932-2248

Westlake Village - Thousand Oaks

2nd Monday, 4:30-5:30 PM
United Methodist Church
Youth Classroom 1 (faces parking lot)
1049 S. Westlake Blvd.
Angie Becerra (805) 390-2999

NEVADA

Las Vegas

3rd Thursday, 1 PM
Mountain View Presbyterian Church
8601 Del Webb Blvd.
Barbara Montgomery
lvneuropathygroup@gmail.com

OREGON

Grants Pass

3rd Wednesday 6 – 7:30 PM
Club Northwest
2160 N.W. Vine St.
David Tally 541-218-4418

For information on groups in the following areas or any other place you are interested in finding out about a support group, call Bev Anderson at (877) 622-6298. She is actively trying to open new groups and re-open closed groups. Check with her about a group in your area especially if you would volunteer to be the leader.

New Leadership needed. No meetings for now. Contact for information: Bev Anderson 877-622-6298. **California:** Alturas, Antioch-Brentwood, Bakersfield, Berkeley – Oakland, Carmichael, Clearlake, Costa Mesa, Crescent City, Eureka, Fort Bragg, Garberville, Jackson, Lakeport, Lincoln, Lodi, Madera, Mt. Shasta, Oxnard, Quincy, Redding, Redwood City, Salinas, Santa Maria, San Rafael, Sonoma, Sonora, Stockton, Susanville, Truckee, Tulare-Visalia, Turlock, West Sacramento, Weed, Ukiah, Woodland, Yreka, Yuba City-Marysville. **Nevada:** Reno-Sparks. **Oregon:** Brookings, Medford, Portland, Salem.



Do you have your pumpkin ready for carving? Halloween in some communities seems to be in focus all year long as Halloween stores pop up in towns large and small. The sale of costumes, decorations, and candy is big business. There is even a movement afoot to make Halloween the final Saturday in October, so it is on the weekend making it easier for all to celebrate. Currently, it is October 31 because November 1 is All Saints Day or in days of yore, All Hallows' Day. This would make October 31 "All Hallows' Eve." It got mangled to Halloween by the revelers that sought to be sure all shreds of evil presence were chased away on this eve of the High Holy Day. I'm sure you grew up thinking it was a night of pranks and spookiness; a night to win trick or treats; to get home safely. In my region, now it is houses decorated and party time at schools, churches, and homes for children and nightspots of many varieties for adults. Whatever you choose, have a safe and enjoyable evening.

WARNING: Be sure to watch out for the goblins that are out there trying to tell you that for a sizable amount of money, they can cure your neuropathy. There is a myriad methods that actually either leave you in the same condition or worse when all the treatments are completed. Six months later, you might wonder what that was all about as you may be back to where you were when you started, or you may need a good doctor to help you recover. Some people will not recover from the damage done.

Stem cells are usually offered for \$10,000 more or less. Stem cell treatment is especially dangerous. There is one condition for which medical experts offer stem cells in hospitals or medical centers for children with spinal muscular atrophy (SMA). Research will identify others and the specific means by which they may be applicable. If they are your stem cells, they reintroduce things you may have recovered from already. There is no particular target identified. If it is from another source, you may experience problems that that person had which your body may not be prepared to fight. Medical science can't readily address something growing in you from another body as it is not attached to the system of origin. People have become blind after receiving one of these treatments. Our recommendation is not to fall for the line they give you and save your money.

A date for the start of the pain medication clinical trials we have been following has not been announced. We think that as soon as the Federal Budget is passed and signed, it will likely go forward. The National Institutes of Health (NIH) has to be sure there is support for their work before going ahead with a clinical trial that they are supervising. We joined with several other neuropathy groups to write letters to senators urging them to put more money in the medical research budget for peripheral neuropathy. In the letters I sent to the senators of California, Nevada, and Oregon, I urged them to get the budget signed as critical research on pain medication was being held up. The medicines for dogs, cats, and horses are ready to be released to veterinarians but are not yet released. I suspect that they want the human medication available first as people are prone to try animal medication if there isn't one for humans. For that matter, veterinarians prescribe human medicine for animals as well.

On the back page is an invitation to the International Pain Conference. This conference is a significant event. They expect 450 with lots of exciting exhibitors. Please attend if you are able -- a report to me would be appreciated. It is in Los Angeles this year. Next year, they anticipate it will be Mesa, Arizona.

