



WESTERN NEUROPATHY ASSOCIATION

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Neuropathy Hope

Hope through caring, support, research, education, and empowerment

A newsletter for members of Western Neuropathy Association (WNA)

FDA CLEARS PENS DEVICE FOR PAIN RELATED TO DIABETIC PERIPHERAL NEUROPATHY

Brian Park, PharmD., Clinical Pain Advisor, July 21st, 2022.

The Food and Drug Administration (FDA) has cleared First Relief, a percutaneous electrical neurostimulation (PENS) device, for multiple treatments up to 56 days for symptomatic relief of chronic, intractable pain from diabetic peripheral neuropathy. PENS is a minimally invasive procedure that combines electroacupuncture with transcutaneous electrical nerve stimulation (TENS). First Relief is placed behind the ear to target the associated cranial and occipital nerves. The device delivers continuous pulses of low level electrical current through needle electrodes inserted directed into the skin.

The approval was based on data from a single center, randomized, controlled, double-blind, prospective study (ClinicalTrials.gov Identifier: NCT03540446) that evaluated the effectiveness of First Relief in 63 patients 30 to 74 years of age with diabetic peripheral neuropathy. Patients were randomly assigned to 1 of 3 groups: First Relief, sham device, or an already FDA-cleared device. The devices were applied on a biweekly basis for 16 weeks.

The primary endpoint was pain intensity measured through Visual Analog Scale (VAS) score. The secondary endpoints included vibration perception threshold value, insomnia severity index, overall neuropathy limitations scale, and Hamilton rating scale for anxiety.

Results showed that patients treated with First Relief experienced a significant reduction in VAS pain score from the start of treatment to the end; these improvements continued throughout the 90-day follow-up, suggesting that the device could provide long term improvement in neuropathic pain. Significant improvements were also observed on all secondary endpoints. There were no complications or adverse events reported during the study.

“We are excited to have the FDA clearance of First Relief so that this device, which has been proven effective, can now be used to treat patients who have been experiencing pain related to diabetic neuropathy,” said DyAnsys CEO Srinu Nageshwar. “First Relief offers a significant treatment option without drugs or narcotics.”

References

Tulsa Pain Consultants. *Percutaneous Electrical Nerve Stimulation (PENS)*. Accessed July 23, 2022. <https://www.tulsapain.com/blog/percutaneous-electrical-nerve-stimulation-pens>

10 KHZ SPINAL CORD STIMULATION THERAPY DEMONSTRATES SUBSTANTIAL IMPROVEMENT IN PAINFUL DIABETIC NEUROPATHY

PRNewswire, July 5, 2022.

Neuropathy Hope’s November 2021 issue’s front-page article detailed the FDA’s approval of the 10 kHz device, called HFX, for the treatment of painful diabetic neuropathy (PDN). This device uses a minimally invasive epidural implantation of the stimulator which delivers mild electrical impulses to the nerves to interrupt the pain signal to the brain. The FDA approval was based on 6-month data from a clinical trial in which 79% of participants reported 50% pain relief or more. At 12 months, the participants showed “clear and sustained” benefits with regard to pain, sleep quality and activity.

– Continued on page 3

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SEPTEMBER SUPPORT GROUPS SCHEDULE

Virtual Support Group for Peripheral Neuropathy

(Open your internet browser, go to join.zoom.us, enter the meeting ID and Passcode)

September 10 (2nd Saturday)

11:00am-1:00pm PST/1:00pm-3:00pm CST, Meeting ID: 893 4117 5040/Passcode: 123557
Host – Katherine Stenzel, klstenzel@hotmail.com

September 21 (3rd Wednesday)

10:00am-11:30am PST/12:00pm - 1:30pm CST, Meeting ID: 863 2548 2422/ Passcode: 609857
Host – Glenn Ribotsky, glenntaj@yahoo.com

September 24 (4th Saturday – Open Discussion)

11:00am-1:00pm PST/1:00pm - 3:00pm CST, Meeting ID: 818 9099 1051/Passcode: 227946
Host – John Phillips, johnphillips.wna@gmail.com

Virtual support group meetings are open to all, regardless of where you live. Just pick a time when you are free and join through your web browser using the ID and Passcode. Write the host or Katherine Stenzel for a direct link to simply click to access the meetings.

