Peripheral Neuropathy

A guide for patients

This handout explains peripheral neuropathy, a type of nerve damage that can happen during or after cancer treatment. It reviews common symptoms, possible causes, ways to manage symptoms, and when to call your care team.

What is peripheral neuropathy?

Peripheral neuropathy is nerve damage. It affects nerves outside the brain and spinal cord. Many people with cancer can develop this condition, often during or after *chemotherapy* (cancer treatment).

Neuropathy may affect just one nerve, or it may affect many nerves. Chemotherapy-related neuropathy usually affects the hands and feet. You may have symptoms for a short time, or your symptoms may last longer and need ongoing care.

Tell your care team if you have any symptoms of peripheral neuropathy, including:

- Tingling or "pins and needles"
- A feeling of burning or cold
- Numbness
- Sharp, prickling, or pinching pain
- Weakness
- Trouble with balance or coordination
- Clumsy hands or trouble using your fingers

What causes peripheral neuropathy?

In people with cancer, chemotherapy is the most common cause of peripheral neuropathy. Cancer drugs that may cause neuropathy include:

- Paclitaxel (Taxol)
- Docetaxel (Taxotere)
- Cisplatin
- Oxaliplatin
- Abraxane
- Carboplatin

It is important to get the right diagnosis because other health problems besides cancer can cause neuropathy. It can also be caused by:

- Surgery
- Radiation treatment
- A tumor pressing on a nerve
- Infections such as shingles
- Diabetes
- Heavy alcohol use

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Treatment Options

Different treatments work for different people. Sometimes more than one treatment is needed. Your doctor or nurse may talk with you about:

- Pain medicines
- Creams or patches for pain
- Relaxation therapy or meditation
- Prescription medicines such as gabapentin or duloxetine
- Changing your chemotherapy dose or schedule
- Physical therapy or occupational therapy
- *TENS* (transcutaneous electrical nerve stimulation)

For Your Safety

- Do **not** start or stop any treatments on your own.
- Do **not** start medicines or supplements without talking to your care team first.

Tips to Help Manage Neuropathy

- Avoid alcohol. Even 1 to 2 drinks may make nerve pain worse.
- If you have diabetes, keep your blood sugar under good control.
- If your hands feel weak or clumsy, use tools with large grips or handles.

It is also important to pay close attention to your feet. Check your feet regularly for sores and cuts. If needed, use a mirror or ask someone to help you look at them. Wear supportive, comfortable shoes, and ask your therapist or doctor for recommendations about shoes and foot-care products.

Can neuropathy be prevented?

There are no proven ways to fully prevent neuropathy yet. Researchers are studying several ideas.

One treatment you can try is *cryotherapy* (cold therapy). This includes using frozen gloves and socks during some chemotherapy treatments. This may help lower the risk of nerve damage in the hands and feet for some patients. See the handout *"Cryotherapy (Cold Therapy)"* for more information.

When to call your nurse or doctor

Your care team can help find ways to manage symptoms and keep you safe during treatment. Call your care team if you have:

- New numbness or tingling
- Worsening pain
- Trouble walking or balancing
- Weakness in your hands or feet
- Sores or wounds on your feet
- Symptoms that interfere with daily activities

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

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