

Managing Peripheral Neuropathy

A foot surgeon's honest guide to burning, tingling, numb feet and what helps

No miracle cures. Just what the evidence shows.

- ✓ Find what may be causing your symptoms
- ✓ Our top shoes, insoles, and supplements, ranked
- ✓ What's trending online, fact-checked
- ✓ When to see a foot and ankle specialist



Dr. Tom Biernacki

Double board-certified podiatric surgeon
Founder, Balance Foot & Ankle

There is room for better days

Maybe your feet burn just as you sit down to dinner. Or the tingling starts when you finally get into bed.

I wrote this guide to help you find out what may be causing it, what really helps, and what is mostly hype. When the proof for something is weak, I tell you.

You don't have to change everything at once. Pick one thing you want to do more easily. Then use this guide to make a plan.

Your symptoms deserve an explanation. Your day deserves a plan.

Dr. Tom Biernacki

DPM, FACFAS

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This guide is for education. It is not a diagnosis or a treatment plan. See a clinician about your symptoms. Urgent warning signs are on page 3. Written and medically reviewed by Dr. Tom Biernacki (DPM, FACFAS). © 2026 Foot & Ankle Web Services LLC · Balance Foot & Ankle Press · Free patient guide, 2026.

Know when to get help fast

Numb feet may not hurt, even when something is wrong. Check this list first.^{1,2}

● Call 911 or go to the ER now

- Sudden weakness or numbness on one side of the body, a drooping face, or trouble speaking
- New trouble breathing or swallowing
- Severe back pain with new bladder or bowel problems, or numbness in the groin area
- Weakness or numbness that spreads quickly over hours or days
- A hot, swollen, or discolored foot **with fever, chills, or feeling unwell**

● Call us or your doctor today

- A new sore, blister, or cut on your foot
- Redness that spreads, or drainage from a wound
- A foot that is suddenly hot, swollen, or a different color

Balance Foot & Ankle: (810) 206-1402. If we are closed, go to urgent care.

● Plan a visit

- Burning, tingling, or numbness that doesn't go away
- Symptoms that change with your shoes or activity
- Foot pain that keeps you up at night

DO THIS

Stay off a new foot sore until it has been checked.

Four steps, one goal

Pick one everyday thing you want to do more easily. Then work through these steps with your care team.

1 **Locate**

Find where the problem starts and what is causing it. Diabetes, low B12, a medicine, or a squeezed nerve can all play a part.

2 **Unload**

Take pressure off. The right shoes, inserts, or small changes to a task can calm a nerve and protect your skin.

3 **Build**

Get stronger and steadier. Move most days, eat well, and protect your sleep.

4 **Recheck**

Set a date to see what helped. Keep what works. Change what doesn't.

Meal

Eat one healthy meal

Move

Move your body

Mirror

Check your feet

Do these three things every day. They take a few minutes and can lower your risk for years.

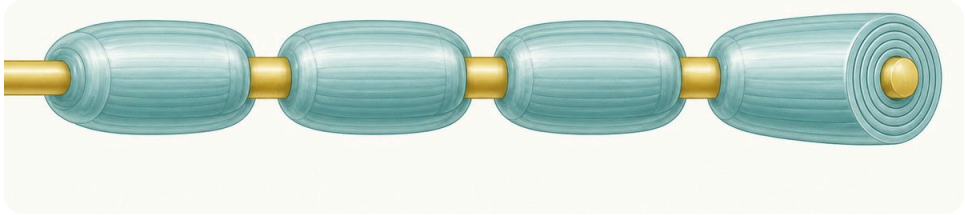
My goal (for example: walk to the mailbox without stopping)

My first step

My check-in date

What is peripheral neuropathy?

Your nerves carry messages between your body and your brain. Neuropathy means some of those nerves are damaged. Messages get mixed up, or don't arrive at all.³



The gold core (the axon) carries the signal. The teal wrap (myelin) insulates it. Neuropathy can harm either one.

You may feel burning, tingling, numbness, sharp or electric pains, weakness, or trouble with balance. Pain and numbness can happen together.

Common causes^{3,4}

- **Diabetes** and high blood sugar
- **Low vitamin B12**, or **too much vitamin B6** from supplements
- **Heavy drinking**
- **Kidney or liver disease**, or an **underactive thyroid**
- **Some medicines**, including some cancer treatments
- **A squeezed nerve** in the ankle, foot, or back
- Less often, immune or inherited conditions

Sometimes no cause is found. This is called idiopathic neuropathy. You can have more than one cause.

Tests to ask about, and can it get better?

At your foot exam

A light-touch test with a thin nylon thread (a monofilament), a vibration test with a tuning fork, and checks of your strength, balance, and circulation.

Blood tests⁵

The most useful first tests are **blood sugar**, **vitamin B12** (with a test called MMA), and a protein test called **serum immunofixation**. Your clinician may add others. Nerve tests (EMG) can miss damage to small nerve fibers.³

Can it get better? It depends on the cause.

CAUSE	WHAT CAN HAPPEN
Low B12 or a medicine	Symptoms may ease once the cause is fixed. Nerves heal slowly. ³
A squeezed nerve	Symptoms may ease once the pressure is relieved. ⁶
Diabetes	Keeping blood sugar in a safe range may ease symptoms and help protect your nerves. ^{3,7}
Unknown cause	Pain, sleep, and walking can still improve with a good plan.

DR. TOM'S TAKE



“Better sleep, easier walking, and fewer interruptions can matter, even when numbness remains.”

