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Symptoms of Diabetes

Signs that you may be diabetic

Diabetes occurs when your blood sugar rises too high because your body doesn't produce enough of the hormone insulin, or the insulin doesn't work correctly.

Insulin, made by the pancreas, helps body cells absorb sugars from food.

Here are some common warning signs of diabetes, courtesy of the U.S. Department of Health and Human Services:

- Excessive thirst and urination.
- Feeling very hungry frequently.
- Feeling very tired.
- Unintentional weight loss.
- Frequent infections, or wounds that don't heal.
- Blurred vision.
- Numbness or tingling in hands and feet.
- Dry, itchy skin.

If you have any of these symptoms, visit your doctor to be tested for diabetes, especially if you are 45 or older.

Should You Be Tested for Diabetes?

Nearly three out of 10 people who have diabetes don't even know they have the disease. Find out if you should get tested.

Diabetes is the sixth leading cause of death in the U.S. It is also the leading cause of blindness, kidney failure and lower limb amputations in adults. Having diabetes raises your risk for heart disease, stroke, nerve damage and gum disease.



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About 24 million people in the U.S. have diabetes. One fourth of them don't know they have the disease. And 57 million more people have pre-diabetes. Studies show that many people with pre-diabetes will develop type 2 diabetes within the next 10 years.

The message is clear: diabetes is a dangerous disease that affects a lot of people. And, you can have diabetes or pre-diabetes and not know it.

Risk factors for diabetes

You are at an increased risk for type 2 diabetes if you:

- Are overweight
- Are not physically active
- Have a family history of diabetes
- Are African-American, Hispanic, American-Indian or Pacific Islander
- Are older than 45
- Have high blood pressure or high cholesterol
- Have a history of heart disease or stroke
- Had abnormal results on a previous diabetes test
- Had gestational diabetes (diabetes during pregnancy)
- Gave birth to a baby who weighed 9 pounds or more
- Have another condition that affects how your body uses insulin, such as polycystic ovarian syndrome (PCOS)

Who should get tested

- If you are 45 years of age or older.
- If you are younger than 45, overweight and have one of the above risk factors - such as a family history of the disease - get tested now.
- If results come back normal, you should get tested for diabetes again once every three years. Your doctor may suggest more frequent screening if you have certain risk factors.
- Children who are overweight and have other risk factors for diabetes are at high risk for diabetes. They should be tested every two years starting at age 10 or at the onset of puberty, whichever comes first.

The test

If your doctor suspects you have diabetes, he or she will send you for a fasting plasma glucose test (FPG), an oral glucose tolerance test (OGTT) or a Hemoglobin A1C Test (HbA1C.) A high blood sugar reading on any of these tests may mean you have diabetes. Your doctor will likely repeat the test on another day to be sure.

FPG test results:

For the FPG, you will fast overnight and then have your blood drawn at a lab or doctor's office. A blood sugar reading of:

- 126 mg/dL or more likely means you have diabetes.
- 100 mg/dL to 125 mg/dL may mean you have pre-diabetes.
- 99 mg/dL or less means your blood sugar is normal.



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OGTT results:

You will fast for at least eight hours and then have your blood drawn at a lab. Next, you will drink a sugary beverage and have blood drawn again two hours later. After two hours, a blood glucose reading of:

- 200 mg/dL or more may mean you have diabetes.
- 140 mg/dL to 199 mg/dL likely means you have pre-diabetes.
- 139 mg/dL and below means your blood sugar is normal.

HbA1C test results:

The A1C test is a simple blood test that is usually performed in a lab. You don't need to change your diet or medications before the A1C test. A small sample of blood will be drawn from a vein in your arm.

- 6.5 percent or higher may mean you have diabetes.
- 5.7 to 6.4 percent means you have prediabetes.

If you have diabetes

If your test results come back positive for diabetes, you will work on a treatment plan with your doctor. Your doctor may suggest that other specialists be part of your care team - such as a registered dietician, certified diabetes educator, podiatrist (foot care doctor) and ophthalmologist (eye doctor). Sometimes a diabetes specialist called an endocrinologist may be recommended.

The goal of managing your diabetes is to keep your blood sugar levels in check. It is important that you follow your treatment plan closely. Doing so will reduce your risk of complications.

If you don't have diabetes

If your test results show you are negative for diabetes or if you have pre-diabetes, you can take steps to reduce your risk of the disease:

- **Lose weight.** Research shows that reducing your body weight by 5 percent to 10 percent - 10 to 20 pounds for someone who weighs 200 pounds - can cut your diabetes risk in half.
- **Eat right.** Your diet should be rich in vegetables, fruits, whole grains, low-fat dairy and lean protein sources. Limit foods high in saturated and trans fats, cholesterol, sodium and added sugars.
- **Exercise regularly.** Work up to at least 30 minutes of exercise most days of the week. Always check with your doctor before you increase your activity level.

