

A photograph of Jerry Mathers, an older man with short grey hair, sitting on a green park bench. He is wearing a dark blue blazer over a light blue button-down shirt, dark blue trousers, and grey and orange New Balance sneakers. He is smiling slightly and looking towards the camera. The background shows a park with trees and a grassy area under bright, natural light.

# American Icon

*Leave It to Beaver* star  
Jerry Mathers reveals how  
he overcame neuropathy, a  
painful neurologic condition that  
affects millions of Americans.

BY SUSANNAH GORA

“I had the feeling of people sticking pins in my feet,” says Mathers. “I thought it was from being so overweight.”

**H**e'll always be known as “The Beaver”—and that's just swell. “It's something I'm very proud of,” says actor Jerry Mathers, 62, of portraying Theodore “Beaver” Cleaver, the adorable kid America loved to watch get into scrapes and out of them. *Leave it to Beaver* originally ran from 1957 to 1963 and has aired in reruns ever since. Along the way, the classic sitcom has become one of the most iconic TV shows of all time.

Young viewers learned a few lessons from the way “The Beav” handled himself. We can still learn a lot—about how to greet health challenges with a positive attitude—from Mathers. As the host of a new patient-education video and guidebook for the American Academy of Neurology (AAN) Foundation, he's spreading awareness about neuropathy, a painful neurologic condition that affects millions of Americans, including Mathers. (You can view the free video and guidebook by visiting [aan.com/patients](http://aan.com/patients). A limited supply of free printed guidebooks and videos are available by calling 800-879-1960.)

His health problems began in the 1990s. After starring in the sequel TV series *The New Leave It To Beaver*, Mathers branched out into other professional opportunities. “I bought a few companies,” he says, “one of which was a catering business. We were famous for a 60-foot-long dessert table.” Soon enough, the sweet temptations proved too much for Mathers to resist. “I put on about 70 pounds,” he says.

That's when he started noticing strange sensations. “I had the feeling of people sticking pins in my feet,” says Mathers. “I thought it was from being so overweight.”

Around that time, Mathers became friendly with his father's neurologist. (His dad had Alzheimer's disease.) “She noticed how much weight I was putting on,” Mathers recalls. “She told me, ‘You better go get a physical.’”

He resisted, thinking, “I feel good! I'm living the good life!” But she was persistent, offering Mathers a free checkup. “I thought I would go in there and everything would be fine.” Unfortunately, the checkup revealed that Mathers had diabetes. The sensations in his feet were from diabetic neuropathy.

## DIABETIC NEUROPATHY

Neuropathy, often referred to as peripheral neuropathy, “is a sometimes-painful impairment of sensation that typically affects the lower legs but can also affect the hands,” explains John Markman, M.D., director of neuromedicine pain management and associate professor at the University of Rochester School of Medicine in Rochester, NY. Many people with neuropathy also develop muscle weakness.

Neuropathy can be caused by injury, infection, various meta-

bolic problems, or—most commonly—diabetes. Because of the way neuropathy affects nerves, people with the disease can experience numbness—as if they are wearing gloves and stockings when they're not—or tingling. “It can feel like you are walking on wool,” says Stanley Mirsky, M.D., clinical professor of metabolic diseases at Mt. Sinai School of Medicine in New York, NY, and co-author of *Diabetes Survival Guide* (Ballantine Books, 2006).

As a result, neuropathy can interfere with a person's ability to walk. “It's hard to know where your feet are in space,” says Dr. Markman.



**MODEL CITIZEN**  
Jerry Mathers embodied an American ideal in *Leave it to Beaver* from 1957 to 1963. Now he is an example for his contemporaries confronting diabetes and neuropathy.

Although some people only experience neuropathy as tingling or numbness, others also feel painful sensations. “The pain may be worse at night and disrupt people's sleep,” Dr. Markman says. The disease can also be dangerous: People with diabetes often “lose the ability to distinguish potentially destructive injury to their feet. They can burn or cut their feet and not be aware of it, which can predispose them to more serious infections,” Dr. Markman says. “And chronic pain or numbness can impact a person's ability to concentrate and enjoy things,” he notes.

Mathers' symptoms were at their worst “when I was sitting and watching TV, and at night when I was in bed,” he recalls. It made sleeping difficult. “It's an excruciating pain,” he says.

Diabetes is “the most common known cause of neuropathy, by far,” says Dr. Markman. “About a quarter of people with type 2 diabetes have evidence of nerve damage at the time the diabetes is diagnosed.” Once known as adult-onset or noninsulin-dependent diabetes, type 2 diabetes is a chronic condition that affects the way the body metabolizes sugar. Neuropathy is sometimes the first sign that someone may have diabetes, but it can also surface once someone has lived with diabetes for quite a while.