Not sure what's causing yours? A

Balance neuropathy evaluation looks for the cause.

Book an evaluation
or call (810) 206-1402

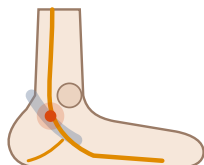
Where does the burning start?

Where you feel it gives your doctor clues. These are clues, not a diagnosis, and more than one problem can happen at once.^{3,6,8}



Both feet, like socks

Often a nerve problem throughout the body. Check for diabetes, low B12, and other causes.



Inner ankle, into the sole

May be **tarsal tunnel syndrome**, a squeezed nerve at the ankle.



Ball of the foot, into the toes

May be **Morton's neuroma**, a thick nerve, often between the 3rd and 4th toes.



Low back, down the leg

May be **sciatica**, a pinched nerve root in the lower back.



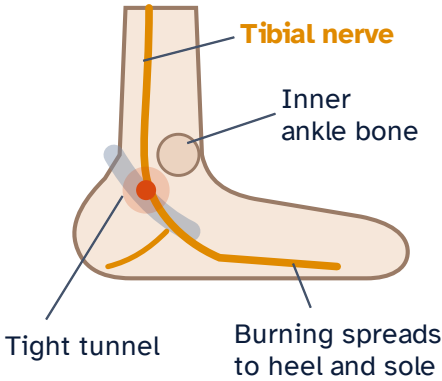
DR. TOM'S TAKE

"Burning is a symptom, not a street address."

DO THIS

Notice where it starts and what makes it worse: shoes, standing, walking, or sitting.

Squeezed nerves a foot doctor can treat



Tarsal tunnel syndrome⁶

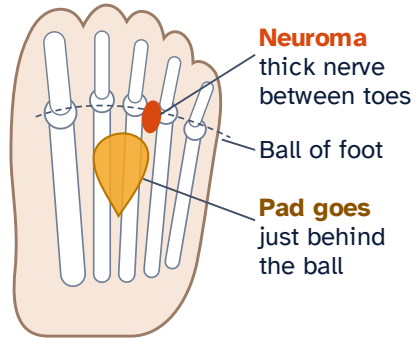
A nerve runs through a tight space behind the inner ankle bone. Swelling, a cyst, or foot shape can press on it, often after standing or walking.

Care: rest from the trigger, supportive shoes, a fitted insert, and physical therapy. Some people need a brace, a shot, or surgery.

Morton's neuroma⁸

A nerve between the toes gets thick. It can feel like a pebble in your shoe. Narrow or high-heeled shoes make it worse.

Care: wider, lower shoes and a metatarsal pad just behind the ball of the foot.⁹ In a study of 72 people, custom insoles eased walking pain more than flat ones.¹⁰



What about surgery? Freeing a nerve can help when one nerve is clearly trapped. For general diabetic neuropathy it is unproven. In a 2024 study, legs that had a fake operation improved about as much as the real ones after a year. At five years the treated legs did better, so the question isn't settled.¹¹

We check for trapped nerves and offer nerve surgery for selected patients.

Book an evaluation
or call (810) 206-1402

Five checks before you buy shoes

Numb feet can't always feel a bad fit. Use these checks every time you shop.^{2,12}



- ☐ **Bring your real setup.** Shop late in the day. Have both feet measured and fit the larger one. Wear your usual socks and bring your inserts.
- ☐ **Leave toe room.** Allow about ½ inch past your longest toe. Make sure the shoe is wide and deep enough.
- ☐ **Check the hold.** Lace or strap both shoes. Your heel should stay put, and no seam should rub.
- ☐ **Test your insert inside.** Ask if the shoe's own liner should come out first.
- ☐ **Walk before you buy.** Pick shoes that fit today. Don't count on them stretching.

AFTER YOU BUY

Wear new shoes for short periods at first, then check your skin. Call us about a blister, sore, or red spot that doesn't fade.

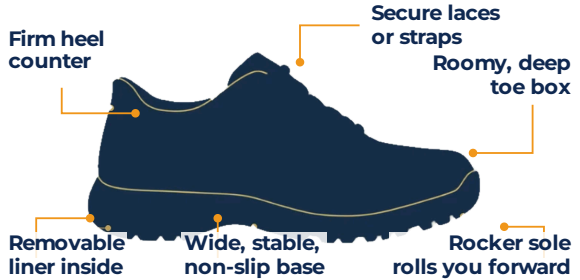


DR. TOM'S TAKE

"Your feet do not owe a tight shoe a second date."

Our top shoe picks

Look for these six features first. Then try on the models below with your socks and inserts. Numb feet can't judge fit, so have a fitter check.¹²



DR. TOM'S PICK	WHY WE LIKE IT	
HOKA Bondi 9 BEST CUSHION	Thick, soft rocker sole with a smooth inside. Watch for: A tall sole. Unsteady? Pick a lower shoe.	Notes
Brooks Addiction Walker 2 BEST STABILITY	Stable leather walker in four widths. Strap version too. Watch for: Heavy, with a narrow toe box. Size wide.	Notes
Orthofeet Coral (women's) BEST EXTRA DEPTH	Extra depth, seam-free inside, removable insole. Watch for: The stretch upper holds the foot less firmly.	Notes
KURU ATOM 2 BEST WIDTH CHOICES	Comes in more widths than most trainers, with a removable insole. Watch for: Independent measurements put the toe box near average. Start with the wide.	Notes
HOKA Transport 2 BEST EVERYDAY LOOK	A flatter, less sporty shoe for all-day wear. Watch for: Less cushion than the Bondi.	Notes
Altra Torin 9 BEST WIDE FIT	One of the widest toe boxes, on a flat sole. Watch for: Flat soles can strain tight calves. Go slowly.	Notes

Can't bend to tie laces? A strap closure or hands-free slip-in can help. Make sure the heel still holds your foot snugly.¹³



See the full neuropathy shoe guide at podiatristtested.com. Picks come from published specs and Dr. Tom's clinical experience, not lab tests. Some links on our websites may earn the practice a commission.

