



WESTERN NEUROPATHY ASSOCIATION

April 2022
Issue 03
Volume 20

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Neuropathy Hope

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

A newsletter for members of Western Neuropathy Association (WNA)

■ NEUROPATHY DIAGNOSTICS: THREE USEFUL TOOLS FOR SELF-ADVOCACY

Glenn Ribotsky, WNA Board Director

Many of us who have a neurological diagnosis -- including, but not limited to, peripheral neuropathy -- have stories to tell of a long, arduous process to that diagnosis. These stories are full of switchbacks and dead-ends, visits to health professionals of varied specialties who more often than not seem siloed within their own realms and who were reluctant to either take a wider, more comprehensive approach, or refer out to other professionals when impasses were reached.

This set of problems is not unique to neuropathy sufferers, of course; almost anyone with a relatively complex or rare condition could probably tell a similar tale. Thus, all patients would do well to assume a mindset of both self-education and self-advocacy from the start, to be full and empowered partners with our health professionals in our diagnostic and therapeutic journeys.

Knowledge is power, and gaining that knowledge is much easier in an internet age than it might have been for patients a few decades ago; however, easier electronic access also means more easier encounters with a lot of speculative and downright false information. It can be difficult to separate the useful from the not-so-much. Articles published by well-established medical journals or by well-vetted aggregation sites, such as the National Institutes of Health or Emedicine/Medscape, are good places to start, and there are also some fierce autodidacts out there who can contribute considerably to increasing your medical IQ.

Here are three sites that I have found particularly useful in gaining a comprehensive knowledge of neuropathy. They were created for different purposes, but they do have some overlap, and all three are designed to provide a comprehensive link between different types of neuropathies and

the diagnostic testing that would be required to nail down a particular diagnosis.

An Algorithm for the Diagnosis of Peripheral Neuropathy, a clinical diagnostic summary paper by Ann Poncelet, written in 1998 while she was at the University of California at San Francisco. Despite being some two decades old, this is one of the most comprehensive guidelines to diagnosing and determining causes of neuropathy in the medical literature—so much so that it is part of the archives of the American Academy of Family Physicians (and is available for free at their website www.aafp.org/afp/1998/0215/p755.html). Not only is the paper quite readable even for those without extensive medical background, but the presence of a number of flow charts detailing what questions to ask initially, what testing to try based on answers to those, and where to further proceed, depending on the results of those tests, makes this paper something every patient should look over (not to mention their doctors). The tables breaking down neuropathy types by speed of onset, type of fiber involvement, and body parts typically affected are also valuable resources for narrowing down possible causes. One would be well served to have this article easily accessible at all medical appointments (especially if the appointment is not with a neuromuscular specialist).

White Paper: Laboratory Diagnosis of Peripheral Neuropathy, a clinical application paper that is a joint effort by Quest Diagnostics and Dr. Norman Latov, founder of the Cornell-Weill Center for Peripheral Neuropathy and world-renowned expert in neuropathies, particularly those caused by immune processes. This paper lists a large number of common causes of neuropathy and the

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www.WNAinfo.org
to find out about the
topic/speaker for the
upcoming meeting.

Katherine Stenzel
Editor

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NEUROPATHY SUPPORT GROUPS – APRIL SCHEDULE

*Sharing a fear makes it smaller,
Sharing a success makes it bigger,
Sharing a problem makes it easier to bear.*

In-Person Support Group Meetings

April 4 (Monday)

Auburn CA Support Group

11:00 am PST, Woodside Village Mobile Home Park, 12155 Luther Road

Contact: Sharlene McCord (530) 878-8392, Kathy Clemens (916) 580-9449, kaclemens@earthlink.net

****Other Support Groups are actively deciding how to reform after the break during Covid-19.****

Virtual Support Group Meetings (nationwide)

April 9 (Saturday)

11:00am-1:00pm PST/1:00pm-3:00pm CST; Host – Katherine Stenzel

Meeting ID: 893 4117 5040 Passcode: 123557

April 20 (Wednesday)

10:30am-11:30am PST/12:30pm-1:30pm CST; Host – Glenn Ribotsky

Meeting ID: 863 2548 2422 Passcode: 609857

April 23 (Saturday)

11:00am-1:00pm PST/1:00pm-3:00pm CST; Host – John Phillips

Meeting ID: 818 9099 1051 Passcode: 227946

First time to attend a Virtual (Zoom) meeting? Here's how to join from a web browser.