Please be on the alert for ticks wherever you live. If you have a dog or cat that goes outside, be sure to check them. It is an active time of year for ticks. You can know that the area where you live can well have ticks that cause disease.

Reminder, if there is snow on the ground or snow in the forecast, the support group doesn't meet. We have already had snow on the ground in higher elevations and rain is being forecast for areas where snow does fall. It could happen in October. How much we hope and pray for early rain to ward off any terrible fires in October this year.

Enjoy the beauty of the leaves turning colors and decorating yards with outdoor raking activity opportunities,

Bev

Help With Health Care Challenges
If the number is not in your area, call the one listed and ask for the right number.

Medicare
www.Medicare.gov

...

The Affordable Health Care Act
For current information go to www.HealthCare.gov

...

HICAP Health Insurance Counseling
for seniors and people with disabilities.
www.cahealthadvocates.org/HICAP/
Call (800) 434-0222 to ask a question or to make an appointment.

...

Health Rights Hotline
Serving Placer, El Dorado, Yolo, & Sacramento Counties, regardless where you receive your health coverage.
Tollfree (888) 354-4474 or TDD (916) 551-2180.
In Sacramento, (916) 551-2100.
www.hrh.org.

...

HMO Help Center
Assistance
24 hours a day, seven days a week.
(888) HMO-2219 or (877) 688-9891 TDD

...

DRA's Health Access Project Free publications about the health care, insurance rights and concerns of people with disabilities and serious health conditions. For more information, go to <http://dralegal.org/> and click on "Projects".

DISCOUNTS FOR WNA MEMBERS

The following companies or individuals have agreed to give WNA a discount to WNA members. Give them a call or visit. If you choose to purchase the service or wares of any on this list, pull out your WNA Membership Card and claim the discount.

Anodyne Therapy

Infrared Light Therapy equipment - **12% off all home units.**
Contact: 800-521-6664 or www.anodynetherapy.com

HealthLight Infrared Light Therapy equipment - **5% off Single Boot System and Dual boot system.**

Contact: 888-395-3040 or www.healthlight.us

Auburn

The Footpath

825 Lincoln Way
(530) 885-2091
www.footpathshoes.com
WNA Discount: 10% off the regular price shoes.

Elk Grove

Shoes That Fit

8649 Elk Grove Blvd.
(916) 686-1050
WNA Discount: 20% off the regular price shoes.

Fortuna

Strehl's Family Shoes & Repair

Corner of 12th & Main
1155 Main Street
(707) 725-2610
Marilyn Strehl, C.PED
is a Certified Pedorthic
WNA Discount: 10% off the regular price shoes.

West Sacramento

Beverly's Never Just Haircuts and Lilly's Nails

2007 W. Capitol Ave
Hair - (916) 372-5606
Nails - (916) 346-8342
WNA discount: 10% off the regular price.

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COULD FAMILY HISTORY OF DIABETES IMPACT BONE HEALTH?

— Link with bone mineral density likely mediated by insulin resistance

By Kristen Monaco, Staff Writer, MedPage Today August 22, 2019

Even in women without diabetes, simply having a family history of diabetes could mean different things for health, according to a new study.

In a sample of nearly 900 postmenopausal women with normoglycemia, women who had a first-degree relative with diabetes actually had a significantly higher bone mineral density (BMD) in the lumbar spine compared with women without a family history (0.890 vs 0.85, $P < 0.05$), Lijuan Yang, MD, of the First Affiliated Hospital of Wenzhou Medical University in China, and colleagues wrote in *Menopause: The Journal of The North American Menopause Society*.

These older women with a first-degree relative with diabetes also saw significantly increased BMD in the femoral neck, as well (1.077±0.146 vs 1.034±0.112, $P < 0.01$).

However, both lumbar spine and femoral neck BMD were associated with higher levels of insulin resistance among these women, as measured by the Homeostasis Model Assessment-Insulin Resistance index ($r = 0.068$ and 0.094 , respectively). BMD was also positively tied to higher estimated glomerular filtration rate ($r = 0.227$ for lumbar spine; $r = 0.159$ for femoral neck).

Femoral neck (but not lumbar spine) BMD was also positively linked to higher body mass index ($r = 0.118$) and triglycerides ($r = 0.026$).

