

Researchers use goal-oriented therapy to treat diabetic neuropathies

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Researchers at Boston University School of Medicine (BUSM) and VA Boston Healthcare System (VA BHS) have found that cognitive behavioral therapy (CBT) can help relieve pain for people with painful diabetic neuropathies. The study, which is the first of its kind to examine this treatment for people with type II diabetes mellitus, is published in the March issue of the *Journal of Pain*.

Type II diabetes mellitus is the most common form of the disease and affects more than 20 million Americans. The onset of type II diabetes mellitus is often gradual, occurring when a person is unable to make or use insulin efficiently. As a result, abnormally high levels of sugar accumulate in the blood, resulting in a condition called hyperglycemia.

Untreated hyperglycemia can develop into diabetic neuropathies, or nerve damage, which causes painful burning and stinging sensations in the hands and feet and permanent nerve damage. Although pain medications for this condition exist, they often have negative side effects such as headaches, dizziness and nausea.

Researchers led by John D. Otis, PhD, an associate professor of psychiatry at BUSM and <u>clinical psychologist</u> at the VA BHS, assessed whether CBT, a psychological, goal-oriented treatment approach aimed at changing maladaptive thoughts and illness supporting behaviors, could be of benefit to veterans with painful diabetic neuropathies.

The study, which was conducted at the VA BHS, compared participants



receiving CBT to those receiving treatment as usual. The participants were U.S. veterans age 18 and older who had been diagnosed with type II diabetes and experienced neuropathic pain for more than three months.

Participants attended 11, hour-long CBT sessions, which focused on teaching participants <u>relaxation techniques</u> and how to identify and challenge thoughts that contribute to pain. In addition, participants were taught how to keep active and plan enjoyable activities such as exercise, going for walks or having dinner with friends.

At a four-month follow-up, participants who received CBT reported feeling less pain and reported that pain was less interfering in their daily lives when compared to participants who received treatment as usual.

"This study demonstrates that the millions of people who are experiencing pain and discomfort from type II <u>diabetes mellitus</u> do not need to rely solely on medication for relief," said Otis. "More broadly, the results of this study add to a growing body of literature demonstrating that <u>cognitive behavioral therapy</u> is an effective psychological treatment approach for chronic pain management," he added.

Provided by Boston University Medical Center

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