Google Chrome

1. Open the Chrome browser.
2. Go to **join.zoom.us**.
3. Enter your meeting ID, then enter the password.
4. Click **Join**.
 - If this is your first time joining from Google Chrome, you will be asked to open the Zoom desktop client to join the meeting.
 - (Optional) Select the **Always open these types of links in the associated app** check box to skip this step in the future.
 - In the pop-up window, click **Open Zoom Meetings (PC)** or **Open zoom.us (Mac)**.

Safari, Microsoft Edge or Internet Explorer

1. Open browser.
2. Go to **join.zoom.us**.
3. Enter your meeting ID followed by the password.
4. Click **Join**.

Contact Katherine Stenzel at klstenzel@hotmail.com if you have a question.

CYCLING FOR NEUROPATHY Bill Porter, Richmond, VA

Peripheral Neuropathy sufferer Greg Maassen, a Dutch cyclist, is raising neuropathy awareness by riding his e-bike from Washington D.C. to San Francisco starting April 2nd. Check out his website ebiketour.org and watch him travel across America. Donations are also accepted that will benefit PN research.

WESTERN NEUROPATHY ASSOCIATION 2022 ANNUAL VIRTUAL CONFERENCE

Save the Dates

Friday, May 13 and Saturday, May 14

Email notification sent when registration open or check website at WNAinfo.org

EDITOR'S NOTE Katherine Stenzel, Editor, WNA Board Director

Having a Peripheral Neuropathy diagnosis means doing a lot of self-advocacy. We must learn about our condition so that we can talk wisely to our medical team as an equal partner. This issue's front-page article by our newest Director, Glenn Ribotsky, will help in that regard. Let me know if you have questions about these tools and I will coerce Glenn into having a Q & A session! Continuing with being educated and informed, there is a new lidocaine topical treatment that provided significant pain relief in a clinical trial. And when patches and pills don't work for relieving pain, maybe the brain can help. Research has shown that practicing mindfulness may help to lessen the effect that pain has on our daily life. Check out the article on page 6 and 7 for more information. And lastly, in the spirit of self-advocacy and self-help, is something we can control – exercise. Four simple exercises described on page 5 can help improve balance with just minutes of practice each day.

Two really interesting articles caught my attention for this month. Did you know that scientists can determine pain severity in those with diabetic peripheral neuropathy by looking at corneal nerve fiber loss? Apparently, the eye sees everything! And lastly, it's possible that a defective immune response has caused peripheral neuropathy in some long-term Covid-19 patients. This realization could lead to new research for neuropathy treatments. Read page 4 for both.

As always, send your comments, corrections and suggestions to klstenzel@hotmail.com

...Katherine

Neuropathy Diagnostics: Three Useful Tools For Self-Advocacy – Continued From Page 1

appropriate blood tests that can provide evidence for those diagnoses. It is particularly useful regarding those neuropathies caused by somewhat obscure autoantibodies to components of peripheral nerve, a number of them first identified through research at the Cornell-Weill Center and about which many doctors may have little knowledge. It is accessible through https://testdirectory.questdiagnostics.com/test/test-guides/WP_LabDiagnosis_PeripheralNeurop/laboratory-diagnosis-of-peripheral-neuropathy.

The Liza Jane spreadsheets. These are a series of charts designed by a neuropathy sufferer to chart one's lab and diagnostic results over time, to more readily notice patterns and additional avenues for testing. As the charts at www.lizajane.org themselves indicate, these are dedicated "to all fellow patients with chronic illnesses (examples: neurological, tick-borne illnesses, chronic fatigue) and to all patients with unexplained symptoms." Though originally compiled to help with those who might have a neuropathy diagnosis—and posted to the peripheral neuropathy forums at neurotalk.org, itself an excellent source of information—they are useful, really, for any medical condition, helping track all test results in one place (one should, of course, always request one's test results). It also contains sections for listing one's medications and supplements.