Health Tip: Diabetics and Drinking

Ask your doctor if you should drink at all

If you have diabetes and get insulin shots or take other diabetes medication, you may end up with low blood sugar if you drink



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alcohol, the American Diabetes Association says.

If your doctor says it's OK for you to have a drink now and then, the association offers these guidelines to help you use alcohol safely:

- Just as with non-diabetics, only moderate drinking -- one drink a day for women, two for men -- is recommended.
- Since alcohol can contribute to low blood sugar, always drink with a meal or on a full stomach.
- If you are watching your weight, know that alcohol is high in calories, and can quickly cause unwanted weight gain.
- Look for drinks to mix with alcohol that are low in sugar or sugar-free, such as a diet soda, tonic, sparkling water or club soda.
- Don't drink alcohol if you have nerve damage or high blood pressure.

Diabetes: Taking Care of Yourself

If you have diabetes, learning to manage your health should be a top priority. A healthy diet and regular physical activity are essential parts of managing your diabetes. And, the American Diabetes Association (ADA) recommends that people with diabetes receive individualized nutrition plans, usually from a registered dietician, to determine proper food intake.

But, other ways of taking care of your body—from head to toe—also are important. They may help prevent diabetes-related health problems such as stroke, nerve damage and vision problems. To reduce your risks, include these tips as a part of your daily routine.

Know your blood glucose level. This number can change throughout the day. Talk with your doctor to determine what range is best for you, and ask how often and at what time of day you should check your levels. Also, the ADA recommends long-term blood sugar control using hemoglobin A1C, a test your doctor will perform. Make sure you know how often to have this done.

Have your eyes checked regularly. People with diabetes have an increased risk of developing eye diseases such as cataracts, glaucoma or diabetic retinopathy—the leading cause of blindness in adults. So, it's important to see your eye care professional at least once a year. See your eye doctor immediately or seek medical help if you experience any of the following symptoms:

- Sudden blurred vision
- Double vision
- Pain in one or both eyes
- Seeing spots, lights or floaters
- Loss of peripheral vision
- Seeing lines that don't look straight

Check your feet daily. Any changes in color, shape or feel may indicate a health problem such as nerve damage, foot ulcers and



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poor circulation. To minimize risks, keep your feet clean and moisturized. Only wear properly fitted shoes, and ask your doctor if you need therapeutic shoes and report any changes.

Practice good dental hygiene. Your risk of gum disease, dry mouth and oral infections may increase with diabetes. Watch for bleeding, swollen or red gums, dryness, soreness, white patches or a bad taste. To keep your mouth and teeth healthy, floss every day and brush at least twice daily. See your dentist twice a year.

Protect your skin. Skin disorders, such as bacterial or fungal infections, are common among people with diabetes. But, they can be prevented or treated if caught early, so keep your skin clean and moisturize often. Avoid hot baths or showers. Wash minor cuts with soap and water. And, stay away from harsh products like alcohol or iodine. Be sure to keep your tetanus immunization current. If you have a major cut or burn, see your doctor right away.

If you smoke, get help to quit. Smoking is a harmful habit for anyone. But, for those with diabetes it may increase the risk of nerve damage, stroke or other health problems. And, smoking can raise your blood glucose level, making it difficult to manage your diabetes. Talk with your doctor about stop smoking aids.

Work with your doctor. Learn how to control other health issues. Understand immunizations, and don't forget an annual flu shot and the pneumonia shot. Finally, talk with your doctor about other screenings you might need on a periodic basis.

How to Prevent Diabetes When You're at High Risk

If you're at high risk for type 2 diabetes, taking action now can prevent or delay the onset of the disease in the long run.

Diabetes is the fifth leading cause of death in the U.S., and there is no cure. Having diabetes raises your chances of other health problems too, like heart disease, blindness and kidney failure.

Being overweight, having high blood pressure, high cholesterol, a family history of diabetes or other factors ups your risk for diabetes. If you're at high risk, studies show that diabetes can often be prevented with some lifestyle changes and possibly medication prescribed by your doctor.

The Diabetes Prevention Program study

The Diabetes Prevention Program (DPP) is a large study of thousands of people who are at high risk for type 2 diabetes. Researchers are trying to learn how diabetes can be prevented by looking at these people's behaviors and health over the course of years.



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Each person in this study falls into one of three groups:

- **Lifestyle group.** This group gets nutrition and exercise counseling to learn how to lose weight. (For overweight persons, losing weight is the key to preventing type 2 diabetes.)
- **Medication group.** The people in this group take an anti-diabetes drug called metformin each day to reduce their risk of diabetes.
- **Control group.** These people do not take any action (no lifestyle changes or medicine) to try to prevent diabetes.

