

# Diabetic neuropathy

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## ABSTRACT

One form of nerve damage that can happen if you have diabetes is diabetic neuropathy. Throughout the body, damaged neurons can

result from high blood sugar (glucose). The nerves in the legs and feet are most frequently damaged by diabetic neuropathy.

**Key Words:** *Neuropathy; Diabetics*

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## INTRODUCTION

Diabetic neuropathy symptoms can range from numbness to discomfort in the hands, feet, and legs, depending on which nerves are impacted. Additionally, it may result in issues with the heart, blood vessels, digestive system, and urinary systems. Mild symptoms are present in some individuals. However, for some people, diabetic neuropathy can be very excruciating and incapacitating. Up to 50% of diabetics may experience diabetic neuropathy, a severe complication of the disease. However, consistent blood sugar control and a healthy lifestyle can frequently avoid or delay the progression of diabetic neuropathy.

Diabetic neuropathy mainly comes in four different forms. You can have just one form of neuropathy or several different types. Depending on the sort you have and which nerves are impacted, your symptoms will vary. Typically, signs appear over time. It's possible that nothing will be amiss with you until there has been significant nerve damage. Nerve damage known as peripheral neuropathy usually affects the feet and legs but can also affect the hands and arms.

Damage to the nerves that regulate your internal organs is known as autonomic neuropathy. Your pulse rate, blood pressure, digestive system, bladder, sex organs, sweat ducts, eyes, and capacity to detect hypoglycemia can all be affected by autonomic neuropathy. A uncommon and incapacitating form of nerve damage in your hip, buttock, or thigh is called proximal neuropathy. The majority of the time, this kind of nerve damage only affects one side of your body, with very uncommon exceptions. Proximal neuropathy frequently results in excruciating pain and can cause substantial weight loss. Focal neuropathies are conditions in which only one nerve is usually affected; these nerves are typically affected in the hand, head, torso, and leg.

Diabetes causes high amounts of blood fats, such as triglycerides, and blood glucose, also known as blood sugar, which over time can harm your nerves. Additionally, the tiny blood vessels that supply your

neurons with oxygen and nutrients can be harmed by high blood glucose levels. Your nerves can't work properly without enough oxygen and nutrients. Although individuals with diabetes may experience various types of diabetic neuropathy, research indicates that up to 50% of those with diabetes also have peripheral neuropathy. More than 30% of diabetics suffer from sympathetic neuropathy.

Carpal tunnel syndrome (NIH external link), in which a nerve in your wrist is constricted, is the most prevalent form of focal neuropathy. Approximately 25% of individuals with diabetes experience some nerve compression at the wrist, despite the fact that less than 10% of them experience carpal tunnel syndrome symptoms.

Less frequently occurring is proximal neuropathy and other localised neuropathies. Patients have the greatest chance of receiving effective treatment if their diabetic neuropathy is identified early. However, since not all foot or limb pain indicates diabetic neuropathy, a proper diagnosis is necessary to guarantee the right course of action.

Diabetic neuropathies are diagnosed using the patient's medical history, a clinical examination, and supplementary laboratory studies. A specialist might:

- Examine your reflexes and muscular power.
- Make sure your muscles are responsive to position, vibration, temperature, and light contact.
- Ask for extra tests, such as an ultrasound to check the health of the urinary tract.
- To find out how muscles react to electrical stimuli, use electromyography.

Two phases make up the treatment of diabetic neuropathies: symptomatic control of pain and other complications, and optimal diabetic control using lifestyle changes and occasionally medications. While controlling blood sugar won't repair existing nerve damage, it will stop new harm from happening. You will receive precise blood sugar targets from your doctor. Eating a healthy meal rich in protein

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and low in carbohydrates is one way to control these levels. When consuming carbohydrates, attempt to stay away from soda and chips and opt for foods with higher fiber content.

Regular exercise improves insulin sensitivity, reducing the daily need for insulin and helping to maintain reasonable blood sugar levels. It's crucial to get enough sleep because when we're too tired, we frequently desire foods high in carbohydrates.

Even though controlling blood sugars is crucial, it might not be sufficient. It's crucial to address high blood pressure, stop smoking, and manage other risk factors like high triglycerides or cholesterol. It has been demonstrated that regular aerobic exercise protects the nerves and enhances neuropathy results. If a patient is fat or overweight, weight loss is also crucial.