Diabetes “commonly affects the nerves,” says Dr. Markman, although it can affect many different organ systems. Scientists don't understand exactly how diabetes causes neuropathy, but “we have some strong ideas,” Dr. Markman says. Most likely, diabetes has a harmful effect on the relationship between small blood vessels and nerves and impairs the ability of nerves to



**WALKING MAN**

Mathers walks about five miles every day—usually on a trail near his house, which is along the Santa Clara River in California.

Ultimately, Mathers was able to control **his neuropathy** by controlling **his diabetes**.

repair themselves, he says.

Ultimately, Mathers was able to control his neuropathy by controlling his diabetes. He was inspired to take charge of his health when his doctor first diagnosed him with diabetes. “She asked me, ‘Would you like to see your kids get married, and one day hold your grandkids?’” recalls Mathers, who has three children. “I said, ‘Of course, that’s every father’s dream.’” She told him that if he didn’t do something about his diabetes, he’d be dead in three to five years.

**Neuropathy: The Basics**

**WHAT IS IT?** According to PubMed Health ([ncbi.nlm.nih.gov/pubmedhealth](http://ncbi.nlm.nih.gov/pubmedhealth)), peripheral neuropathy is a problem with the nerves that carry information to and from the brain and spinal cord to the rest of the body. This can produce pain, loss of sensation, and an inability to control muscles.

“Peripheral” means nerves further out from the center of the body, distant from the brain and spinal cord (which are called the central nervous system). “Neuro” means nerves, and “pathy” means abnormal.

**WHAT ARE THE SYMPTOMS?** Neuropathy is often experienced as burning, tingling, numbness, or painful sensations in the feet or hands. Some people also experience muscle weakness.

**WHAT CAUSES IT?** Neuropathy can have different causes, including Lyme disease, HIV, alcoholism, tumors, exposure to toxins, and injury. Some neuropathies are inherited and some have no known cause. But the main cause of neuropathy is diabetes (called diabetic neuropathy).

According to the American Diabetes Association, diabetes does not seem to be inherited in a simple pattern, but some people are born more likely to get the disease. Although type 1 and type 2 diabetes have different causes, two factors are important in both. First, you must inherit a predisposition to the disease. Second, something in your environment must trigger diabetes. In most cases of type 1 diabetes, people need to inherit risk factors from both parents. Type 2 diabetes has a stronger link to family history than type 1, although it, too, depends on environmental factors. For more information, go to [diabetes.org/diabetes-basics/genetics-of-diabetes.html](http://diabetes.org/diabetes-basics/genetics-of-diabetes.html).

**WHAT ARE THE CURRENT TREATMENTS?** Neurologists try to treat the underlying problem causing the neuropathy, such as controlling the blood sugar levels of people with diabetes. Other treatments—including medications such as gabapentin, pregabalin, amitriptyline, duloxetine, and others—can provide symptomatic relief from pain and discomfort. Lifestyle changes, such as eating nutritiously, exercising, not smoking, and wearing protective socks and shoes, can also be helpful.

**CONTROLLING HIS DIABETES**

Often, the first advice doctors give people with diabetes is to embrace exercise and adopt a healthy diet. According to Dr. Mirsky, these are “the most important things” a person can do to help get diabetes under control. In his book, *Diabetes Survival Guide*, Dr. Mirsky provides many simple dietary guidelines, such as “no double starches.” “If you have bread, don’t have a potato.” He also urges patients to try a combination of aerobic exercise, such as walking or jogging, and non-aerobic exercise, such as weight-training.

Mathers now walks about five miles every day—usually on a trail near his house, which is along the Santa Clara River in California: “I see little animals like rabbits and coyotes. I go early in the morning, around 5:30 a.m., and I find it really clears my head,” Mathers says.

He also completely changed his eating habits for the better. “Before, when I went out to a restaurant, I chose the king-sized portion. I thought, ‘Oh, I’m getting a great deal.’ But now I control my portion sizes.”

It can be a challenge to overcome long-held notions about eating, the actor admits: “If it’s in front of me I tend to eat it. My generation was always taught to clean our plates, because our parents came out of the Great Depression. If you cleaned your plate, you got dessert. Well, that’s not the best way to teach kids!”

For breakfast, Mathers usually has oatmeal with flaxseed, raisins, wheat germ, and walnuts; and for lunch, a salad. “For dinner I eat a protein, maybe a baked potato, and a lot of vegetables. I buy frozen vegetables and put them in the microwave,” Mathers says. “I went to Jenny Craig because I knew I needed professional help. And what they taught me was portion control—that for a person of my size and weight, I was eating too much. I

needed to increase the amount of exercise I did and decrease my caloric intake.”

The happy result of Mathers’ hard work? He’s lost 70 pounds and dramatically improved his diabetes. Years ago, Mathers had been on the dangerously high end of the hemoglobin A1C test, which evaluates the severity of a person’s diabetes.

Now he registers a much healthier 6.1, which is in the pre-diabetic range—and only one-tenth of a point higher than someone who does not have diabetes. He is no longer on medication for the disease.