"This finding may be related to higher insulin levels in these women with a hereditary predisposition to diabetes, because insulin has a bone-building effect," suggested Stephanie Faubion, MD, medical director of the North American Menopause Society, in a statement.

Faubion, who was not involved with the study, added that although "this sounds like good news, these women are at increased risk for developing diabetes, which is associated with skeletal fragility and increased fracture risk."

As expected, the researchers said, BMD values for the lumbar spine and femoral neck were negatively correlated with age ($r = -0.307$ and 0.197 , respectively), as well as the number of years into menopause ($r = -0.307$ and -0.197 , respectively).

BMD in either location was not correlated with hemoglobin A1c, cholesterol serum uric acid, or C-reactive protein levels.

For the cross-sectional study, Yang's group assessed Chinese women free of diabetes (average age 55), 147 of whom had a parent, sibling, or offspring with diabetes compared with 745 postmenopausal women without a first-degree family history of diabetes. The researchers collected data on clinical characteristics including body weight and fasting blood samples, while BMD was measured with DXA scans.

Although previous studies have already reported a link between type 2 diabetes and BMD, the researchers pointed out that no prior studies have reported a link with familial diabetes history and bone health.

"The potential mechanisms underlying the contribution of a first-degree FHD [family history of diabetes] to BMD remained to be determined," Yang, et al. wrote. "Until now, there has been no direct evidence supporting the contribution of genetic factors to the alteration in BMD in individuals with an FHD ... Individuals with a first-degree FHD inherit susceptibility to insulin resistance, which may further lead to high BMD."

The researchers also pointed out some limitations to the study, one of which was the fact that the team did not assess osteocalcin, levels of procollagen type 1 N-terminal propeptide, or bone strength.

Click here for the American Association of Clinical Endocrinologists' clinical practice guidelines for managing postmenopausal osteoporosis.

Last Updated August 23, 2019

The study was funded by the National Key R&D Program of China and the Wenzhou Science & Technology Bureau.

Yang and co-authors reported no conflicts of interest.

Primary Source

Menopause: The Journal of The North American Menopause Society

Source Reference: Yang L, et al "Association of bone mineral density with a first-degree family history of diabetes in normoglycemic postmenopausal women" *Menopause* 2019; DOI: 10.1097/GME.0000000000001396.

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ALPHA LIPOIC ACID – UPDATE WITH WARNING

I got my new shipment of Alpha Lipoic Acid (ALA), and it looked the same, so I didn't have any concern. A member called me that she had received hers, and there was a sticker on it. It says WARNING: This product contains chemicals known to the State of California to cause cancer and congenital disabilities or other reproductive harm. This notice is a result of Proposition 65 passed in 2016. There is no indication on the label, but I understand it has .5 mg of lead, and the limit is .3 mg.

We are doing further research to find out what this means. It is sold across the nation as it is. I don't know if the sticker is just for California orders or

applied to all containers sent out. I got mine from Vitacost. I just ordered a bottle from Amazon to see if the sticker is on it as well. On the website, there is no indication of such labeling.

I will give you an update in the next newsletter as to what we found as to how dangerous it might be. If other brands don't have it, we will let you know. Meanwhile, do what you think best if you are taking ALA. If you find information you think I should know, please e-mail it to info@pnhelp.org or mail it to me at P.O. Box 276567, Sacramento, CA 95827-6567. Bev Anderson, Editor

DISCOUNTS FOR WNA MEMBERS

Continued from page 4

Neuropathy Support Formula/Nerve Renew (1-888-840-7142) is a supplement that a sizable number of people are taking and reporting it has helped them. The company gives members of WNA a discount and free shipping. The 30-day supply is \$40 (normally \$49.97). It can be auto-shipped monthly for the same. A 3-month supply via auto-ship is \$95.00. They also have a Nerve Repair Optimizer that is available for \$20 with free shipping. Marsha, the manager, said that if anyone wants more information about the product, they can call and ask for her. If she is not readily available, leave your number and she will call you back.