In-Person Support Group Meetings

September 3 (Saturday)

Houston TX Quarterly Support Group

1:00pm CST – 2:30pm CST, Memorial Drive United Methodist Church
12955 Memorial Drive, Houston, TX 77079, Room DS100, enter at back (south) of building
Contact: Katherine Stenzel at klstenzel@hotmail.com

September 15 (Thursday)

Grants Pass OR Support Group

3:30pm PST
Contact David Tally at david@tallymediagroup.com for meeting information

Auburn CA Support Group – No meetings in July, August and September

Contact: Sharlene McCord (530) 878-8392, Kathy Clemens (916) 580-9449, kaclemens@earthlink.net

Santa Rosa CA Support Group

This group has disbanded due to minimal attendance.

*Sharing a fear makes it smaller,
Sharing a success makes it bigger,
Sharing a problem makes it easier to bear.*

HOT, COLD AND TIGHT – RECOMMENDATIONS FOR SOCKS AND SLIPPERS

(WNA Support Groups and Mayo Clinic Connect)

- **Hot Feet:** NEWGO Foot Ice Pack Slippers for swollen and painful feet (Amazon)
Substitute for Rapid Relief Hot and Cold Therapy Slippers
- **Cold Feet:** Rock Dove Fuzzy Closed Back indoor slipper (Amazon)
- **Balance And Ability To Stride:** SB SOX Lite Plantar Fasciitis Compression Socks and/or SB SOX Plantar Fasciitis Compression Socks with open toes (Amazon)

FROM THE PRESIDENT Pam Hart, WNA President

Yes, it is September already! I am looking forward to those mild autumn days with that hint of chill in the air. Here in Northern California, I am sure we will have to go through an Indian Summer first with one more blast of heat. Cooler weather means more opportunities to get out and walk. I am a dog-sitter, so cooler weather is very welcome.

Speaking of walking....do any of you use poles for walking? They really help with balance, come in adjustable lengths and can even fold for transport. I think they are great when hiking on uneven surfaces because they give you something to hang onto when you don't feel steady. I came across this story (below) that might inspire you to try them.

Pole Walking To Pole Dancing

Betty was challenged by her neuropathy symptoms; loss of feeling and numbness in her feet. She had stopped driving because she could not feel the pedals anymore. She was scared that she wouldn't be able to get around anymore as her feet didn't seem to be responding to her wishes and she constantly tripped.

Before being diagnosed with diabetes and developing these symptoms, Betty was a ballroom dancer extraordinaire and participated at the local Arthur Murray Studio. She was devastated when her mobility was impaired and she could no longer dance. This cut down on her social life and caused Betty to suffer loss of self-esteem and bouts of depression. How could she dance again?

Betty mentioned her sadness regarding the loss of dancing to her friend Paula one day at the grocery store. Paula suggested she come to a neuropathy support group meeting. After Betty attended the group session, she was excited. The speaker that day was Marilyn, showing how walking poles are so easy and helpful – a stabilizing method to help with balance and walking. Betty immediately purchased some poles and started walking around the neighborhood. She felt so good that she wondered if the poles could be used in dancing. She contacted her instructor and together they worked out some routines. Betty realized that others might have the same interests in dancing, but were compromised by their neuropathies. She and her instructor developed a class that combined the gracefulness of dancing with the elegance of using poles.

Betty is much happier today thanks to attending a WNA support group and finding a new way to realize her passion. Thanks for helping Betty dance again!