Certainly, these are not the only documents one can use to increase knowledge of neuropathy or track the diagnostic journey. But they are comprehensive, clear, and concise, and their use makes one a much more informed and better patient.

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

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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LIDOCAINE MEDICATED PLASTER EFFECTIVE FOR LOCALIZED NEUROPATHIC PAIN

Jessica Nye, PhD, ClinicalPainAdvisor.com, February 24, 2022.

A 700 mg 5% lidocaine medicated plaster (LMP) was found to be an effective treatment for localized peripheral neuropathic pain (I-PNP), according to study results published in *Pain Management*.

Patients included in the German Pain eRegistry with I-PNP who used LMP were matched with those using recommended oral first-line therapies. The oral medication cohort received antiepileptic drugs, selective serotonin-norepinephrine reuptake inhibitors, or tricyclic antidepressants. In each cohort, patients were receiving treatment for postherpetic neuralgia, diabetic polyneuropathy, postsurgical neuropathy, and other indications.

At weeks 4, 12, and 24, significantly more LMP recipients reported a reduction of greater than or equal to 30% or greater than or equal to 50%

in average pain intensity compared with oral medications. In addition, patients using LMP reported more improvements to disability, quality of life impairment, physical and mental quality of life, and clinical pain phenotype.

"LMP treatment provided significantly better pain relief and greater improvements in daily functioning and quality of life than [oral medications]," the study authors wrote.

Reference

Überall MA, et al. Localized peripheral neuropathic pain: topical treatment with lidocaine 700 mg medicated plaster in routine clinical practice. *Pain Management*. Published online January 10, 2022. doi:10.2217/pmt-2021-0117

PAIN SEVERITY IN DIABETIC NEUROPATHY CORRELATES WITH CORNEAL NERVE FIBER LOSS

Jessica Nye, PhD, ClinicalPainAdvisor.com, February 24, 2022.

Increasing severity of neuropathic pain was found to have a positive association with corneal nerve fiber loss among patients with painful diabetic neuropathy (PDN), according to study findings published in the *European Journal of Neurology*.

Patients with diabetes and healthy control participants underwent an assessment for clinical, neurological, and ophthalmic features. The study population was stratified by severity of neuropathic pain, and clinical differences were compared. Corneal sensitivity was significantly higher among the most severe pain cohort compared with all other groups.

The study data indicated that PDN could be detected with ophthalmic examination and showed

that PDN progression increases corneal nerve fiber loss. (Details in original article referenced below)

"...[I]t is shown that [corneal confocal microscopy] has good diagnostic accuracy for PDN and detects progressively greater small nerve fiber loss in patients with increasing severity of PDN," the study authors wrote. "[Corneal confocal microscopy] may have clinical utility as a rapid and objective test for the assessment of PDN."

Reference

Kalteniece A, Ferdousi M, Azmi S, et al. Corneal Nerve Loss Is Related To The Severity Of Painful Diabetic Neuropathy. *Eur J Neurol*. 2022;29(1):286-294. doi:10.1111/ene.15129

NERVE DAMAGE MAY EXPLAIN SOME CASES OF LONG COVID

(suggested by John Phillips, Houston, TX and Karen Polastri, WNA Vice President)

A new study led by researchers at Massachusetts General Hospital (MGH) and the National Institutes of Health found that 59% of patients with long-COVID had evidence of peripheral neuropathy, possibly caused by a defective immune response, a finding that could point to new treatments.

Reference

Anne Louise Oaklander, Alexander J. Mills, Mary Kelley, Lisa S. Toran, Bryan Smith, Marinos C. Dalakas, Avindra Nath. Peripheral Neuropathy Evaluations of Patients With Prolonged Long COVID. *Neurology - Neuroimmunology Neuroinflammation*, 2022; 9 (3): e1146 DOI: 10.1212/NXI.0000000000001146

CAN YOU STOP NEUROPATHY FROM GETTING WORSE? THE SHORT ANSWER FROM A NEUROLOGIST

Benjamin Claytor, M.D., [clevelandclinic.org](https://health.clevelandclinic.org/can-you-stop-neuropathy-from-getting-worse/), <https://health.clevelandclinic.org/can-you-stop-neuropathy-from-getting-worse/>