Building Better Balance DVD, Developing Spine Health – The DVDs are \$30 each. The price of a full set (4 DVDs) is \$100 (that's a 20% discount). You can order the DVDs by going to the website www.building-better-balance.com. Shipping is free. You can also order the DVDs over the phone using a credit card. Call (707) 318-4476 and leave a message "Vanessa Kettler, Balance and Fall Prevention www.building-better-balance.com (707) 318-4476

Additional Discounts
Do you know a business that might offer our members a discount? Tell them that they will be listed each month in our newsletter and on our website so our members will know of their generosity and patronize their business. Call (877) 622-6298 or e-mail info@pnhelp.org.

We'll mail an agreement form to the business, and once we have it, we'll add them to this list.

ROGUE STEM CELL CLINICS COME UNDER MICROSCOPE AS CALIFORNIA CONSIDERS OVERSIGHT SF Chronicle

California's medical board on Wednesday took up an issue that scientists and consumer watchdog groups say is critical to patient safety: oversight of the for-profit stem cell industry, which has exploded over the past decade with little state or federal supervision.

The state has come under increasing pressure by stem cell experts to tamp down on the booming consumer industry in recent years, but almost no action has been taken. Wednesday's meeting in Sacramento, attended by a few dozen scientists, patient advocates and stem cell providers, was largely informational, and medical board representatives repeatedly noted that they have limited authority over the industry.

But they also acknowledged concerns that "some providers are deceiving patients and placing them at risk," said Dr. Randy Hawkins, co-chair of the stem cell task force organized by the California Medical Board.

Reports suggest there are close to 1,000 for-profit stem cell clinics in the United States — and more in California than any other state — that sell unproven therapies directly to patients. The therapies are not approved by the Food and Drug Administration and in many cases may be explicitly banned by the FDA, and they are not covered by insurance. Patients typically pay thousands of dollars out of pocket for the therapies.

Neuropathy Hope Editor's note: We plead with you not to take a chance with your life by believing the line these practitioners give you. Save your money. People are finding the harm costs much to treat with medical science not able to deal with the foreign material floating and growing within your body.

THE TRUCK THAT PICKS UP GENTLY USED ITEMS HELPS WNA

Many of you receive a postcard announcing a truck coming to your neighborhood to pick up no longer needed household items. This service is a benefit to help you declutter items that others might find useful. The company is Thrifty Bargains with thrift stores in Chico and Yuba City. The owner has been a long-time member of WNA. I think he joined in the first several years, probably before 2000. He is now a retired CPA. His son, who has a business in Rancho Cordova, assists him. The drivers and an office manager are employees. WNA receives a percentage of the income from that which is picked up.

It has made a significant difference in WNA's operations. At one time, we were over 900 members. During and after the Great Recession of 2008, we have lost members -- we are currently just over 500. Few people other than members contribute to the operation of WNA. We are cautious with our funds, but there are necessary operational costs. We could not keep our doors open without paying for these expenses. We have been very grateful for the help Thrifty Bargains has given us. We are also quite thankful for the faithful support of members. Neuropathy Hope Editor, Bev Anderson

SHOULD THE ELDERLY DISCONTINUE STATINS?

The debate goes on, but Kevin Campbell, MD, believes every patient is different

By Kevin Campbell, MD, August 14, 2019

The role of statin therapy in primary prevention of cardiovascular disease remains a subject of debate for patients older than age 75. While many studies suggest uncertainty about its efficacy and safety among older people, a recent study in the European Heart Journal suggests a strong association between hospital readmission and statin discontinuation in these patients. Kevin Campbell, MD, looks at all the studies and says, hang on, maybe the answer is not so cut and dried.

The opinions expressed in this commentary are those of the author. The following transcript has been edited for clarity:

Statins are good, right? We should put them in the drinking water just like fluoride for teeth, right?

As Lee Corso from ESPN says, not so fast, my friend. Statins have long been established as an effective form of secondary prevention in patients with known coronary artery disease. The use of statins in primary prevention for those older than 75 years of age, however, is far less well established. The data's everywhere.

In the last few years, there have been several published studies suggesting that statins are not necessary in patients over the age of 75. According to some, the risks of statins outweigh the benefits in older patients. The risk can be significant and may include falls, dementia, and myositis. According to one paper in *The Lancet* from 2019, statins do reduce vascular events in all age groups, but this reduction is much less pronounced in those over 75 without a history of prior vascular disease.

