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Effectively treating CIPN.

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Background: Chemotherapy Induced Peripheral Neuropathy (CIPN) occurs in ~20-100% of cancer patients receiving chemotherapy based on the dose and type of cancer receiving treatment.^{1,2} Currently symptom modification remains our only treatment option,³ but has a less than 50% chance of helping patients reduce their pain by 50% and may cause many "adverse side effects." Thus, no accepted standard protocol exists for treating CIPN.⁴ In 1943 the Nobel Laureate Edwin Schrodinger offered an alternative to the pharmacologic model by proposing that "living matter at the cellular level can be thought of in terms of quantum mechanics - pure physics and pure chemistry."⁵ This suggests that signaling cells with electrical currents and electromagnetic energy fields can induce and amplify subatomic particle movement and activity to create healing within cells.⁶ A sophisticated electronic signaling technique (EST) produces profound anti-inflammatory effects.⁷ When combined with a local anesthetic it is called Combined Electrochemical Therapy (CET) and combats the various mechanisms involved in producing CIPN.⁸ A recent study has shown that CET more effectively treats neuropathy than does pharmacology.⁹ **AIM:** To confirm the efficacy and safety in using CET to treat CIPN. **Methods:** After initially evaluating 118 patients with CIPN, 95 patients (80%) received up to two CET treatments a week for as many as 56 treatments. The patients were analyzed in terms of their age sex, cancer diagnosis, co-existing causes of neuropathy, and whether they had finished their chemotherapy or still received treatment. Their highest VAS

pain/discomfort scores as well as their highest Neuropathy Function Index (NFI) were compared to their last VAS and NFI score. Results: Sixty eight of these patients (72%) reduced their pain/discomfort by at least 30% and fifty two patients (55%) reduced their pain by 50% or more. The average patient improved their NFI by at least 45%. None had any "*adverse side effects*". Twenty-five percent of the patients on CET continued to receive chemotherapy because of good symptom control. Conclusions: CET offers patients suffering from CIPN a safe and effective way to reduce their pain/discomfort, improve their functioning and to continue to receive chemotherapy.

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