10 kHz Spinal Cord Stimulation Therapy Demonstrates Substantial Improvement In Painful Diabetic Neuropathy – *Continued from page 1*

The complete 12-month results from the clinical trial was published in Mayo Clinic Proceedings: *Innovations, Quality & Outcomes* on July 5, 2022. Importantly, at 12 months, the 10 kHz Spinal Cord Stimulator (SCS) treatment resulted in improvement in overall quality-of-life that was 2.5- to 4.5-fold higher than the minimally clinically important difference. Of particular interest is the notable improvement in sensation of the feet which was consistent over the 12 months. This potentially disease-modifying effect could have tremendous benefit for the safety and quality of life of patients with PDN and merits further research.

In conclusion, 10-kHz SCS provided substantial and durable pain relief, improved quality-of-life, better sleep quality, and neurologic improvements over 12 months. These data should support the use of 10-kHz SCS for patients with PDN with symptoms that do not respond to conventional care.

Help With Health Care Challenges

If the number is not in your area, call the one listed and ask for the right number.

Medicare

www.Medicare.gov

...

The Affordable Health Care Act

For current information go to www.HealthCare.gov

...

HICAP

Health Insurance Counseling

for seniors and people with disabilities.

www.cahealthadvocates.org

/HICAP/

Call (800) 434-0222 to ask a question or to make an appointment.

...

Health Rights Hotline

Serving Placer, El Dorado, Yolo, & Sacramento Counties, regardless where you receive your health coverage.

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24 hours a day, seven days a week.

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DRA's Health

Access Project Free publications about the health care, insurance rights and concerns of people with disabilities and serious health conditions. For more information, go to <http://dralegal.org/> and click on "Projects".

■ PARSONAGE-TURNER SYNDROME – A RARE PERIPHERAL NEUROPATHY

Recently I awakened screaming with pain in my right shoulder. When the pain subsided, I called my radiologist nephew and gave him the details. His response was, “You’ve got Parsonage-Turner Syndrome.” My reply was, “Wow! I’m impressed.” It turned out he knew about it as he had had this uncommon disease himself.

It is characterized by sudden onset of excruciating pain without warning, affecting either shoulder through the cervical plexus of nerves supplying the upper extremity. The distribution of pain, paralysis, paresthesia and anesthesia is patchy and can affect any areas in the shoulder, arm, hands and chest. We concluded that we probably share a familial predisposition to the disorder.

Fortunately, the pain has become tolerable, and function has continued to improve with physical therapy and my home program of strengthening and stretching exercises. The shocks suddenly occurring along various nerves still are an unpleasant surprise, but I am encouraged to know that eventual recovery usually occurs.

In addition to this unusual bilateral neuropathy and lumbar radiculopathy, other recent occurrences have included a pelvic disc, recurrent tinnitus—all of which have added up to a volunteer physician out on disability.

Hope to be back to work soon.

William B. Donovan, MD

■ MASSAGE THE PAIN AWAY WITH ESSENTIAL OILS Katherine L. Stenzel, WNA Director, Editor

I love the idea that there could be something easy to do and pleasant to the body that would help with the pain of peripheral neuropathy. Why is it always medications with foggy brain side effects? Or spinal implants or electrical brain stimulations? Why not a relaxing massage with the added bonus of aromatherapy to help with our pain? Well, I found a couple of clinical trials that supported that supposition.

A study¹ in Turkey compared two groups of diabetes patients with painful peripheral neuropathy. The first received aromatherapy massage three times a week for 4 weeks. The second only received “routine care” which I assume means continuing their medication for their neuropathy. Each group filled out quality of life and pain questionnaires at the end of the 4 weeks. The pain scores decreased ‘significantly’ in the aromatherapy massage group compared to the continuing care group. Similarly, the quality-of-life scores significantly improved.

This is simply massage using the essential oils of rosemary, geranium, lavender, eucalyptus and/or chamomile: a trouble-free and effective nonpharmacological treatment to manage pain and improve the quality-of-life.