Slowing or stopping the progression of neuropathy is really dependent on the underlying cause of it. Some types of neuropathy are treatable, others are not, and most fall somewhere in the middle of this spectrum (there are over 100 different types):

- Hereditary/genetic neuropathies tend to fall to one end of the spectrum and are often difficult to slow and improve. But just because there isn't a specific treatment does not mean there aren't workarounds to improving pain and managing symptoms.
- Autoimmune neuropathies tend to fall on the other end of the spectrum and are typically responsive to treatment and management.
- Diabetic neuropathies, medication-induced neuropathies, and a variety of others make up the middle portion of the spectrum. Treatment and pain control often varies depending on the cause and other personal factors.

For many people, lifestyle changes and management are usually successful in slowing the progression of neuropathy.

These changes can include:

- Losing weight.
- Exercising.
- Monitoring blood sugar levels.
- Not smoking.
- Limiting alcohol.
- Making sure injuries and infections don't go unnoticed or untreated (this is particularly true for people who have diabetic neuropathies).
- Improving vitamin deficiencies.
- Managing stress and practicing mindfulness.
- Attending physical therapy.
- Wearing orthopedic braces to compensate for weakness and balance loss.
- Making sure your environment includes assistive devices (like canes or walkers) and is well-lit to reduce your fall risk.

Still, the most important thing you can do to slow the progression of neuropathy is to see your doctor and discuss your care plan. Together you can manage symptoms, reduce pain and get you back to enjoying your life.

FEAR OF FALLING - FOUR EASY EXERCISES TO HELP IMPROVE YOUR BALANCE

<https://health.clevelandclinic.org/fear-of-falling-4-easy-exercises-to-help-improve-your-balance/>

Doing daily balance exercises can help you improve your lower body strength and your ability to control and maintain your body's center of gravity. Here are four balance exercises you can do anytime, anywhere. Best of all, it only takes about five minutes of your time. Complete one set of each exercise at least once a day.

1. Single leg stance

Stand on one leg and maintain your balance. (You can use a sturdy chair for support.) Then repeat with the other leg.

- Repeat: 1 time
- Hold: 10 seconds

2. Tandem stance and walk

Stand with one foot directly in front of the other so that the toes of one foot touch the heel of the other. Progress forward by taking steps with your heel touching your toes with each step. Maintain your balance.

- Repeat: 3 times
- Hold: 1 second

3. Single leg stance-forward

Stand on one leg and maintain your balance. Next, hold your free leg out in front of your body. Then return to original position. Maintain a slightly bent knee on the stance side. Repeat with the other leg.

- Repeat: 1 time
- Hold: 10 seconds

4. Single leg stance-lateral

Stand on one leg and maintain your balance. Next, hold your free leg out to the side of your body. Then return to original position. Maintain a slightly bent knee on the stance side. Repeat with the other leg.

- Repeat: 1 time
- Hold: 10 seconds

Work with your doctor

No matter how simple these exercises may seem, it's always a good idea to talk to your doctor before beginning any exercise program. He or she may have other suggestions for ways you can improve your balance and stay active as you age. Then once you have the go-ahead, take the time to do these easy exercises every day. They can help you stay on your feet for the long-term.

DISCOUNTS FOR WNA MEMBERS

Continued from page 4

Neuropathy Support Formula/Nerve Renew

(1-888-840-7142) is a supplement that a 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. They now have Nerve Renew Fast Acting Cream at \$20 for WNA members. It reportedly takes the edge off numbness.

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 888-556-3356 or email admin@WNAinfo.org.

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

MINDFULNESS AND CHRONIC PAIN - BEING PRESENT DOESN'T HAVE TO HURT

Aryanna Denk, healthline.com, September 15, 2021.

If you live life with chronic pain, you've probably gotten some unsolicited advice. "Have you tried meditation?" your hairdresser asks. "Having a positive mindset changes everything," says your co-worker.

