

Screening, diagnosis and management of diabetic sensorimotor polyneuropathy in clinical practice: International expert consensus recommendations

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- Patients, clinicians, and other health care professionals often overlook diabetic neuropathy as a potential consequence of diabetes.
- Controlling pain and influencing the course of diabetic neuropathy are key elements in the treatment. This implies stopping the progression of the condition and, in the best-case scenario, reversing it.
- For the management of individuals with diabetic neuropathy, this consensus report provides extensive guidance for several drugs, either pathogenetic or symptomatic, based on the results of the most recent clinical research.

Why is diabetic neuropathy considered a “forgotten complication”?

Diabetic neuropathy is considered a “forgotten complication” because physicians, other health care providers and patients themselves do not pay sufficient attention to its diagnostics. In my country, Ukraine, in the vast majority of cases, diabetic neuropathy is diagnosed in the presence of painful neuropathy (and,

unfortunately, in many cases when the pain is quite severe). If patients do not complain about pain, the tests to diagnose diabetic neuropathy are very rarely done, even those that are very simple, such as assessment of tactile or vibration sensation, for instance. The term “forgotten complication” could be even more firmly applied to diabetic autonomic neuropathy, which may affect all parts of the autonomic nervous system and lead to very grave consequences, including sudden cardiac death and increased cardiovascular morbidity and mortality. And, of course, very little attention in clinical practice is paid to the brain damage in patients with diabetes mellitus.

What are the major principles in the treatment of diabetic neuropathy?

Generally, the major principles in the treatment of diabetic neuropathy are pain control (if pain is present, of course) and influencing the course of neuropathy, which means preventing its progression, and, in the best scenarios, reversing its course. To achieve such goals, the treatment is divided into symptomatic (pain control) and pathogenetic (influencing the course of neuropathy).

What are the main challenges related to the symptomatic treatment of painful diabetic neuropathy?

I believe that the main challenges are a lack of medications that effectively manage pain in most patients. Therefore, we cannot predict which medication would be effective in a particular patient. Of course, there are also the adverse effects of the medications used to treat painful diabetic neuropathy.

What differentiates this present consensus report from other guideline documents or previous consensus reports?

I believe that this consensus report is the most comprehensive, includes results of the most recent clinical studies and provides detailed guidelines for the use of different medications, either pathogenetic or symptomatic, for the treatment of patients with diabetic neuropathy.

The consensus report was published in the journal “Diabetes Research and Clinical Practice”. Why is this important?

Publication in this journal seems to be very important, as it is the journal under the auspices of the International Diabetes Federation, and it has a wide reach throughout the world. Also, this journal has a good impact factor, stringent review process and the acceptance of a manuscript by such journals certifies the good quality of the article.

How do you see the implementation of the consensus recommendations in your country?

I strongly believe that this guideline is very important, and it is going to be implemented in our clinical practice, including the National Guidelines for the treatment of patients with diabetes mellitus.

FOR ADDITIONAL INFORMATION, PLEASE SEE THE COMPLETE ARTICLE:

Ziegler D, Tesfaye S, Spallone V, Gurieva I, Al Kaabi J, Mankovsky B, Martinka E, Radulian G, Nguyen TK, Stirban AO, Tankova T, Varkonyi T, Freeman R, Kempler P, Boulton AJM. Screening, diagnosis and management of diabetic sensorimotor polyneuropathy in clinical practice: International expert consensus recommendations. *Diabetes Res Clin Pract.* 2021 Sep 18:109063. doi: 10.1016/j.diabres.2021.109063. Epub ahead of print.

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