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Ann Pharmacother. 2008 Nov;42(11):1686-91. doi: 10.1345/aph.1L201. Epub 2008 Oct 21.

Role of acetyl-L-carnitine in the treatment of diabetic peripheral neuropathy.

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Abstract

OBJECTIVE: To examine the role of acetyl-L-carnitine (ALC) in the treatment of diabetic peripheral neuropathy (DPN).

DATA SOURCES: A MEDLINE search (1966-April 2008) of the English-language literature was performed using the search terms carnitine, diabetes, nerve, and neuropathy. Studies identified were then cross-referenced for their citations.

STUDY SELECTION AND DATA EXTRACTION: The search was limited to clinical trials, meta-analyses, and reviews addressing the use of ALC for the treatment of DPN. Studies that included other disease states that could cause peripheral neuropathy were excluded. Two large clinical studies that used ALC for the treatment of DPN were identified. No case studies were identified.

DATA SYNTHESIS: The results from 2 published clinical trials involving 1679 subjects were included. **Subjects who received at least 2 g daily of ALC showed decreases in pain scores.** One study showed improvements in electrophysiologic factors such as nerve conduction velocities, while the other did not. Patients who had neuropathic pain reported reductions in pain using a visual analog scale. Nerve regeneration was documented in one trial. The supplement was well tolerated. A proprietary form of ALC was used in both studies.

CONCLUSIONS: **Data on treatment of DPN with ALC support its use. It should be recommended to patients early in the disease process to provide maximal benefit.** Further studies should be conducted to determine the effectiveness of ALC in the treatment and prevention of the worsening symptoms of DPN.

PMID: 18940920 [PubMed - indexed for MEDLINE]



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