The second study² specifically studied lavender essential oil and self-massage. This one used 75 diabetic neuropathic patients in a three-group design: first with aromatherapy, second with placebo and third a control. The first group used 2.5 cc of 3% lavender oil on their feet as a gentle massage for 10 minutes every night before bedtime for a month. Again, each group filled out quality of life and pain questionnaires at the end of the month period. The pain scores in the aromatherapy group was significantly reduced compared to the placebo and control group. In addition, a significant increase was found in the quality-of-life domains in the aromatherapy group.

Again, an improvement in pain but this time with self-massage using lavender oil for only 10 minutes a night. An easy treatment that my husband could do for me!

References

¹ Metin, Z.G., et al. (2017, July). Aromatherapy Massage for Neuropathic Pain and Quality of Life in Diabetic Patients. *Journal of Nursing Scholarship*, 49(4) 379-388. <https://doi.org/10.1111/jnu.12300>

²Rivaz, M., et al. (2021, August). The Effects Of Aromatherapy Massage With Lavender Essential Oil On Neuropathic Pain And Quality Of Life In Diabetic Patients: A Randomized Clinical Trial. *Complementary Therapies in Clinical Practice*, 44(101430). <https://doi.org/10.1016/j.ctcp.2021.101430>

The WNA Neuropathy Assistance Line is still active.

833-980-4181

Darrell O’Sullivan, WNA Vice President and Treasurer, is answering calls during business hours.

If calling after hours, please leave a message and he will return your call.

TOPICAL AMITRIPTYLINE GRANTED FAST TRACK STATUS FOR CHEMOTHERAPY-INDUCED NEUROPATHIC PAIN

Brian Park, PharmD; Clinical Pain Advisor; June 14, 2022

The Food and Drug Administration (FDA) has granted Fast Track designation (refer to article below) to ATX01 for the treatment of chemotherapy-induced neuropathic pain. ATX01 is a topical formulation of amitriptyline designed to directly inhibit pain signaling in the nerve fibers on the epidermis and dermis, while minimizing systemic absorption. In a phase 1 trial, favorable local and systemic tolerance with low systemic penetration was observed in healthy participants administered ATX01.

“The FDA’s Fast Track designation of ATX01 reflects the critical unmet medical need of 60% of chemotherapy patients suffering from chemotherapy-induced neuropathic pain,” said Stéphane Thiroloix, founder and CEO of AlgoTx, “We look forward to interacting closely with the FDA to bring relief to patients as quickly as possible.” The Company plans to initiate a phase 2 trial evaluating ATX01 for the treatment of chemotherapy-induced neuropathic pain in late 2022.

Reference

AlgoTx’s ATX01 Granted Fast Track Designation By FDA For Chemotherapy-Induced Neuropathic Pain. News release. AlgoTx. Accessed June 9, 2022. <https://www.businesswire.com/news/home/20220608006199/en/AlgoTx%E2%80%99s-ATX01-Granted-Fast-Track-Designation-by-FDA-for-Chemotherapy-Induced-Neuropathic-Pain>

FEDERAL DRUG ADMINISTRATION FAST TRACK DRUG APPROVAL

Fast Track is a process designed to facilitate the development, and expedite the review of drugs to treat serious conditions and fill an unmet medical need. The purpose is to get important new drugs to the patient earlier. *Fast Track* addresses a broad range of serious conditions.

Determining whether a condition is serious is a matter of judgment, but generally is based on whether the drug will have an impact on such factors as survival, day-to-day functioning, or the likelihood that the condition, if left untreated, will progress from a less severe condition to a more serious one. AIDS, Alzheimer’s, heart failure and cancer are obvious examples of serious conditions. However, diseases such as epilepsy, depression and diabetes are also considered to be serious conditions.

Filling an unmet medical need is defined as providing a therapy where none exists or providing a therapy which may be potentially better than available therapy.