Our top insole picks

The right insert spreads pressure out; the wrong one can press into a numb foot without you feeling it. With lost feeling we prefer a soft, molded insert — guidelines ask for proven pressure relief.^{14,15,16}



Firm support



Soft, molded

DR. TOM'S PICK	WHY WE LIKE IT
PowerStep Pinnacle BEST STORE-BOUGHT SUPPORT	Firm but flexible arch shell and a deep heel cup. Pinnacle Maxx adds more support for flat feet. Watch for: Firm inserts can press into a numb foot. Ask us first if you've lost feeling. Notes
CURREX RunPro BEST SLIM INSOLE FOR ACTIVE WALKERS	Low, medium, and high arch versions for different feet. Watch for: Built for running shoes. It doesn't spread pressure like a soft molded insert. Notes
PowerStep Pinnacle Plus Met BEST FOR PAIN UNDER THE BALL OF THE FOOT	A built-in pad lifts pressure off the ball of the foot. Watch for: The pad only works if it sits just behind the sore spot. Have us check the fit. Notes
Custom accommodative inserts BEST IF YOU'VE LOST FEELING, HAD AN ULCER, OR HAVE A DEFORMITY	Soft inserts molded to your foot spread pressure. Shoes and inserts with proven pressure relief have the best evidence for keeping ulcers from coming back. Watch for: Made and fitted by a clinic, not bought off a shelf. Notes

SOCKS

Seamless socks with a loose top that pull away sweat. Light colors show drainage. Get your circulation checked before compression socks.¹⁷

MEDICARE SHOES

With diabetes, Medicare Part B may help pay for one pair of therapeutic shoes plus 2 or 3 more pairs of inserts a year. Your diabetes doctor must certify it.¹⁸ [See the rules](#)

Balance fits custom orthotics and diabetic shoes.

Book a fitting
or call (810) 206-1402

A simple strength and balance starter



In an 8-week study of 42 people with diabetic neuropathy, adding balance and reaction training helped pain, balance, and walking more than general exercise.¹⁹

Left: seated toe lifts. Right: sit-to-stand.

MOVE	HOW	START WITH
Seated toe lifts	Sit tall. Lift your toes toward your shins, then lower.	10 times
Seated heel lifts	Lift your heels, then lower.	10 times
Sit-to-stand	Use a sturdy chair with arms. Stand up, then sit down slowly.	5 times
Counter balance	Hold a kitchen counter, feet apart. Stand tall and steady.	20 seconds
Walk	Walk at an easy pace. Add a few minutes each week.	5 minutes

STOP RULES

Stop for sharp pain, chest pain, dizziness, or more tingling or numbness. Check your feet after. Have an open sore, balance problems, or recent surgery? Ask us or a physical therapist for a safe plan first.

Build up to an active week

These are goals for adults with diabetes. Work up to them slowly. They are not where you start.²⁰

TYPE	WEEKLY GOAL
Aerobic, like walking	150 minutes, spread over 3 or more days
Strength	2 to 3 days, not back to back
Balance and stretching	2 to 3 days (for older adults)
Sitting less	Get up and move about every 30 minutes

WALK AFTER MEALS

In a study of 41 adults with type 2 diabetes, a 10-minute walk after each meal lowered blood sugar after meals more than one 30-minute walk a day.²¹



Illustration. Sit to prepare food, take planned breaks, and notice what makes symptoms worse.

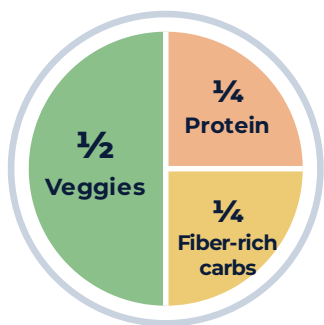
BLOOD SUGAR SAFETY

If you use insulin or pills that can cause low blood sugar, follow your low-blood-sugar plan when you change your activity or meals.

DO THIS

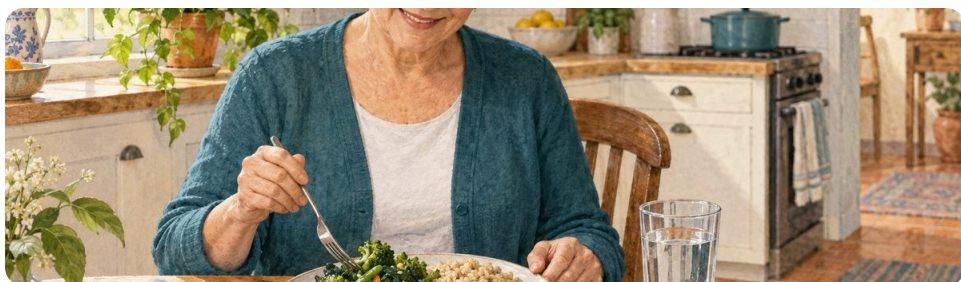
Pick one time today for a 10-minute walk.

