



Living Well with Chemo-Induced PN
Wellness Place, Palatine IL
Dec. 8, 2010 Q & A

Q: I have CIPN. A neurologist said that I may have too much B6 in my system. Is that possible? **It is possible if you have been taking large doses of b6 supplements for a long period of time. Do not exceed more than 100mg/day. The recommended daily amount of B6 for adults ranges from 1.3-1.7 mg. Always discuss supplement intake with your physician treating your PN. For more information on Vitamin B6, here is a great resource: <http://ods.od.nih.gov/factsheets/VitaminB6-HealthProfessional/> .**

Interesting fact: many energy drinks/shots contain high doses of Vitamin B6 (pyroxidine), as much as 40 mg per drink or 2000% above the daily recommended amount.

Q: Does massage therapy help neuropathy in my feet? **Not all treatments work for everyone; any one treatment may work for you, but not someone else. Massage therapy will not cure neuropathy, but may attenuate some symptoms such as cramping or certain types of pain. It may also improve circulation during the massage which may well feel good. Overall, massage therapy can be beneficial by alleviating stress and promoting relaxation, both of which may be helpful as part of a comprehensive wellness strategy.**

Q: I have no reflexes in my ankles. Could physical therapy help? **We recommend physical therapy for many different reasons. In balance rehabilitation, physical therapy can help re-train reflexes toward more efficiently managing perturbations. Sometimes people have little to no reflexes to begin with. If you do not have any reflexes, physical therapy may be applied toward muscle strengthening and/or consideration of assistive equipment or devices (ankle bracing to reduce falling, walking with a cane). Always consult with your physician and a physical therapist who will assess you and give you a treatment plan.**

Q: Restless Leg Syndrome – Can you get it from PN? **Yes, but there are many causes of RLS so consult with your physician to make sure no further testing is needed**

Q: I can't convince my doctors (internist and neurologist who did EMG) that I have PN. What can I do? **If you feel that your needs are not being met you should seek out another opinion.**

Q: Why do my feet & fingers feel 'numb', instead of less, when I'm relaxed and prone (in bed) or more cramping in the middle of the night? **When the body relaxes at night, the nerves are not distracted as they are during the day which can cause numbness. Many people with PN report that their symptoms are worse at night. This can render a person unable to achieve a restful night's sleep and actually dread bedtime. Some options could include: medication adjustment, relaxation, and guided imagery (<http://tinyurl.com/4yy5qlz>).**

Q: Please address post-mastectomy surgical neuropathy (around and under newly constructed breast). There is burning and hard tingling on my back; are the nerves damaged forever? **The best thing to do would be evaluated by a neurologist. They may need to run some tests, such as an EMG/NCS to help determine a diagnosis. A significant number of women who undergo breast cancer surgery (mastectomy or breast conserving) experience some degree of residual pain or discomfort. Pain typically occurs near incisions, arms, armpits, shoulders and back on the affected side. One study suggests that 50% of cases resolve over time. However,**

symptoms may persist or only ease slightly over time. There are many possible causes of neuropathic symptoms. Therefore a thorough evaluation by a neurologist is recommended. Helpful tip: Some women report that wearing a compression bra or Ace bandage around the affected area helps alleviate their discomfort.

Q: Does the drug Neurontin help PN? If it works for you then, yes. Different therapies work for different people. Remember, just because something did or did not work for you, does not mean it will not work for others. Neurontin can help alleviate the pain and uncomfortable sensations of neuropathy and is typically taken by mouth 3 times per day. The maximum adult daily dose is 3600 mg per day. Neurontin may bring noticeable relief for some people, soon after starting treatment. Others may find relief after a couple of weeks, as their dose is increased by their physician to an effective level. Some people may not experience any symptom relief. For others, the side effects of Neurontin might prevent them from increasing their dose to a level where they might otherwise find relief. As the response is quite individual it is important to communicate with your physician how it is working (or not) for you.

Q: Are calcium and magnesium best by infusion rather than oral supplements? Speak with your oncologist to understand the benefits of each.

Q: Can cramping in the hands and lips be part of PN? Cramping can be seen in peripheral neuropathy and usually affects the calves or the feet. Make sure to be well hydrated and talk to your physician as there are many reasons for cramps.

Q: We've been talking about 'chemo-induced' PN. What about radiation therapy; does it cause PN, too? Although it is different Radiation Therapy can cause a neuropathy at (or near) the SITE of the radiation, but generally not the systemic reaction that Chemotherapy would cause. Neuropathy that develops as a result of radiation therapy can develop anywhere from 5-24 months after treatment. Neuropathy can be caused by radiation damaging the nerves directly or due to fibrosis or thickening of adjacent tissues as the body heals from the treatment. Advances in radiation therapy may help reduce the incidence of radiation related PN.

Q: I was done with chemo 12 years ago & my PN just surfaced gradually within the last 5-6 years. Is this common? If I don't treat it, will it get worse since I no longer am receiving chemo? Check with your primary care physician or neurologist for other causes of neuropathy, generally a Chemo induced neuropathy would have occurred shortly after the treatment itself, not years later.

Q: Are there any studies on the use of glutathione? Yes, there is one entitled "Glutathione in Preventing Peripheral Neuropathy Caused by Paclitaxel and Carboplatin in Patients With Ovarian Cancer, Fallopian Tube Cancer, and/or Primary Peritoneal Cancer" which is currently recruiting. There are 253 sites participating across the U.S., 35 of which are in Illinois. For more information, please visit <http://clinicaltrials.gov/ct2/show/NCT00979082?term=glutathione+neuropathy&rank=1>

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