Any drug being developed to treat or prevent a condition with no current therapy obviously is directed at an unmet need. If there are available therapies, a *Fast Track* drug must show some advantage over available therapy, such as:

- Showing superior effectiveness, effect on serious outcomes or improved effect on serious outcomes
- Avoiding serious side effects of an available therapy
- Improving the diagnosis of a serious condition where early diagnosis results in an improved outcome
- Decreasing a clinical significant toxicity of an available therapy that is common and causes discontinuation of treatment
- Ability to address emerging or anticipated public health need

Once a drug receives *Fast Track* designation, early and frequent communication between the FDA and a drug company is encouraged throughout the entire drug development and review process. The frequency of communication assures that questions and issues are resolved quickly, often leading to earlier drug approval and access by patients.

Reference

Federal Drug Administration. *Fast Track*. Accessed June 23, 2022. <https://www.fda.gov/patients/fast-track-breakthrough-therapy-accelerated-approval-priority-review/fast-track>

NEW COMMITTEES HELP NEEDED!

The WNA Board of Directors is creating two new committees:

MEMBERSHIP - to encourage more members, streamline the application form, and review membership portions of the website.

WEBSITE - to review the content, format, links, and ease of use of the website for members and the general population of peripheral neuropathy sufferers.

John Phillips is the Membership Committee Chair, and the Website Committee Chair is open. Interested in helping the WNA continue it’s mission of educating and supporting those with neuropathy? Please contact Pam Hart, President, at pamula1@hotmail.com.

DISCOUNTS FOR WNA MEMBERS

The following companies or individuals have agreed to give WNA a discount to give WNA members. Give them a call or visit. If you choose to purchase the service or wares of any on this list, pull out your WNA Membership Card and claim the discount.

Anodyne Therapy

Infrared Light Therapy equipment - **12% off all home units.**
Contact: 800-521-6664 or www.anodynetherapy.com

Auburn

The Footpath

825 Lincoln Way
(530) 885-2091
www.footpathshoes.com
WNA Discount: 10% off the regular price shoes.

Elk Grove

Shoes That Fit

8649 Elk Grove Blvd.
(916) 686-1050
WNA Discount: 20% off the regular price shoes.

Fortuna

Strehl's Family Shoes & Repair

Corner of 12th & Main
1155 Main Street
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is a Certified Pedorthic
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West Sacramento

Beverly's Never Just Haircuts and Lilly's Nails
2007 W. Capitol Ave
Hair - (916) 372-5606
Nails - (916) 346-8342
WNA discount: 10% off the regular price.

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NEGATIVE EMG/NCV SO I DON'T HAVE NEUROPATHY? NOT SO FAST!!

Relief Centers.com, <https://reliefcenters.com/negative-emgncv-so-i-dont-have-neuropathy-not-so-fast/> retrieved July 16, 2022.

A very common method of testing for peripheral nerve damage are electromyograms (EMG) and nerve conduction velocity (NCV) tests, which are called electrodiagnostic tests as well. A good way to think about how they work is that they shoot electrical impulses into one end of your nerves and measure how fast and how “big” the impulses come out of the other end.

Based on this testing, the clinician might be able to get a sense of whether the damage is to the ENDS of the nerves (like the hands/feet) or if the problem is at the BEGINNING of the nerves (like a herniated disc by the spine). And the testing may show that you have multiple issues.

What if you have a “negative” EMG/NCV?

Does that mean that you don't have neuropathy? Not necessarily. You see, these two tests are only good for nerves that have a myelin sheath. Think of myelin as the insulation around an electrical wire. Its purpose is to speed up nerve impulses for things that have to go FAST like all of the quick corrections we do to stand and walk upright, feel touch, vibration, etc. In general, these types of nerves are called large diameter nerve fibers. Large fiber damage will mostly give symptoms of numbness, tingling, weakness, and loss of coordination (the body loses track of its feet/parts).

Problems with small nerve fibers are not picked up by the EMG/NCV tests.