“I will always have a propensity to diabetes. But before, I had very little time to live, and right now I am listed as pre-diabetic,” Mathers says, pride in his voice. Among the many health benefits he has enjoyed since he got his diabetes under control: He no longer has neuropathy.

Although Mathers stopped experiencing the symptoms of neuropathy once his diabetes improved, that’s not always the case. “It can happen,” says Dr. Mirsky, “but that’s not the norm.”

“Sometimes you have an irreversible form of neuropathy,” Dr. Markman says, but “most experts believe controlling one’s diabetes will decrease the progression and the severity of neuropathy symptoms.”

## TREATMENTS FOR NEUROPATHY

Doctors categorize treatments in one of two ways: options that try to control the underlying problem causing the neuropathy (such as controlling the blood sugar levels of people with diabetes); and those that aim to provide symptomatic relief from the pain and discomfort that the neuropathy causes.

When trying to control the painful symptoms of neuropathy, doctors often prescribe medications such as certain tricyclic or selective serotonin reuptake inhibitors (SSRI) antidepressants, “which work in the central nervous system and affect the experience of nerve pain,” says Dr. Markman. Other options are seizure medications such as gabapentin (Neurontin) or pregabalin (Lyrica). For patients with more severe pain—the kind that prevents them from working or sleeping—“we often use stronger pain medications, like tramadol, or other opioid medications that are in the morphine family,” Dr. Markman explains.

Medication is not a magic bullet when it comes to neuropathy, experts say: Some patients will only feel partial relief of their symptoms. But, says Dr. Mirsky, “Medication seems to help a lot of times.” (See page 15 of this issue for an explanation of the new AAN guideline on neuropathy.)

Patients can also make helpful changes to their lifestyle. “Things like smoking may make this problem worse,” says

## More Information on Peripheral Neuropathy and Diabetes

AAN Patient Guidelines on Peripheral Neuropathy  
[patients.aan.com/disorders/index.cfm?event=view&disorder\\_id=1034](http://patients.aan.com/disorders/index.cfm?event=view&disorder_id=1034)

### *Diabetes Survival Guide*

By Stanley Mirsky, M.D., and Joan Rattner Heilman. Ballantine Books (Paperback) 2006. 336 Pages. Available for purchase online or in bookstores.

### *Diabetic Nerve Pain: A Guide for Patients and Families*

Hosted by Jerry Mathers. View the free video and guidebook at [aan.com/patients](http://aan.com/patients). A limited supply of free printed guidebooks and videos are available by calling 800-879-1960.

### *Diabetic Proximal Neuropathy: Getting At the Root of the Problem:*

[journals.lww.com/neurotodayonline/ulltext/2004/02000/Diabetic\\_Proximal\\_Neuropathy\\_Getting\\_At\\_the\\_Root.15.aspx](http://journals.lww.com/neurotodayonline/ulltext/2004/02000/Diabetic_Proximal_Neuropathy_Getting_At_the_Root.15.aspx)

Joslin Diabetes Center,  
affiliated with Harvard Medical School:  
[joslin.org/info/diabetic\\_neuropathy\\_nerve\\_damage\\_an\\_update.html](http://joslin.org/info/diabetic_neuropathy_nerve_damage_an_update.html)

The University of Chicago  
Center for Peripheral Neuropathy:  
[peripheralneuropathycenter.uchicago.edu/learnaboutpn/](http://peripheralneuropathycenter.uchicago.edu/learnaboutpn/)

Dr. Markman. “And we try to prevent people from injuring themselves because they have a loss of ability to sense hot or cold or pain.” For example, wearing special socks and shoes to protect the feet can be very helpful.

## FROM THE KID NEXT DOOR TO EVERYMAN

Mathers has lectured all over the country about his health struggles and, in many ways, he’s the perfect person to do so: Five decades ago, Mathers represented the typical 1950s American kid; today he represents millions of older Americans living with conditions such as diabetes and neuropathy.

One important difference between the America of *Leave it to Beaver* and today is that today’s children are more sedentary than children in generations past. As a result, they face increasing rates of obesity and diabetes.

“We wanted to get out of the house, go out and play cowboys and Indians or ride bikes,” says Mathers. “I think it’s a shame that a lot of kids go home, do their homework, and then sit in front of a computer or a television for the rest of the day.”

Mathers has been as busy as, well, a beaver in recent years, starring in *Hairspray* on Broadway and in a modern version of *Cinderella*, produced by the makers of *American Idol*, in Los Angeles. But he’s also been working as a national spokesman for the Partnership For Prescription Assistance ([pparx.org](http://pparx.org)), which helps get medication for people who otherwise wouldn’t be able to afford it. “It’s a safety net for people who have chronic diseases and are uninsured,” says Mathers.

Fortunately, Mathers no longer needs medication himself. “If *The Beaver* did something right, he was always rewarded,” says Mathers of his character’s onscreen adventures. Perhaps the same could be said of the way that the real-life Mathers was rewarded after all his hard work—with good health. “He should be congratulated, because he did the right thing,” says Dr. Mirsky. “He saved his own life.”