Many clinicians struggle every day about whether or not to take existing statin patients in this age group off therapy based on the currently available data. Most societies, including the ACC and AHA, recommend shared decision making in this subgroup of patients. Now, a new study published this past week in the *European Heart Journal* suggests that discontinuing statins in patients older than 75 years of age may actually increase the risk of hospital admissions by 33%. In this study that included almost 120,000 patients from France with a mean follow up to two and a half years, there was a strong association between hospital readmission and statin discontinuation. In fact, the association was far stronger

for cardiac events than for all other vascular events such as a stroke, 46% and 26% respectively. So, what the heck does all of this mean for us and our patients? Well, I believe this situation highlights what needs to change in medicine today.

We need to individualize treatments and provide each patient with the therapy best suited for them. It kind of all goes back to the dichotomy of using big data and predictive analytics to personalize care. As physicians, we need the time to both review the best available data and to understand the needs and unique features of each individual human being we treat. The current system, top heavy administrators and bean counters does not allow for that.

But back to the topic at hand, I digress. For me, the latest in a long line of statin studies simply says that we just don't know all we need to know when it comes to primary prevention in older patients. As always, we need to carefully select the best patients for each drug or therapy we use. If it's working and there are no side effects, I say continue the drug in this age group and continue to monitor for endpoints of safety and efficacy.

If the bad outweighs the good, then take action. Stop the medicine. At the core of medicine is the ability of the doctor to evaluate the risk-benefit ratio together with the patient and make the best decisions going forward.

I really don't think this study changes very much. We need to carefully consider whether it makes sense to remove a patient from a long standing well tolerated therapy. Maybe every new study does not mean that we need to completely change what we are doing and stop what is working for an individual patient. Let's consider each patient and their own needs. Let's be scientists. Let's certainly learn and respect new data. But first and foremost, let's be doctors.

Kevin Campbell, MD, is a cardiologist based in Raleigh, North Carolina, and Chief Innovation Officer at biocynetic. In addition to his weekly video analyses on *MedPage Today*, he is the official medical expert at *WNCN* in Raleigh and makes frequent guest appearances on other national media outlets such as *Fox News* and *HLN*. Used by permission of *WebPage Today*.

Touched By Lyme: Tick-Borne Mystery In Folsom, CA – Continued from page 1

that health officials know there's tularemia around, they can warn the public. And let doctors know to consider it when patients come in with certain symptoms. Trochet sighed. In this time of budget austerity, it's the best her department can do.

So, readers, it's more important than ever to learn to protect yourself and your families from ticks, which can carry all kinds of nasty stuff, not just Lyme. If you are bitten, pay close attention

to whatever symptoms you develop, even if they may not seem related. A good place to start your education is the About Ticks section of the CALDA website.

Oh, and a note to that doctor: Just because there's no rash doesn't mean it's not Lyme.

July 2010 Used by permission of *Lymedisease.org*

SAN DIEGO-AREA TICKS INFECTED WITH TULAREMIA; HIKERS WARNED

Several ticks recently collected along the Lopez Canyon Trail in San Diego County's Sorrento Valley have tested positive for tularemia.

Tularemia, also known as "rabbit fever," is often found in wild hares, rabbits and rodents.

This is the sixth time this year that tularemia-infected ticks have been found in the area. No human cases of the disease have been reported in the county this year.



The disease is most commonly transmitted by ticks that bite infected animals and then bite humans or pets.

(Here's a report from NBC San Diego's Steve Luke, which aired on August 31, 2019: <https://www.nbcsandiego.com/news/local/Tularemia-Rabbit-Fever-Warning-San-Diego-County-Pets-558952641.html> Copy and paste this URL into your browser and it will bring up this report.)

MEDICATION PRECAUTIONS

Be sure you know what each medication and supplement you take is for. Why do you take it? Be careful to list everything you take on the page your doctor's office has you review when you come for an appointment and do review it to be sure it is accurate by name of item, strength, and how much you take. Make sure your doctor looks at it and ask him/her about any you are not sure about. Your doctor can check to see if they see any that conflict with each other. Like Alpha Lipoic Acid can affect thyroid

medication if you take that. You may want to retest the thyroid level after six months of taking Alpha Lipoic Acid. You want to take a dose that gives you a normal or moderate amount of thyroid support. Avoid having so much energy that you have a hard time turning it off to go to sleep. You want to have the right medication for what you need and at the right dosage. This is true for the whole list. If it is a supplement you have chosen, let the doctor know why you chose the dosage you did if it varies from what could be taken. – Bev Anderson, Editor

NEUROPATHY MEDICAL LITERATURE REVIEW By William B. Donovan, M.D.