John Hopkins School of Medicine website lists the symptoms of small fiber neuropathy as:

The symptoms of small fiber sensory neuropathy (SFSN) are primarily sensory in nature and include unusual sensations such as pins-and-needles, pricks, tingling and numbness. Some patients may experience burning pain or coldness and electric shock-like brief painful sensations. Since SFSN usually does not involve large sensory fibers that convey balance information to the brain or the motor nerve fibers that control muscles, these patients do not have balance problems or muscle weakness. In most patients, these symptoms start in the feet and progress upwards. In advanced cases, it may involve the hands.¹

That covers a lot of symptoms, right?

Confusingly enough there is overlap between the symptoms caused by small fiber damage and large fiber damage. This overlap is not normally a major issue, as many times there is both large and small fiber damage. Here; however, we are addressing someone that might have only small fiber damage.

Since the EMG/NCV only picks up large fiber dysfunction, one can certainly have a negative EMG/NCV and still have peripheral neuropathy. Just small fiber peripheral neuropathy – not large fiber peripheral neuropathy.

If someone has the signs and symptoms of peripheral neuropathy and they get a normal EMG/NCV, there is testing that can be done for small fiber neuropathy. It's a skin punch biopsy where a small plug of tissue is taken and sent off to a lab. In the lab the tissue is stained and the small fibers are literally counted under a microscope. The diagnosis of small fiber sensor neuropathy will be made if the small nerve fiber density is reduced (fewer nerve fibers) as compared to a normal person.

Reference

¹ John Hopkins Medicine, retrieved July 16, 2022 from http://www.hopkinsmedicine.org/neurology_neurosurgery/centers_clinics/peripheral_nerve/conditions/small_fiber_sensory_neuropathy.html

THE BEST EXERCISES FOR PEOPLE WHO THINK THEY CAN'T EXERCISE

April 19, 2019 / *Heart Health*, Cleveland Clinic Heart Advisor. <https://health.clevelandclinic.org/the-best-exercises-for-people-who-think-they-cant-exercise/>

It's not easy for some people to engage in what might be considered "normal" exercise. When you have neuropathy it is difficult or painful to move fast enough to raise your heart rate. Be reassured there are other methods of stimulating your cardiovascular system and warding off frailty. "The choices may not be traditional when you have physical limitations, but there are things you can do that are very beneficial," says Erik Van Iterson, PhD, MS, Director of Cardiac Rehabilitation.

Use your arms

Free-weight arm exercises are unlikely to deliver the same benefits as walking on a treadmill or biking, but bicycling with the arms can be an effective alternative. "It's a great way to raise your heart rate, increase your oxygen consumption and improve your strength and endurance," says Dr. Van Iterson.

Many gyms have arm ergometers, also known as hand cycles or pedal exercisers. They can be purchased online for as little as \$25 for use at home. Just make sure you get one with adjustable tension or you will find yourself literally "spinning your wheels." Some models are convertible, meaning they can be used by either the hands or feet. If balance is your main issue, pedaling with your feet while sitting in a chair may be easier than you think. In fact, you want to seek a gym with a recumbent cycle and try it out. It's basically a bicycle you ride while sitting in a chair with full back support.

Get moving

No matter your physical limitation, walking will be beneficial. "Walking requires you to integrate your balance, strength and endurance muscles. It improves your symmetry and makes your core, hip and back stronger," says Dr. Van Iterson. Whether you are able to walk independently or require a cane or rolator, he advises you walk at least 25 minutes a day on an even surface, such as a shopping mall. If you use a wheelchair, he recommends you propel yourself with your arms for at least that long every day. "Don't focus solely on needing to raise your heart rate in order to benefit," he says. "The goal is to reduce the amount of time you spend sitting or lying down."

Strengthen your core

Strengthening your core (the muscles of your torso) will help you maintain your balance and help prevent falls. It also will make it easier to get up and down out of a chair or bed, or in and out of a car, without assistance. One of the most basic ways to strengthen your core is to sit up straight. "Practice controlling your posture. It's especially important if you use a wheelchair," says Dr. Van Iterson.