Of course, this type of comment usually has the opposite effect. These well-meaning words can make it seem as though the pain is all in your head. The reality is that a mindful approach to pain has nothing to do with denying your experience. It's all about getting real with it, accepting it, and even embracing it. Far from "meditating the pain away," mindfulness is a way to be more present with whatever you're feeling. Here's what you need to know about how mindfulness can help support you when you're living with chronic pain.

Sitting with Pain

When many people hear the term "mindfulness," they think about gratitude, letting go of negativity, doing yoga, and "good vibes only." This caricature stems from **toxic positivity**, the social requirement to be happy all the time. It has very little to do with real mindfulness. One of the most important pillars of mindfulness is simply to acknowledge things as they are. You can't do that if you're denying your pain.

It doesn't mean you have to plaster on a cheery, inspirational manner simply because people who are uncomfortable with disability or chronic pain may want that from you. In reality, mindfulness is truly about recognizing, reflecting, and regulating.

A main element to mindfulness is not assigning judgment to your reality. When you live with chronic pain, that reality often includes discomfort. This is why mindfulness and chronic pain can sometimes seem contradictory.

As the body experiences pain, it can go into survival mode. It sends signals to the brain to say that something's not right and it needs to be fixed right away. More often than not, it's easier to distract the brain and avoid thinking about pain than it is to actually sit through it. While this is an important tactic in moments of extreme distress, it can also create a gap in the connection between the body and mind. Mindfulness can begin to heal this gap.

According to research, mindfulness has been shown to:

- ease anxiety and depression
- encourage kindness and compassion toward the self and others

- reduce the impact of pain on everyday life
- help develop coping strategies for chronic pain

These results are promising for people with chronic pain.

At the same time, it's important to note that using mindfulness to achieve a specific goal can actually take you out of the present moment, preventing you from accepting what is. While mindfulness can be an effective tool, the essence of mindfulness is about not being attached to the results.

What mindfulness really means

Before looking at the intersection of chronic pain and mindfulness further, we must first understand what mindfulness actually is outside of this societal perception.

Mindfulness is a practice that's existed for thousands of years and has been a staple in many different religions, including Hinduism and Buddhism. Though the practice is unique for each individual, the key concepts behind it remain relatively constant. These concepts include:

- awareness of the here and the now
- self-reflection
- self-regulation
- non-judgment and compassion

Being aware of the present

To begin, being mindful means being aware of this moment in time. It's natural for our brains to bring up the past or jump forward into the future. "Should haves" and "what ifs" become repeating anxieties that aren't easy to block out. Instead of ruminating about things out of your control, the idea with mindfulness is to acknowledge what's happening right now.

Sometimes, running through the five senses over and over again can train your brain to be more present in general. When you find that thoughts about the past and future lessen, you can move toward introspection. Remember that this isn't going to be a one-and-done process, or even a linear one. The nature of the mind is that it loves to think. Don't be discouraged as you continue to bring yourself back to the present movement each time your thoughts drift away—and they will. This process is the whole point.

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DOD'S PRMRP NEUROPATHY RESEARCH AWARDS

https://www.foundationforpn.org/dods-prmrp-neuropathy-research-awards/?blm_aid=113556

The Department of Defense's (DoD) Peer-Reviewed Medical Research Program (PRMRP) has determined the grant applications that it wishes to award in fiscal year 2021 (FY21). In this first year that applications were accepted for research in peripheral neuropathy, 41 applications out of over 1000 applications received focused on peripheral neuropathy. DoD is recommending awarding a grant for seven of these applications, for a total amount of \$8 million in funding! DoD will announce the details of the winning neuropathy research awards in the coming weeks.

Mindfulness And Chronic Pain - Being Present Doesn't Have To Hurt – *Continued from page 6*

Turning the awareness inward

Self-reflection involves looking inward and noticing the physical, emotional, and mental sensations that are occurring. This is where mindfulness with chronic pain can become a little daunting. When you're constantly in pain, it's normal to want distractions from it. Acknowledging the aches, the sharpness, the discomfort 24/7 is exhausting. However, taking a small amount of time out of your day to check in with yourself can bring a sense of healing. Having strong self-awareness can help you to recognize when something is amiss or even to differentiate between the types of pain you're feeling. Is it an ache? Is it coming from one place in particular? These are all helpful things to be aware of, not only for the sake of self-knowledge but to strengthen your sense of self-advocacy.

