

Peripheral Nervous System

(nerves outside the brain and spinal cord)



CMT is:

A disease of the peripheral nerves that control muscles (unlike the muscular dystrophies, which affect the muscles themselves). Found in both genders and in all races and ethnic groups, it is the most commonly inherited peripheral neuropathy, affecting 2.8 million people worldwide. CMT is slowly progressive, causing loss of normal function and/or sensation in the lower legs/feet and hands/arms. CMT is currently incurable, but not usually fatal, though it is severely disabling in a small proportion of cases.

What are the Symptoms of CMT?

- **First signs include frequent tripping**, ankle sprains, clumsiness and “burning” or pins-and-needles sensations in the feet or hands.
- **Structural foot deformities** such as high arches and hammertoes are common.
- **Muscle wasting in the lower legs and feet** may lead to foot drop, poor balance and other gait problems.
- **Muscular atrophy in the hands** often causes people to have difficulty with tasks involving manual dexterity, such as writing and manipulating zippers and buttons.
- **Abnormal sensation in the extremities** and an inability to sense where one’s body is in space are also common, and many people experience neuropathy, muscle or joint pain.
- **Poor tolerance for cool or cold temperatures** is typical and many people have chronically cold hands and feet.
- **Additional symptoms may include** fatigue, sleep apnea, breathing difficulties, scoliosis, kyphosis and hearing loss.
- **A CMT diagnosis involves** clinical evaluation of muscle function and atrophy, testing of sensory responses, and electromyographic and nerve conduction studies. Many types of CMT can also be diagnosed by genetic testing. Visit www.cmtausa.org/understanding-cmt/diagnosing-cmt/ for more information on diagnosing CMT.

Is there a Treatment for CMT?

Although there is no drug treatment for CMT, physical therapy and moderate activity (but not overexertion) can help maintain muscle strength, endurance and flexibility. Mechanical supports like AFOs (ankle-foot orthoses) and custom-made shoes can improve gait and balance. When medically indicated, orthopedic surgery can correct deformity and help maintain mobility and function. Occupational therapy and adaptive devices can help people perform activities of daily living.

Any medications people with CMT should avoid?

YES! Glad you asked! Some medications are potentially toxic to people with CMT. Vincristine has been proven hazardous and should be avoided by all CMT patients. Taxols also pose a high risk to people with CMT. The complete list of potentially neurotoxic medications can be viewed at www.cmtausa.org/medicationlist. Before taking any medication or changing medications, be sure your physician is fully aware of your medical condition, and discuss any possible side effects they may have on CMT. Have a drug/medication question? Visit www.cmtausa.org/medquest or email askthexpert@cmtausa.org.