No excuses

If you have access to a pool, you will find water aerobics to be an effective form of exercise that eases stress on the joints. You can strengthen your upper body by using rubber resistance bands at home. What all this boils down to is that there is no reason why you can't reduce your cardiovascular risk through regular exercise, even if you feel you are physically limited. "There are no excuses. If you convince yourself that exercising isn't possible, because you are unable to do it, or you don't have access to exercise equipment or are unwilling to seek it, you are preventing yourself from being successful," says Dr. Van Iterson. "You do not have to join a gym or buy exercise equipment for your home. Use your home or neighborhood as your gym. It's not important how you move; it's important that you move."

DISCOUNTS FOR WNA MEMBERS

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Neuropathy Support Formula/Nerve Renew

(1-888-840-7142) is a supplement that a number of people are taking and reporting it has helped them. The company gives members of WNA a discount and free shipping. The 30-day supply is \$40 (normally \$49.97). It can be auto-shipped monthly for the same. A 3-month supply via auto-ship is \$95.00. They also have a Nerve Repair Optimizer that is available for \$20 with free shipping. Marsha, the manager, said that if anyone wants more information about the product, they can call and ask for her. If she is not readily available, leave your number and she will call you back. They now have Nerve Renew Fast Acting Cream at \$20 for WNA members. It reportedly takes the edge off numbness.

Building Better Balance DVD, Developing Spine Health

- The DVDs are \$30 each. The price of a full set (4 DVDs) is \$100 (that's a 20% discount). You can order the DVDs by going to the website www.building-better-balance.com. Shipping is free. You can also order the DVDs over the phone using a credit card. Call (707) 318-4476 and leave a message. Vanessa Kettler, Balance and Fall Prevention www.building-better-balance.com (707) 318-4476

Additional Discounts

Do you know a business that might offer our members a discount? Tell them that they will be listed each month in our newsletter and on our website so our members will know of their generosity and patronize their business. Call 888-556-3356 or email admin@WNAinfo.org.

We'll mail an agreement form to the business, and once we have it, we'll add them to this list.



WESTERN NEUROPATHY ASSOCIATION

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READ WHAT FIRST-TIME VIRTUAL SUPPORT GROUP ATTENDEES HAVE TO SAY!

Katherine,

Thanks for inviting me to the support group zoom meeting today. I appreciate how informative, yet focused and inclusive it was thanks to your facilitation. Well done!! You certainly succeeded in making the meeting resourceful, positive, uplifting, and supportive. For only my first meeting, I walked away quite enlightened and encouraged by the individual experiences shared as well as their first-hand treatment efforts which have proven to be effective.

Dana Delgado
July 20, 2022

Katherine,

I thought the meeting was excellent and very informative. I found myself to be very absorbed in hearing all the other folk's stories. Also, it was nice that it is such a non-judgmental, relaxed environment. Thank you very much and I look forward to more Zooms.

Katherine Dauch
July 25, 2022

Want to join in the sharing of treatments and information? Email Katherine Stenzel at klstenzel@hotmail.com for more information and an email invitation with Zoom link to the next virtual support group. **Please Join Us!**



Western Neuropathy Association (WNA)

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tax-exempt corporation.

Katherine Stenzel, Editor

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www.WNAinfo.org

WNA Headquarters: admin@WNAinfo.org

Our mission is to provide support, information and referral to people with neuropathy and to those who care about them, to inform and connect with the health care community, and to support research.

Dues - \$30 a year

All contributions and dues are tax-deductible.

We are supported by dues-paying members, contributions by members and friends, and occasionally, small grants and fundraisers.

This newsletter is designed for educational and informational purposes only. The information contained herein is not intended to substitute for informed medical advice. You should not use this information to diagnose or treat a health problem or disease without consulting a qualified health care provider. Western Neuropathy Association (WNA) does not endorse any treatments, medications, articles, abstracts or products discussed herein. You are strongly encouraged to consult a neurologist with any questions or comments you may have regarding your condition. The best care can only be given by a qualified provider who knows you personally.