

# Pinpointing the cause of neuropathy

**DR. GOTT**



**PETER GOTT, M.D.**

**DEAR DR. GOTT:** I had testing at a major medical center because of peripheral neuropathy. I do not have diabetes, and the doctors were unable to make a diagnosis. Finally, they said I might have vasculitis, yet my sedimentation rate was normal. Any comments?

**DEAR READER:** Peripheral neuropathy means that some of the nerves to your arms and legs are not functioning normally. Symptoms of the condition include numbness, tingling and burning pain in these limbs. Patients often complain of numbness in a "stocking-and-glove" distribution, meaning that only the hands, lower legs and feet are affected. Eventually, the affliction can progress, causing clumsiness, unsteady gait, loss of reflexes, dry skin and — finally — skin ulcers.

Neuropathy is a symptom, not a disease. As in your case, patients need extensive testing to determine the cause and, if possible, treat it.

The most common cause of peripheral neuropathy is diabetes. Diabetics develop premature arteriosclerosis; experts believe this progressive slowing of circulation to the hands and feet damages the tiny capillaries to the nerves. When nerves are deprived of nutrients and oxygen, they malfunction. The process and symptoms are akin to the sensations experienced by people who cross their legs and have a foot "fall asleep" because blood flow to the lower extremity is temporarily reduced.

Neuropathy has other causes, however, such as kidney failure, malnutrition, cancer and vitamin B-6 toxicity. These diseases can usually be diagnosed by appropriate testing. In many cases, treatment of the underlying

disease will improve the neuropathy.

Vasculitis (inflammation of blood vessel walls) can cause neuropathy, if the affected arteries do not supply adequate oxygen to nerves. As you pointed out, the sedimentation rate — the speed with which red blood cells sink in a glass tube — is usually increased in the presence of vasculitis.

I would not presume to second-guess the corps of medical center doctors who examined and tested you. However, I do suggest the following:

Medical center medicine has many advantages, including specialists who are up-to-date on the newest medical discoveries and the availability of sophisticated laboratory tests.

However, it does have one glaring disadvantage, a phenomenon I call "fragmentation." Medical centers of-

ten have too many cooks; usually no one person coordinates and oversees the investigation and care of each patient.

Therefore, I recommend you return to your family doctor and ask him or her to review, in detail, your records from the center. Perhaps a seemingly insignificant lab report got lost in the shuffle; this information could help diagnose your neuropathy. Or maybe one of the specialists inadvertently forgot to order a test that could have been a keystone in your diagnosis. Even if your records are in perfect order, your doctor will be able to advise you which step to take next.

To give you more information, I am sending you a free copy of my Health Report "Medical Specialists."

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*Home  
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**By Glenda Hughes**



With the current situation of the market, there are a lot of vendors and real estate professionals alike, wringing their hands. Just how are some of you going to get your properties sold? What can we do, as representatives, to swing things around for you? You see, it is a two-way street — and it takes ingenuity and brain storming to fight your way through to see a "sold" sign. Obviously, it is our task to move your property as quickly as possible for you, and for the best possible price; but when purchasers are in short supply, just how can we find them, and in turn, entice them to look at your property. Quite an assignment, to say the least!

If you have done everything possible on your side of the fence, to make your home attractive and have it priced competitively, then it falls into your sales reps. lap to do the rest. Certainly, this is no time to not have your home on the MLS system, even if it costs you a little more. The MLS system reaches all sales reps. on the Brampton Board, and there is no better way of keeping your home in front of the eyes of the sales people than this system. However, check with your rep. if your picture of your home is up to date. It was not long ago that there was snow on the ground, and if your picture in the MLS book is snow clad, you might suggest that it be changed for a new shot, so mentally speaking, people don't think that your home has been on the market since the first snowfall. At the same time, ask if you can have a copy of your listing from the MLS book, and see if the "remarks" about your home are up to date, entice people to look, and do a little selling job right in the listing. If you are not happy, it is very easy to change the listing to be more concise and accurate.


Next, ask where your home has been advertised. It is not necessary to advertise absolutely every week, but you should be getting fair exposure. Sometimes, advertising outside of the local area brings some results, and in this market, it is fair to ask if different types of publications and indeed "media" are being used.

I guess last of all, you might have a brain-storming session with your representative, and pull together some new ideas as to how to market your home — anything a little different could just be the trick to finding a buyer. There are many ways of promoting homes, but it takes a creative mind to think past the "normal" ways of doing things. Certainly no sales rep. would mind if you sat down and brain-stormed with him or her about things that might bring in prospective buyers. Actually, another brain is very helpful in times of stress, so try to be as helpful as you can when you sit down, and maybe together you can pull the rabbit out of the hat.

Have a good brain storming session — I'd love to hear from you if something new works for you.

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Glenda Hughes is a Sales Representative with NRS Brand Realty in Georgetown.



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