

Rethink of the New Treatment for Refractory Painful Diabetic Peripheral Neuropathy [Response to Letter]

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Dear editor

It's our honor to have this opportunity to reply to the letter and we are very pleased that our research can arouse the interest and resonance of readers.¹ Many patients have poor pain relief from oral medication and are prone to drug resistance. The effect of the therapy is indeed time dependent, however the therapeutic effect is very significant, which is very beneficial for patients with refractory painful diabetic peripheral neuropathy. We are still exploring further ways to maintain or improve long-term efficacy.

There are no serious complications in our therapy and the side effects of hoarseness and upper limb numbness are transient. Although electroacupuncture provides good relief for chronic pain with few side effects,² it is on the rats and there is still a significant difference in pain between humans and animals. The adverse events known to be related to electroacupuncture treatment are pain, dizziness, bleeding, aggravation, dizziness, anxiety and infection.³ With the maturity of our treatment technology, side effects have been greatly reduced.

The cost of ultrasound-guided pulsed radiofrequency therapy is not high and the therapy is suitable for those patients with refractory painful diabetic peripheral neuropathy. Patients who can successfully relieve symptoms with oral medication do not need to undergo this treatment, which will not cause unnecessary high medical costs to patients, and for the social medical security system.

In conclusion, the ultrasound-guided pulsed radiofrequency therapy of the stellate ganglion is a safe and effective modality to alleviate refractory painful diabetic peripheral neuropathy. Further efforts are needed in the future to improve long-term therapeutic efficacy for more patients.

Disclosure

The authors have declared that no conflict of interest exists in this communication.

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