Every few years, scientists look at how many people in each group get diabetes. Using the control group for comparison, researchers found that:

- After 3 years, people in the *Lifestyle group* cut their risk of diabetes by over half. Those in the *Medication group* reduced their risk by almost one third.
- After 10 years, people in the *Lifestyle group* reduced their risk by about one third. Those in the *Medication group* lowered their risk by almost one fifth.

The take-home message

The DPP study is ongoing. But the message is clear: if you're at risk for type 2 diabetes, taking action now can often help prevent or delay the onset of the disease in the long run.

Lifestyle changes or medication?

In the DPP study, the lifestyle group was almost two times more successful in preventing diabetes than the medication group.

But what's the best therapy for you? Only your doctor can answer that question. Your doctor may prescribe medicine only if lifestyle tweaks don't help. Or he may suggest drugs plus behavior changes.

How to keep diabetes at bay

The key to preventing type 2 diabetes is reaching and keeping a healthy weight. People in both the lifestyle and medication groups in the DPP study lost weight.

Note that the weight loss does not have to be drastic to cut diabetes risk. In fact, lowering your body weight by 5 to 10 percent (just 10 to 20 pounds if you weigh 200 pounds) can cut your diabetes risk. Losing weight can also help delay the onset of diabetes.

The best approach to a healthy weight is to combine healthy eating with regular physical activity:

- **Eat right.** You don't have to follow a rigid diet to lose weight. Start with eating smaller portions of the foods you normally eat. Try to limit foods high in saturated and trans fats, sodium and added sugars. Build your diet around fruits, vegetables, whole grains, lean sources of protein, low-fat and nonfat dairy products.
- **Exercise.** First ask your doctor if it's OK for you to be active. Then start slowly and work up to 30 minutes of exercise, five days each week. If you don't have a 30-minute block of time, try spreading activity throughout the day into three 10-minute sessions or two 15-minute workouts. If you need to lose weight, your doctor may suggest 60 to 90 minutes of physical activity a day.



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Even if you're not at a high risk for diabetes, know that having good habits and maintaining a healthy weight can help prevent a slew of other health conditions. So get started today!

Join the Great American Smokeout

Whether you're just thinking about kicking the habit or ready to choose a quit date, there's no better time than now to join the Smokeout.

In 1971, a high school guidance counselor in Massachusetts asked people to quit smoking for one day. He also asked them to donate the money they saved on cigarettes that day to a local college scholarship fund. In time, that small-town event grew into what is now known as the American Cancer Society's Great American Smokeout. The nationwide event is held the third Thursday every November.

An estimated 443,000 people die each year from smoking. About 38,000 of those who die are nonsmokers who have been exposed to secondhand smoke. If you smoke and have been trying to quit, why not join the Smokeout? It has become one of the most successful one-day quit programs in the country. More people quit on this day than any other time of the year - including New Year's Day. You could be one of them.

Cigarettes are highly addictive, both mentally and physically. They can serve as a major gateway to drug addiction. According to the National Clearinghouse for Alcohol and Drug Information, children who smoke cigarettes are eight times more likely to use illegal drugs and abuse alcohol than those who don't smoke. And most adult smokers started before they were 18. In fact, research shows that teens can become addicted to nicotine more quickly than adults.

Tips for kicking the habit

The American Cancer Society offers Quitline for those who are trying to stop smoking. The number is 800-227-2345. Using Quitline can more than double your chances of quitting successfully. Counselors at Quitline can connect you with smoking cessation programs in your community as well as support groups and Internet resources.

Here are some more tips if you're ready to quit:

- **Set a date for quitting.** Take one day at a time, and set short-term goals.
- **Tell your family and friends about your plans.** You will need their encouragement when you feel the urge to light up. Having social support is one of the keys to quitting successfully.
- **To avoid temptation, get rid of all cigarettes,** lighters and ashtrays.
- Talk to your doctor about using a medication or nicotine replacement therapy as an alternative to quitting "cold turkey."
- **When you first try to quit, change your routine.** If you usually light up during your morning coffee, then eat breakfast in a different place or drink tea instead of coffee.



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- **When you quit and still get the urge to smoke, talk with someone, go for a walk, drink water or get busy with a task.** Reduce your stress by taking a hot bath, exercising or reading a book.
- **Lastly, take advantage of the Great American Smokeout.** You'll be surprised at how quickly your body starts to recover when you don't smoke. For instance, 20 minutes after your last cigarette, your blood pressure will go down toward your baseline level and your heart rate will become slower. After 12 hours, the carbon monoxide levels in your lungs will return to normal. And that's just in the first day!

Even if you're not ready to quit just yet, joining the Great American Smokeout will teach you that you can go a day without cigarettes. And maybe even a lifetime.