Fill your plate for steady blood sugar



Water

Fill half your plate with nonstarchy vegetables, a quarter with protein, and a quarter with high-fiber carbs. Drink water or other drinks without added sugar.²²



- **Keep quick meals on hand:** frozen vegetables, beans, and brown rice.
- **Limit alcohol.** Heavy drinking can damage nerves on its own.³
- **Get enough B12** from fish, meat, eggs, dairy, or fortified foods.²³
- **Keep blood sugar in your target range.** It is one of the few things shown to slow nerve damage.⁷

CHECK FIRST

If you take diabetes medicine, talk with your care team before fasting or cutting carbs a lot. Kidney disease may call for different advice.

DO THIS

Plan two easy, healthy meals for this week.

Supplements, ranked

Start with a reason, not a bottle. We list these in the order we would raise them, with the strength of the research beside each. Ask your doctor or pharmacist first.

#	WORTH DISCUSSING	WHAT STUDIES SHOW	RATING
1	Vitamin B12	Treats nerve damage from low B12. Test first, especially on metformin. ²³	• Strong, if low
2	Vitamin D	Eased nerve pain in small, short studies. Check your level; stay at or below 4,000 IU a day. ²⁴	• Promising
3	Alpha-lipoic acid (ALA)	600 mg eased symptoms at 5 weeks; 6-month studies found little benefit. May affect blood sugar — ask first if you use insulin. ²⁵	• Mixed or limited
4	Acetyl-L-carnitine	Mixed results for nerve pain. Don't use it during chemotherapy; in a trial it made chemo nerve damage worse for two years. ^{26,27}	• Mixed or limited
5	PEA	Eased pain in one 8-week study of 70 people. ²⁸	• Promising
6	L-methylfolate blend (Metanx)	Slight benefit in one maker-run study. 35 mg of B6 a capsule, 70 mg a day as studied (page 16). ²⁹	• Mixed or limited
7	Benfotiamine (B1)	Safe, but a 12-month study found no nerve benefit. ³⁰	○ Not shown

SKIP, OR BE CAREFUL

High-dose B6 can cause neuropathy³¹

“Nerve support” blends unproven, often loaded with B6³²

Vitamin E no benefit; high doses raise bleeding risk³³

Fish oil two small trials; not enough evidence³⁴

Lion's mane no studies in neuropathy³⁵

Turmeric pills newest study negative; liver injuries reported³⁶

NAD+ and NR best study negative³⁷

Extra magnesium over 350 mg a day, or with kidney disease³⁸

Ratings by strength of the human research:

• Strong

• Promising

• Mixed

○ Not shown

✗ Avoid

B12 and B6: too little and too much

Low B12 can damage nerves²³

You are more likely to be low if you take metformin, are an older adult, had stomach or bowel surgery, have pernicious anemia, or eat no animal foods.

- **Ask for a B12 test.** If you take metformin, ask about regular checks. You usually don't need to stop metformin.
- **Treatment depends on the cause.** People with pernicious anemia or major stomach or bowel surgery usually need B12 shots for life. Others may take high-dose B12 pills (at least 1 mg a day) or shots, as their clinician advises.
- **Don't wait if you have nerve symptoms.** If low B12 is strongly suspected, treatment may start before results come back.

Too much B6 can cause the same symptoms³¹

Add up the B6 in everything you take. It may be listed as pyridoxine or P-5-P.



Example labels, for illustration only.

Most adults need only 1.3 to 1.7 mg of B6 a day. The U.S. upper limit is 100 mg a day, and Europe's food safety agency now sets its limit at 12 mg a day. From June 2027, Australia will sell doses over 50 mg a day only through pharmacists or by prescription. Its regulator also warns that harm below 50 mg a day can't be ruled out.³⁹

NEW SYMPTOMS?

If new tingling or numbness starts, stop any B6 product you chose yourself and call your doctor. If B6 was prescribed, call your prescriber before stopping.

Check your feet every day

When your feet are numb, your eyes have to do the work.²



TIP

To see your soles, use a hand mirror, your phone's camera, or a helper.

Look for

- Cuts, blisters, or cracks
- Red, warm, or swollen spots
- Drainage or a bad smell
- Changes in skin or nail color

Look at

- Tops and soles
- Heels and sides
- Toe tips
- Between the toes

CALL TODAY

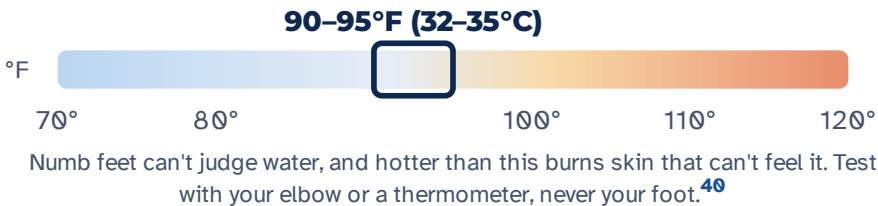
Call us today for a new sore, spreading redness, drainage, or a foot that is suddenly hot, swollen, or discolored:
(810) 206-1402.

DO THIS

Keep a mirror next to your socks so you remember.

Everyday habits that prevent problems

- ☐ Wash in **warm, not hot**, water. Don't soak your feet.²
- ☐ **Dry well**, especially between your toes.
- ☐ Put **lotion** on dry skin, but not between your toes.
- ☐ Always wear **shoes or slippers with firm soles**, even at home.
- ☐ **Shake out your shoes** and check for folded inserts before you put them on.
- ☐ Keep **heating pads and hot water bottles** away from your feet.
- ☐ **Don't cut corns or calluses** or use chemical removers. Get help with nails if you can't see or reach your feet.



