

Implementing the Consequences of Neuropathies with Complementary Therapies and Peripheral Treatment Options

Lorenzo Klein*

Department of Oncology Nursing, University Hospitals Leuven, Leuven, Belgium

Lorenzo Klein, Department of Oncology Nursing, University Hospitals Leuven, Leuven, Belgium, E-mail: lorkle@UHL.be

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Description

Neuropathies refer to a group of disorders characterized by dysfunction or damage to peripheral nerves. These conditions can arise from various causes, including metabolic disorders, infections, autoimmune diseases, traumatic injuries, and genetic predispositions. Neuropathies manifest in diverse ways, ranging from mild sensory disturbances to severe motor impairments, and they can significantly impact an individual's quality of life. Peripheral neuropathy is the most common type of neuropathy, affecting the peripheral nerves outside the brain and spinal cord. Peripheral neuropathy can result from diabetes, autoimmune diseases like Guillain-Barre syndrome, infections such as HIV or Lyme disease, or exposure to toxins like chemotherapy drugs. Diabetic neuropathy is a leading cause of neuropathy, particularly affecting the legs and feet. It usually develops gradually over time and can lead to symptoms such as numbness, tingling, and pain in the affected areas. Autonomic neuropathy affects the autonomic nerves that control involuntary bodily functions such as heart rate, digestion, and bladder control. It can result in symptoms like dizziness, fainting, gastrointestinal issues, and sexual dysfunction. Cranial neuropathies involve damage to the cranial nerves, which emerge directly from the brain and control various sensory and motor functions of the head and neck. Conditions like Bell's palsy, trigeminal neuralgia, and optic neuritis are examples of cranial neuropathies. Hereditary neuropathies have a genetic basis and are inherited from one's parents. Charcot-Marie-Tooth disease is one such example, characterized by progressive weakness and wasting of the muscles, particularly in the legs and feet.

The symptoms of neuropathies can vary widely depending on the type and severity of the condition. Common symptoms include, numbness or tingling sensations, muscle weakness or paralysis, sharp or burning pain, sensitivity to touch or temperature changes, loss of coordination or balance, muscle cramps or spasms, difficulty with fine motor skills, autonomic dysfunction. Diagnosing neuropathies often involves a combination of medical history review, physical examination, neurological tests, and diagnostic imaging studies such as nerve conduction studies or electromyography. Blood tests may also be conducted to check for underlying metabolic or autoimmune disorders. Treatment strategies for neuropathies aim to manage symptoms, slow disease progression, and address underlying causes. Depending on the specific neuropathy, treatment may involve, pain relievers, anti-seizure