

Diabetic Neuropathy: What You Can Do About It

What is diabetic neuropathy?

Diabetic neuropathy is a type of nerve damage that happens in people who have diabetes. This damage makes it hard for their nerves to carry messages to the brain and other parts of the body. It can cause numbness (loss of feeling) or painful tingling in parts of the body. Diabetic neuropathy can also affect the following:

- Strength and feeling in different body parts
- Ability of the heart to keep up with the body's needs
- Ability of the intestines to digest food
- Ability to achieve an erection (in men)

What causes diabetic neuropathy?

Nerve damage occurs in people who have had diabetes because their blood sugar level is higher than normal. Over time, high blood sugar levels damage the blood vessels and nerves. That's why people who don't control (or can't control) their blood sugar very well seem more likely to get diabetic neuropathy. Men have diabetic neuropathy more often than women.

What can I do to avoid diabetic neuropathy?

Most importantly, keep your blood sugar under control. Take your medicines just the way your doctor tells you to. Eat a variety of healthy foods and avoid foods that are high in fat and sugar. If you are overweight, ask your doctor to help you lose weight. Exercise as regularly as possible.

How do I know if I have diabetic neuropathy?

If you have numbness in your feet and toes, you may have diabetic neuropathy. You may notice that cuts and sores on your feet don't hurt as much as you would expect them to. The following are also symptoms of diabetic neuropathy:

- Pain or a burning feeling in your legs
- A feeling of lightheadedness that causes you to fall
- Diarrhea and constipation
- Failure to get an erection (in men)

What will happen if the nerves in my legs and feet are damaged?

If diabetic neuropathy has damaged the nerves in your legs and feet, you may not be able to feel pain in those parts of your body. This is a problem because pain can be a useful signal. If you have no feeling in your feet, you could have an

injury and not know it. In addition, your muscles might atrophy (decrease in size), causing you to have trouble walking. The skin on your feet might crack and develop sores. If these sores get much worse and become infected, you might have to go to the hospital, or possibly have your foot amputated (removed). Because diabetes makes it harder for an injury to heal, it's important to take good care of your feet.

What can I do to prevent foot problems from diabetic neuropathy?

Keep your feet healthy by following these tips:

- Check your feet every day. You may need to use a mirror to check the bottoms of your feet. Call your doctor at the very first sign of redness, swelling, infection, pain, numbness or tingling in any part of your foot.
- Check inside your shoes every day for things like gravel or a torn lining. These things could hurt your feet.
- Never walk barefoot around the house or outside.
- Have your doctor look at your feet during every office visit (at least once a year) or whenever you notice anything that seems wrong.
- Choose the right shoes. The most common cause of foot sores is shoes that are new or don't fit properly. Buy shoes that fit properly and have a good arch support. Choose shoes made of soft leather. They should not fit tightly anywhere. To get the best fit, try on shoes at the end of the day when your feet are a little swollen. If you've had problems before with shoes that didn't fit well, you may want to be fitted for a custom-molded shoe with plenty of room for your toes.
- Wear white socks and check when you take them off to see if there is any blood or fluid from a sore on them.
- Wash your feet daily in lukewarm water. Dry them well, especially between the toes. Use a soft towel and blot gently; don't rub. Keep the skin of your feet smooth by applying a cream or lanolin lotion, especially on your heels. If your feet sweat easily, keep them dry by dusting them with nonmedicated powder before putting on your socks, nylons and shoes.

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This handout provides a general overview on this topic and may not apply to everyone. To find out if this handout applies to you and to get more information on this subject, talk to your family doctor.

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