ASK ABOUT HOME TEMPERATURE CHECKS¹⁵

For some people with diabetes at moderate or high risk of foot ulcers, a daily skin temperature check can catch trouble early. If the same spot is more than 2.2°C (4°F) warmer on one foot than the other two days in a row, walk less and call your care team. A clinician should teach you how.

Balance offers professional callus and nail care for at-risk feet.

Book a visit
or call (810) 206-1402

Make your home fall-safe

Numb feet make it harder to feel the floor. These changes can lower your chance of a fall.⁴¹

WHERE	WHAT TO DO
Floors	Remove throw rugs or use non-slip backing. Clear clutter and cords from walkways.
Stairs	Keep them clear. Add handrails on both sides and lights at the top and bottom.
Bathroom	Use a non-slip mat in the tub or shower. Add grab bars by the tub and toilet.
Bedroom	Keep a lamp within reach of your bed. Use night-lights on the way to the bathroom.
Kitchen	Keep things you use often on lower shelves. Use a step stool with a handle, never a chair.
You	Wear shoes with soles indoors. Stand up slowly. Ask your pharmacist if any medicine makes you dizzy. Get your eyes checked. Keep doing your balance moves (page 12).



We check walking, balance, and fall risk, and offer balance training.

Book an evaluation
or call (810) 206-1402

When your feet keep you up at night



Why nights can feel worse⁴²

There are fewer distractions, so you notice pain more. Your body cools at night, and damaged nerves can read that change as pain. Poor sleep and stress can make pain feel stronger.

Try this

- Get up at the same time every day, and wind down with a calm routine.
- Try lighter bedding, or a bed cradle that keeps covers off your toes.
- Keep your room comfortable. Don't use heating pads on numb feet.
- Light a clear path to the bathroom.
- Write tomorrow's to-do list before bed, then set it aside.
- Ask your doctor if the timing of your pain medicine fits your nights.



DR. TOM'S TAKE

"A difficult day is information for your plan, not a personal failure."

Pain still keeping you up? Let's review your plan.

Book an evaluation
or call (810) 206-1402

Pain relief that works

Prescription medicines • Strong evidence

Experts recommend four types:⁴³ **SNRIs** such as duloxetine; **gabapentin or pregabalin**; **tricyclics** such as amitriptyline; and **sodium-channel blockers**. If one doesn't help, your doctor may change the dose, switch, or combine two. They can cause sleepiness, dizziness, or ankle swelling, which raise fall risk, and the goal is less pain, not none. In the largest trial (140 people, no placebo), average pain fell from 6.6 to 3.3.⁴⁴

Opioids, including tramadol and tapentadol, are **not recommended** for this pain.⁴³ **Never stop, start, or combine pain medicines on your own.**

SKIN TREATMENT	WHAT TO KNOW	RATING
Capsaicin cream	Made from chili peppers. May burn at first. Wash hands after use. ⁴⁵	▸ Mixed or limited
Lidocaine cream or patch	Numbs the skin. The 5% patch is approved for shingles, so this use is off-label: 12 hours in 24, not on broken skin, no heat on top. ⁴⁵	▸ Mixed or limited
Qutenza (8% capsaicin patch)	FDA-approved for diabetic nerve pain in the feet. Applied in the office for 30 minutes, up to every 3 months; pain fell about 30% vs 22% with placebo. Expect burning; your clinician checks your feeling first. ⁴⁶	• Proven, modest
TENS unit	Mild electric pulses through skin pads. Not on numb or broken skin, and not with a pacemaker or other implant, epilepsy, or pregnancy. ⁴⁷	▸ Mixed or limited

Balance offers medicine management, creams, patches, and TENS.

Book an evaluation
or call (810) 206-1402

Newer treatments, rated

TREATMENT	WHAT WE KNOW	RATING
Laser and light therapy (including MLS) Offered at Balance	Mixed results for pain in small studies, with no nerve regrowth. MLS itself is untested. ⁴⁸	▸ Mixed or limited
Shockwave (EPAT) Offered at Balance	Used for other foot problems. In one small neuroma trial it was no better than sham. ⁴⁹	▸ Mixed or limited
Nerve decompression surgery Offered at Balance	Can help a clearly trapped nerve. Unproven for general diabetic neuropathy. ¹¹	▸ Mixed or limited
Spinal cord stimulator Pain specialist	For severe nerve pain when medicines fail. 79% got half their pain relieved at 3 months vs 5% with usual care (unblinded, maker-funded). An implant: 2 of 90 removed for infection. ⁵⁰	● Strong, for some
Magnetic nerve stimulation Some clinics	FDA-cleared for diabetic nerve pain. One short, maker-funded study. ⁵¹	◀ Promising
Acupuncture Acupuncturist	One study found less numbness. Another found no benefit over fake needles. ⁵²	▸ Mixed or limited
Low-dose naltrexone Prescriber	Off-label. One small study, no placebo. ⁵³	◀ Early
PRP, stem cells, exosomes	PRP: one small study. FDA warns about unapproved stem cell and exosome products. ⁵⁴	✗ Avoid unapproved
Topical pirenzepine, suzetrigine Clinical trials	Pirenzepine is studied for nerve regrowth, suzetrigine for nerve pain. Neither is available yet. ^{55,56}	◇ Research only

Seen it online? Here's what the evidence says

Our honest take on what people are talking about in 2026. The bar under each rating shows how strong the proof is.