Developing a sense of agency

From self-reflection comes self-regulation. This is where the effects of mindfulness start to fully come into play. Guided breathing or progressive relaxation are great ways to work toward self-regulation. During this process, the body and mind are able to connect. You might feel more relaxed emotionally. As a result, your body could follow suit.

Neutrality, non-judgment, and compassion

Lastly, being mindful means being neutral – to an extent. When it comes to pain, we automatically think of those sensations as negative or something “bad.” While pain definitely feels bad, it doesn't need to have this attribute. Your body is not “wrong” or “bad” for feeling pain. Rather, it simply... feels it. The point of recognizing and releasing judgment is to let go of the natural human impulse to categorize and react to whatever it is we're feeling.

Accepting one's current reality of chronic pain can help to ease the grieving process that often comes with a lifelong condition. It can also help those going through pain to process their experiences.

How to practice mindfulness your way

Now let's look at how to realistically apply mindfulness practice to your everyday life. There are three things to keep in mind:

- Environment matters.
- Comfort isn't always possible.
- Set your own goals.

Environment matters

The great thing about mindfulness is that it can be practiced anywhere: in a car, at work, in the middle of the floor. Still, choosing the right environment for your own personal mindfulness practice can make a huge difference. There's no right or wrong place to practice mindfulness, but when you have chronic pain, it's important to prioritize an environment that will work well with the needs of both your body and mind.

One way to acknowledge your environment and ground yourself as preparation for your mindful practice is to do the 5-4-3-2-1 technique.

- Take a look at your surroundings.
- Tune in to all five senses.
- Ask yourself, “What do I see? What do I hear? What do I smell?”
- Sit with the sensations in the body as they arise, even those that are painful or uncomfortable.

Comfort isn't always possible

Even with the right environment, being entirely comfortable is not always an obtainable goal, especially on bad pain days. In these moments, remember that mindfulness asks you to embrace your reality as it is in the present moment. For those moments when you just can't find relief from pain, it's OK to embrace the discomfort. Don't assign judgment to it.

Set your own goals with mindfulness

You should always set your own goals with mindfulness rather than taking the advice of others who don't know what you're experiencing. If your goal is pain relief, go for it. If it's body awareness, right on. If it's simply a way to dedicate 5 minutes to yourself, then that's what it should be. Your reasons are valid.

Takeaway

In the end, your mindfulness practice will likely take you places you didn't expect. Stay in tune with yourself and your needs through the journey. Mindfulness, like life, is a process. Wherever you end up, know that it's not the end. It's just another beginning.



WESTERN NEUROPATHY ASSOCIATION

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Western Neuropathy Association 2022 ANNUAL VIRTUAL CONFERENCE

Save the Dates
Friday, May 13 and Saturday, May 14

WALKING POLES FOR BALANCE, STABILITY AND CONFIDENCE!

WNA Member Beth Copper, from Houston, TX, purchased walking poles for her brother, WNA member Ron Copper, who stays with her during the winter months instead of his home in western Pennsylvania.

"I chose these for Ron so that he could stand more upright while walking our neighborhood streets and paved greenbelt pathways rather than use his walkers which cause him to lean over too far. He needs a little help with balance and these seem to give him more stability and confidence. They are lightweight aluminum but sturdy with hand grips and are adjustable for different heights. I read that they could help with posture and core strength with regular use. I think it also helps to alert other walkers and bicyclists on the greenbelt path to be more cautious when walking or cycling past him as they approach from behind very quickly and quietly sometimes!"

ACTIVATOR™ Poles for Balance and Rehab / Stability / Walking / Nordic Walking Poles

https://smile.amazon.com/dp/B01JQDFLKK?psc=1&ref=ppx_yo2_dt_b_product_details

Remember to order on smile.amazon.com and designate Western Neuropathy Association as the supported Charity/Non-Profit.



Western Neuropathy Association (WNA)

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tax-exempt corporation.

Katherine Stenzel, Editor

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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.

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