We can access the National Library of Medicine (NLM) to obtain information on peripheral neuropathy (PN). There are over 100 medical articles a month written on PN.

I review these references and select articles that would appear to be most interesting to us neuropathy sufferers. This is the link to PubMed that will connect to the NLM:

www.ncbi.nlm.nih.gov/sites/entrez

If you are reading this article on the computer, just click on the above link to go there. If you are reading the print edition of the newsletter, type this link into the address bar of the browser on a computer. If you don't know how, get a librarian or friend to help you.

After you get to PubMed, you will see a line that says "Search PubMed" followed by "for" and a space. Every article in the NLM is given a PMID, an eight digit identification number. I will give you PMID numbers of the selected articles. Type the PMID into the space after the "for" and click on "Go" at the end of the space, or press the ENTER key on your keyboard. You will then see a one paragraph abstract of the article appear, as well as links to related articles.

The reader can also go to the WNA website www.pnhelp.org, click on the RESOURCES tab and select MEDICAL LITERATURE REVIEW from the menu to review the archive of summaries that have appeared in this column over recent years.

This month's PMIDs:

- 30673120 This review of the treatment of neuropathic pain across 45 studies, involving 11,906 patients receiving pregabalin (Lyrica™), concluded with the following statement: "Some people will derive substantial benefit with pregabalin; more will have moderate benefit, but many will have no benefit or will discontinue treatment."
- 30681031 This article from Cleveland Clinic emphasizes that, despite the risk, there are some patients with chronic pain—neuropathic, arthritic, cancer, etc.—that require and respond to opiates.
- 30730785 This Iranian study reports on the administration of folic acid (a B vitamin) 1 mg daily for 16 weeks to diabetic polyneuropathy patients. There was a significant improvement in nerve conduction velocity ($p < 0.000$).
- 30892456 This is a review of 9 studies of uremic neuropathy. It was noted that 60-100% of kidney dialysis patients suffer from neuropathy. The importance of early diagnosis and treatment was emphasized to minimize chronicity.
- 30913041 This is a study of 87 women with chronic back pain in whom greater sleep disturbance was associated with greater pain intensity, worsened functioning, greater emotional distress, lower positive affect and higher levels of "catastrophizing."



WESTERN NEUROPATHY ASSOCIATION

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■ PN Information/Advice ■ Support Group Inquiries

(888) 556-3356 ■ Email: admin@WNAinfo.org

■ Membership Information/Inquiries ■ Sponsorships

■ General Organizational Inquiries ■ www.WNAinfo.org

INTERNATIONAL PAIN SUMMIT 2019

You are invited to attend the **International Pain Summit 2019 by the International Pain Foundation**. It will be held November 14-16, 2019 at the UCLA Lustin Conference Center.

If you are a chronic pain patient or caregiver and interested in participating in the conference, you may apply for a scholarship to attend. All individuals who receive an event scholarship will have their registration fee for the conference waived. Parking fees will be your responsibility.

Want to apply for a Patient/Caregiver Scholarship to attend the International Pain Summit 2019? Please fill out this application and be sure to list The Western Neuropathy Association for prompt approval. We have 10 scholarships assigned to WNA so the first 10 applicants will receive the scholarship. We do have a discount code and hotel info can be found on our website at this link for discounted rates. <https://internationalpain.org/ipain-summit-hotel-venue/>



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Our mission is to provide support, information and referral to people with neuropathy and to those who care about them, to inform and connect with the health care community, and to support research.

Dues - \$30 a year

All contributions and dues are tax-deductible.

We are supported by dues-paying members, contributions by members and friends, and occasionally, small grants and fundraisers.

This newsletter is designed for educational and informational purposes only. The information contained herein is not intended to substitute for informed medical advice. You should not use this information to diagnose or treat a health problem or disease without consulting a qualified health care provider. Western Neuropathy Association (WNA) does not endorse any treatments, medications, articles, abstracts or products discussed herein. You are strongly encouraged to consult a neurologist with any questions or comments you may have regarding your condition. The best care can only be given by a qualified provider who knows you personally.



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