"Nerve support" pills

› Mixed or limited

Ads borrow results from studies of single ingredients like ALA, where placebo also helped a lot. Add up the B6 on the label.^{31,32}



Red light and infrared

› Mixed or limited

The largest sham-controlled study found infrared no better than a fake device; a smaller one found less pain but no nerve regrowth.⁵⁷



Vibration plates

› Mixed or limited

May ease pain a little. Hold a rail, wear shoes, and keep doing balance exercises.⁵⁸



TENS and foot stimulators

› Mixed or limited

A TENS unit may dull pain while it's on. Foot stimulators sold for circulation aren't proven for neuropathy.^{47,59}



Compression socks

○ Not for nerves

Mild compression (18-25 mmHg) can ease swelling, not nerve damage. Ask us first if your feet are numb or your circulation is poor.^{17,60}



CBD creams and oils

› Mixed or limited

One small study helped. A newer placebo-controlled study, in chemotherapy nerve pain, found no benefit.⁶¹



GLP-1 shots (Ozempic, Wegovy, Mounjaro)

› Mixed or limited

They treat blood sugar and weight, not nerves, and may lower ulcer risk. Report new burning or tingling. Get a hot, swollen foot checked the same day.⁶²



Journavx (suzetrigine)

◇ Under study

A new non-opioid pain pill, approved only for short-term pain. Large studies in diabetic nerve pain are underway.⁶³

More trends, fact-checked



Magnetic insoles and bracelets

○ Not shown to help — — — — —

No good evidence they ease pain. Strong magnets can interfere with pacemakers and insulin pumps.⁶⁴



NAD+ drips, NR, and NMN

○ Not shown to help — — — — —

In the best study, NR didn't protect or regrow nerves. Skip pricey NAD+ drips for neuropathy.³⁷



Methylene blue

✗ Avoid — — — — —

No studies in neuropathy. It can cause a dangerous reaction with duloxetine, venlafaxine, tramadol, and other medicines.⁶⁵



Lion's mane mushroom

○ Untested — — — — —

Never tested in people with neuropathy. The nerve-growth claims come from lab and animal studies.³⁵



Grounding and barefoot shoes

✗ Avoid if numb — — — — —

Grounding has never been tested for neuropathy. If your feet are numb, don't go barefoot, even at home.⁶⁶



Cold plunges, saunas, hot foot baths

✗ Use caution — — — — —

Numb feet can't feel burns or frostbite. Don't soak them; wash at 90-95°F (32-35°C) and test the water with your elbow. Starting chemo? Ask about cooling gloves.⁴⁰



Castor oil, cayenne, and DMSO rubs

○ Untested — — — — —

Home-made rubs aren't standardized, and DMSO sold as a solvent isn't made for skin. Ask about the prescription capsaicin patch instead (page 21).⁶⁷



"Reversal" clinics and prepaid packages

✗ Avoid — — — — —

No clinic can promise to reverse neuropathy. Regulators have acted against false neuropathy claims. Get a second opinion before you sign.^{11,68}

"Reversal" diets (carnivore, keto) aren't proven to reverse neuropathy. Dropping high blood sugar too fast can briefly worsen nerve pain.⁶⁹

Before you try something new

Ads and podcasts can spark good questions. Before you spend money, ask four things:

1. **Does it fit my diagnosis?**
2. **What happened in studies with real people?**
3. **What are the risks and the full cost?**
4. **When will we check if it's working?**

Give every treatment a finish line

1. Start

Rate your pain, sleep, and one activity from 0 to 10. Agree on the full cost.



2. Try

Use the agreed dose, device, or number of visits.



3. Check

Review it on the date you set together.



4. Decide

Keep it, change it, or stop it.



DR. TOM'S TAKE

"Investigational" doesn't mean it doesn't work. It means the key questions aren't answered yet."

WATCH FOR HYPE

Be careful with promises to “reset” or “regrow” nerves, claims of “no side effects,” big packages you pay for up front, and before-and-after videos in place of studies.

DO THIS

Bring the claim, the product label, or the link to your visit. We'll look at the evidence with you. Use the worksheet on page 31.

Your neuropathy evaluation at Balance

We look for causes we can treat, check your safety, and build a plan with a review date.

What we check

- Feeling in your feet: light touch, vibration, sharp vs. dull, and joint position
- Circulation: pulses, skin temperature, and color
- Strength, walking, balance, and fall risk
- Skin and nails: calluses, cracks, sores, and fungus
- Your shoes and inserts
- Blood tests we may order, like A1C, glucose, B12, folate, and thyroid
- Nerve testing (EMG) through a neurologist when needed

What we may offer

- Custom orthotics and diabetic shoes
- Prescription pain medicines, creams, and patches
- Balance, strength, and walking training
- TENS
- Callus and nail care
- MLS laser and EPAT shockwave as extras. Insurance rarely pays, so we quote the cost first (page 22)
- Nerve surgery when one nerve is clearly trapped
- Care for Charcot foot

BRING WITH YOU

Your usual shoes and inserts. A list of your medicines and supplements, or the bottles. Your 7-day tracker (page 30).

Ready for a plan? Book online for Howell or Bloomfield Township.

