

# Journeying with Diabetic Neuropathy Pain

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Up to 26% of diabetes patients with diabetic neuropathy experience distressing pain<sup>1</sup>. Diabetic neuropathy pain can affect the individual's quality of life, work productivity, activity level and interpersonal relationships. Mood may be affected as well. The rate of depression is about 45%, and the rate of anxiety is about 28%, amongst individuals with diabetic neuropathy pain, which is much higher compared to diabetes individuals without neuropathy pain<sup>1</sup>.

Naturally, most individuals attempt to control or reduce diabetic neuropathy pain. Often they may try to push themselves to continue performing activities, only to find the pain aggravated instead. Mdm Habibi's pain started with tingling and prickling in her toes. At first she soldiered on and walked to the market to buy her groceries despite the pain. However, the more she push herself, the pain spread upwards to her legs. She had to rest a few days before she can go marketing again.

Some others may avoid activities to reduce the pain. Mdm Jega who used to be socially active, stopped going out due to her pain. She cannot stand for longer than 15 minutes because her pain would become unbearable after that. Traveling on public transport becomes difficult because she often cannot find seats and her bus ride can take more than 15 minutes.

Both the experience and limitations to activities caused by the pain can trigger an unhealthy set of negative thoughts. Individuals with diabetic neuropathy pain have reported helplessness and fears about their future and health. In some individuals, they become discouraged and see no point in maintaining their dietary or lifestyle changes. This in turn can contribute to hyperglycaemia and aggravate their pain further.

Besides pharmacological methods, how else can we manage diabetic neuropathy pain? Here are some ways to manage the pain:

**J** Justify your struggles and discouragement with the fact that diabetic neuropathy pain is one of the hardest types of pain to manage. It is, however, not impossible to manage. You can still have some quality of life even though the pain is difficult to bear. And we don't have to avoid activities or push ourselves beyond limits.

**O** Overall approach, and not just a single approach. Very often we give up after we try out one way. Try a combination of useful methods presented here<sup>2</sup>.

**U** Understanding your triggers. It may seem that the pain is always there and always bad. Such emotions only make us feel helpless. Often, you will notice that there are times when the pain is aggravated, due to specific triggers such as stressful events, activities or mood. Identifying specific situations can help us to avoid the triggers or learn to overcome them.

**R** Re-setting your activity level. Instead of expecting yourself to be able to perform activities like you used to, you may need to recalibrate your activities. You may want to start off at a lower level of intensity/frequency or duration and slowly build up again to your previous level.

**N** Nourish your soul and soothe your mind. Engage in any form of relaxation exercises to calm your nerves, mind and muscles. Some people respond better to stretching. Others to deep breathing.

**E** Embrace negative thoughts. Instead of trying to counter and eliminate them, treat them like they are only a passing breeze or cloud. Recognise that they are just thoughts, not facts. And if it is a problem you are trying to solve, you may want to use problem-solving steps which are more productive than just "thinking" about it or stressing over it.

**Y** Your schedule of pleasures. It can be emotionally and physically draining to manage your pain, maintain lifestyle changes, etc. Refuel yourself with things you like or enjoy to keep yourself going. It could be tuning in to your favourite radio station, drinking a cup of tea, having a hot shower, etc.

We did not invite diabetic neuropathy pain into our lives but we can contain it and enjoy a better quality of life.

#### References

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2. Otis,J.D., Sanderson, K., Hardway, C., Pincus, M., Tun, C., & Soumekh, S. (2013) . A Randomized Controlled Pilot Study of a Cognitive-Behavioral Therapy Approach for Painful Diabetic Peripheral Neuropathy. *The Journal of Pain*, 14(5), 475-482.