



What increases the risk of developing diabetic neuropathy?

- Having often high blood sugar
- Having a high level of triglycerides (fat) in the blood
- Having high blood pressure
- Having excess body weight
- Smoking or vaping

Take action to reduce the risk of developing diabetic neuropathy!

The main preventative measure is to **maintain blood sugar within target levels**.

In addition, it is important to adopt healthy lifestyle habits, such as:

- doing regular exercise;
- adopting a healthy and balanced diet;
- managing weight, if applicable;
- reducing alcohol consumption, if applicable;
- quitting smoking or vaping, if applicable.

If you already have a neuropathy, these measures can also help stop or slow its progress.

Resources

**Association des infirmières et infirmiers
en soins podologiques du Québec**
aiispq.org

**Association des infirmières et infirmiers
auxiliaires en soins podologiques
du Québec**
aiiaspq.org

Ordre des podiatres du Québec
ordredespodiatres.qc.ca

**Association québécoise
de la douleur chronique**
douleurchronique.org

Questions about diabetes?
InfoDiabetes Service
514-259-3422
1-800-361-3504
infodiabete@diabete.qc.ca

Diabetes School
Universi D
universi-d.com

Diabetes Québec
diabete.qc.ca

Diabetes Québec

Nerve health and diabetes

Understanding diabetic neuropathy

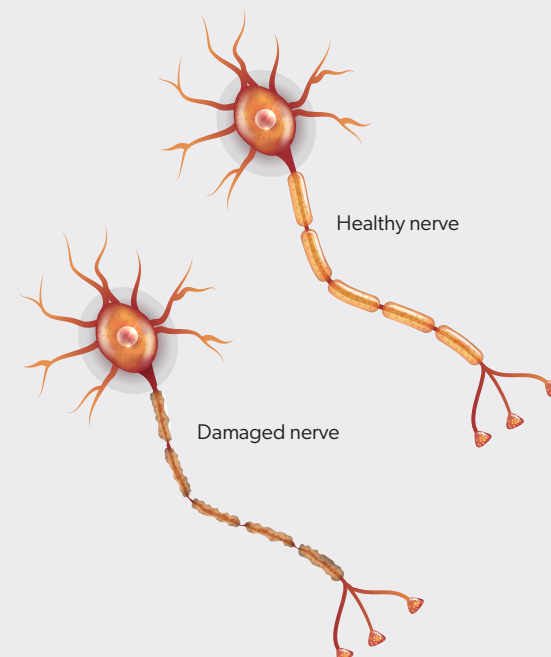
What is neuropathy?

Neuropathy is a condition that affects the nerves. Nerves transmit messages between the brain and the rest of the body.

Diabetic neuropathy occurs when often high blood sugar damages the blood vessels feeding the nerves. This damage prevents the nerves from functioning properly and slows or even stops the transmission of messages between the brain and the affected area of the body.

There are two types of diabetic neuropathy:

- 1 Peripheral neuropathy:** particularly affects the nerves of the legs and feet.
- 2 Autonomic neuropathy:** affects the nerves of specific organs, such as the heart, genital organs, stomach, bowel and bladder.



Peripheral neuropathy

What are the main symptoms of peripheral neuropathy?

- Loss of the ability to feel pain, heat and cold
- Shooting pain, throbbing, tingling, numbness
- The sensation of walking on cotton wool
- Burning sensation or electric shock, heightened during the night
- Muscle weakness, cramps, spasms

Why take action?

The main danger of nerve damage with loss of feeling is injury to your feet without realizing it. Combined with poor blood circulation, the wound can worsen and develop into an ulcer. Poorly treated or neglected, ulcers can lead to gangrene and even amputation.

A daily foot exam and daily foot care is therefore essential. For more details, consult the brochure, **Foot care and diabetes**, published by Diabetes Québec.

Peripheral neuropathy can be easily detected!

Your doctor, a podiatrist or a footcare nurse can do the following tests:



Sensitivity test using a monofilament



Vibration perception test using a tuning fork



Electromyography (EMG) can also be used by a doctor to confirm the diagnosis

Exam schedule

	First exam	Follow-up
Type 1	For children, the first screening is done 5 years after the onset of puberty.	Every year or more often when recommended by a professional.
Type 2	When diagnosed with type 2 diabetes	

Is there a treatment to cure peripheral neuropathy?

No. Instead, suggested treatments attempt to relieve the symptoms. Certain medications may be prescribed, and some topical skincare products are available over the counter.

Discuss this with your doctor or pharmacist.

Other approaches, such as physiotherapy or psychotherapy, can also provide some relief.



Autonomic neuropathy

What are the main symptoms of autonomic neuropathy?

- Accelerated heartrate
- Sudden drop in blood pressure when standing from a seated or lying position
- Inability to recognize the symptoms of low blood sugar (hypoglycemia)
- Constipation or diarrhea
- Gastroparesis: a slowing in digestion in the stomach leading to bloating, heartburn and even a blood sugar imbalance
- Hyperactive bladder: an increase in urinary frequency and urgency and in urinary incontinence
- Neurogenic bladder: a loss of sensation of a full bladder or a bladder that does not empty completely on urination
- Sexual dysfunction: erectile dysfunction in men, difficulty becoming aroused and pain during sex in women

Based on the nature of your symptoms, you will be directed to the appropriate medical specialist.