Book online
or call (810) 206-1402

Book your visit

MEET YOUR TEAM

Dr. Tom Biernacki

Dr. Carl Jay

Dr. Daria Gutkin

Foot and ankle care in two
Michigan offices

Call us

(810) 206-1402

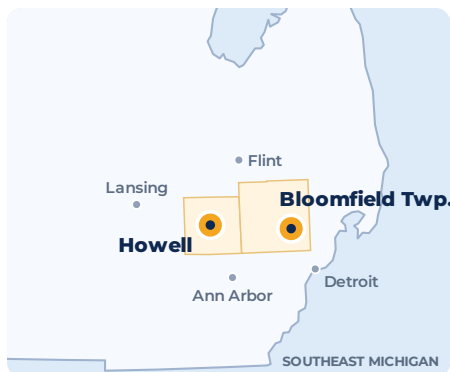
Ask about same-week visits. Rated 4.9
stars from 1,123+ reviews.

Howell

4330 E Grand River Ave
Howell, MI 48843

Bloomfield Township

43494 Woodward Ave #208
Bloomfield Township, MI 48302



Book online

Scan with your
phone camera



New patients

Forms and
callback requests

What happens next

- 1 Book online or call.
- 2 Fill out your forms.
- 3 Bring shoes, inserts, and medicines.
- 4 Leave with a plan and a review date.

[Check your insurance](#)

Meet Dr. Tom Biernacki



Dr. Tom Biernacki is a podiatrist and foot and ankle surgeon. He founded Balance Foot & Ankle in 2020 and has practiced since 2016.

He is board-certified by the American Board of Foot & Ankle Surgery and the American Board of Podiatric Medicine. He is a Fellow of the American College of Foot & Ankle Surgeons.

He earned his Doctor of Podiatric Medicine degree at Kent State University College of Podiatric Medicine, completed his residency at St. Mary Mercy Hospital in Livonia, Michigan, and did advanced fellowship training in Texas and Tennessee. His areas of focus include peripheral nerve surgery.

He teaches foot health to more than 950,000 YouTube subscribers. This free guide is a short companion to his book, *Managing Peripheral Neuropathy*. The full 186-page book is at managingneuropathy.com/book.

HOW THIS GUIDE WAS MADE

Every health claim was checked against clinical guidelines and published studies. Sources are listed on pages 32 and 33. Most illustrations are AI-assisted artwork of imagined scenes, not real patients; the team photo is real. The shoe drawing comes from podiatristtested.com. Product picks and links on our websites may earn the practice a commission; no purchase is needed to use this guide.

[Read Dr. Tom's full bio](#)

See Dr. Tom and the Balance team in
Howell or Bloomfield Township.

Book an evaluation
or call (810) 206-1402

More free help from our websites

Dr. Tom and the Balance team write these free resources. Scan a code or tap a link. Some product links earn the practice a commission.

Balance Foot & Ankle



michiganfootdoctors.com

Book a visit, get forms, and check your insurance.

- [Book a neuropathy evaluation](#)
- [New patient forms](#)
- [Insurance we take](#)

Managing Neuropathy



managingneuropathy.com

Everyday care for numb, burning feet.

- [One-minute daily foot check](#)
- [Questions to bring to your visit](#)
- [Socks and slippers for neuropathy](#)

Podiatrist Tested



podiatristtested.com

Dr. Tom's shoe and insole guides, with the specs.

- [Best shoes for neuropathy](#)
- [Find my shoes](#)
- [Toe box width chart](#)

Diabetic Foot Guide



diabeticfootguide.com

Diabetes and your feet, explained simply.

- [Medicare diabetic shoes](#)
- [What a diabetic foot exam checks](#)
- [Warning signs to act on](#)

Dr. Tom on YouTube



youtube.com/@DrTomBiernacki

Foot pain, shoe and neuropathy videos for 950,000+ subscribers.

- [Watch Dr. Tom's videos](#)

Your first week and tracker

Days 1–2	Choose your goal and rate where you're starting. Note where symptoms start. Gather your medicine and supplement list.
Days 3–4	Check your shoes (page 9). Make one change: a shoe, an insert, or how you do a task.
Days 5–6	Try the starter moves (page 12). Check your skin afterward.
Day 7	Look back: what helped? What needs a change? Book a visit if you need help.

DAY	FOOT CHECK	PAIN 0–10	NIGHT WAKE-UPS	MY GOAL ACTIVITY: WHAT CHANGED?
1	☐	_____	_____	_____
2	☐	_____	_____	_____
3	☐	_____	_____	_____
4	☐	_____	_____	_____
5	☐	_____	_____	_____
6	☐	_____	_____	_____
7	☐	_____	_____	_____

What got better, stayed the same, or got harder?

Pain: 0 means no pain; 10 means the worst pain you can imagine. Rate it at about the same time each day. This tracker helps your visit. It is not a medical test.

Your visit and treatment plan

Before your visit

Where my symptoms started, and what makes them better or worse

What is hardest for me right now

What I have tried, what helped, and any side effects

My top three questions

The treatment we agreed on

Treatment, dose, or device, and the full cost

Start date

Review date

What would count as success (pain, sleep, one activity)

Reasons to stop or call early

Ask before you leave: What are we trying next? What should I watch for?

When will we check how it's going?

Where the facts come from

Small numbers in this guide match this list. Each source is a link.

- 1** NICE NG127 (UK): neurological red flags.
- 2** CDC: Your Feet. NIDDK: Foot Problems.
- 3** NINDS: Peripheral Neuropathy.
- 4** Mayo Clinic: Peripheral neuropathy.
- 5** AAN: Polyneuropathy testing, 2009.
- 6** ACFAS: Tarsal Tunnel Syndrome.
- 7** ADA Standards of Care 2026, Sec. 12.
- 8** AAOS: Morton's Neuroma.
- 9** Hsi, Am J Phys Med Rehabil 2005.
- 10** de Oliveira, Clin Rehabil 2019.
- 11** Rozen, Ann Surg 2024.
- 12** AAOS: Shoe fit. AOFAS: 10 points of shoe fit.
- 13** Podiatrist Tested: Best shoes for neuropathy (spec analysis). HOKA Bondi 9. Brooks Addiction Walker 2. Orthofeet Coral. KURU ATOM 2. HOKA Transport 2. Altra Torin 9. Skechers Hands Free Slip-ins.
- 14** AOFAS: Orthotics.
- 15** IWGDF 2023 prevention guideline.
- 16** Podiatrist Tested: Insoles. PowerStep Pinnacle. PowerStep Pinnacle Plus Met. CURREX RunPro. Diabetic Foot Guide: Medicare shoes.
- 17** IWGDF 2023 practical guidelines. Compression consensus, Phlebology 2020.
- 18** Medicare.gov: Therapeutic shoes.
- 19** Khurshid, BMC Neurosci 2025.
- 20** ADA Standards of Care 2026, Sec. 5.
- 21** Reynolds, Diabetologia 2016.
- 22** CDC: Diabetes meal planning.
- 23** NIH: Vitamin B12. NICE NG239. MHRA 2022.
- 24** Vitamin D meta-analysis, Endocrinol Diabetes Metab 2025. NIH: Vitamin D.
- 25** SYDNEY 2, Diabetes Care 2006. Cochrane 2024.
- 26** Cochrane acetyl-L-carnitine review 2019.
- 27** Hershman, J Natl Cancer Inst 2018 (worse at 2 years). Hershman, J Clin Oncol 2013.
- 28** Pickering, Inflammopharmacology 2022.
- 29** L-methylfolate combination trial, Am J Med 2013.
- 30** BOND trial, BMJ Open DRC 2026.
- 31** NIH: Vitamin B6. TGA: B6 neuropathy.
- 32** SYDNEY 2, Diabetes Care 2006. National Advertising Division, 2021. FTC order on a neuropathy supplement seller, 2022.
- 33** VENUS trial, JAMA Neurol 2018. NIH: Vitamin E (bleeding risk).
- 34** Cochrane omega-3 review 2025 (2 trials, 87 people).
- 35** MSK: Lion's mane. Front Nutr 2025 review.
- 36** Nano-curcumin trial, Nutr J 2025. NCCIH: Turmeric.
- 37** Nicotinamide riboside trial, J Peripher Nerv Syst 2026.
- 38** NIH: Magnesium (upper limit, kidney disease).

SOURCES, CONTINUED

- 39** TGA: B6 safety update. TGA final decision, Nov 2025.
- 40** Warm foot-bath trial, Complement Ther Med 2020. Cryotherapy in chemotherapy, Support Care Cancer 2024. Foot-bath burns, BJMP 2014. IWGDF 2023 practical guidelines.
- 41** CDC STEADI: Check for Safety.
- 42** Cleveland Clinic: Worse at night.
- 43** AAN guideline, Neurology 2022.
- 44** OPTION-DM, Lancet 2022.
- 45** NICE CG173. Lidocaine 5% patch label. Cochrane low-dose capsaicin 2012.
- 46** Qutenza label (DailyMed).
- 47** NHS: TENS.
- 48** Lavery, Diabetes Care 2008 (sham-controlled). Monochromatic infrared trial, Neurol India 2021.
- 49** Seok, J Am Podiatr Med Assoc 2016 (neuroma, sham-controlled).
- 50** SENZA-PDN, JAMA Neurol 2021.
- 51** FDA K233364. AT-PDN, Neuromodulation 2025.
- 52** ACUDPN, World J Diabetes 2023. Zardosht, JDMD 2023.
- 53** Srinivasan, J Diabetes 2021.
- 54** Hassanien, Pain Med 2020. FDA: Regenerative medicine.
- 55** Sivadasan, EBioMedicine 2026.
- 56** Journavx label. Vertex Q2 2026.
- 57** Lavery, Diabetes Care 2008. CMS NCD 270.6.
- 58** Whole-body vibration review, 2018. Vibration trial, J Diabetes Metab Disord 2020.
- 59** Electrical stimulation meta-analysis, Sci Rep 2020. Home foot-stimulator trial, BMC Geriatr 2024 (maker-funded; severe neuropathy excluded).
- 60** Compression socks in diabetes, DRCP 2017.
- 61** Topical CBD trial, Cannabis Cannabinoid Res 2024. Xu, Curr Pharm Biotechnol 2020.
- 62** GLP-1 cohort, J Neurol 2026. Wegovy label, 2026. Treatment-induced neuropathy, Brain 2015.
- 63** Journavx label. Vertex phase 2, Dec 2023. Vertex, Aug 2026.
- 64** NCCIH: Magnets for pain, updated Jan 2023.
- 65** Methylene blue label (boxed warning).
- 66** IWGDF 2023 practical guidelines.
- 67** Qutenza label, 2020.
- 68** FTC action, Jan 2025. FDA: Health fraud tip-offs.
- 69** Diet trial, Nutr Diabetes 2015. Treatment-induced neuropathy, Brain 2015. Low-carbohydrate diet case, Obes Pillars 2024.

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