

# Healthy Living Newsletter

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*Take Control of Your Health*

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## Dispelling Diabetes Myths

The American Diabetes Association debunks some popular myths about the disease:

- You can not “catch” diabetes from someone else.
- Dessert is not off-limits forever for diabetics. While eating too many sugary foods is a bad idea, you can have an occasional dessert, especially if you exercise and otherwise eat healthy.
- Eating too much sugar can not “cause” diabetes. The disease stems from genetic and lifestyle factors.
- Carbohydrates and starches such as (bread, potatoes, pasta) are not off-limits, but healthy portion sizes are important.
- Diabetics are not more susceptible to colds and other illnesses.
- Insulin does not cause hardening of the arteries or high blood pressure.
- Fruit, while healthy, can not be consumed in huge amounts, since it contains carbohydrates.

*Source: www.nlm.nih.gov*

## Fasting Blood Sugar

Fasting blood sugar levels between 100 and 125 mg/dl are in the pre-diabetes range. A person with a level of 126 mg/dl or above has diabetes. These numbers measure the amount of sugar in a given amount of blood. The sugar is measured in milligrams (mg) and the amount of blood is a deciliter (dl), which is 1/10 of a liter.

*Source: UPSWELLNESSGUIDE*

## Tips To Help Prevent or Delay Diabetes

Being overweight increases the risk of type 2 diabetes. But there is good news; losing a small amount of weight by being physically active for 30 minutes, five days a week and following a low-fat, reduced calories meal plan can help prevent or delay diabetes. The following are tips on moving more, making healthy food choices and tracking your progress:

- Try to eat meals and snacks at regular times every day.
- Make sure you eat breakfast everyday.
- Listen to music while you eat instead of watching TV.
- Eat slowly. It takes 20 minutes for your stomach to send a message to your brain that you are full.
- Teaspoons, salad forks or child-size utensils may help you take smaller bites.
- Cook with a mixture of spices instead of salt.
- Do not go grocery shopping on an empty stomach.
- Try keeping a written record of what you eat for a week. It can help you see when you tend to overeat or eat foods high in fat or calories.

*Source: ndep.nih.gov*

## Questions to Ask Your Doctor

Your time with your doctor is limited, so preparing a list of questions will help you make the most of your time together. For diabetes:

- Are the symptoms I am experiencing now related to my diabetes or another condition?
- What kinds of tests do I need to best manage my diabetes?
- What else can I do to protect my health?
- What are other options to manage my diabetes?
- I have these other health conditions. How can I best manage them together?
- Are there any restrictions that I need to follow?
- Should I see another specialist?
- Is there a genetic alternative to the medicine you are prescribing for me?
- Are there any printed materials that I can take home with me? What about Web sites?

*Source: www.mayoclinic.com*

## Diabetic Retinopathy

Diabetic retinopathy is a complication of diabetes that results from damage to the blood vessels of the light-sensitive tissue at the back of the eye (retina). At first, diabetic retinopathy may cause no symptoms or only mild vision problems.

In some people with diabetic retinopathy, blood vessels may swell and leak fluid. In other people, abnormal new blood vessels grow on the surface of the retina. A healthy retina is necessary for good vision.

Diabetic retinopathy can happen to anyone who has type 1 or type 2 diabetes.

*Source: www.mayoclinic.com & www.nei.nih.gov*

## Diabetes: Three Commonly Missed Tests

**Hemoglobin A1c:** A blood test that checks average blood sugar level for the past two to three months.

**Dilated Eye Exam:** An eye care professional uses eye drops to temporarily widen or dilate the pupils to see inside the eyes. Uncontrolled diabetes can damage the eyes, harming vision and possibly leading to blindness.

**Foot Exam:** A check of the foot's nerves and blood circulation. Uncontrolled diabetes can lead to foot problems that may eventually require amputation.

## Other Essential Medical Tests for People with Diabetes

**Blood Lipid (Fats) Test:** A blood test for cholesterol and triglycerides.

**Kidney Function Tests:** Get a urine test that checks for protein in urine at least once a year. Get a blood test for creatinine, a waste product, at least once a year. These tests screen for kidney problems.

**Blood Pressure:** Get your blood pressure checked at every medical appointment.

Caring for your teeth and monitoring your weight are also important for people with diabetes.

*Source: UPSWELLNESSGUIDE*

## Diabetic Ketoacidosis

Diabetic ketoacidosis develops when you have too little insulin in your body. Without enough insulin, sugar (glucose) can not enter your cells for energy. Your blood sugar level rises and your body begins to break down fat for energy. This produces toxic acids known as ketones. Left untreated, diabetic ketoacidosis may cause you to lose consciousness. Eventually, untreated diabetic ketoacidosis can be fatal.

Diabetic ketoacidosis is most common in people who have type 1 diabetes, but people who have type 2 diabetes may develop the condition, also. In fact, in a few cases diabetic ketoacidosis is the first sign that a person has diabetes.

*Source: www.mayoclinic.com*

## How Can Diabetes Affect Oral Health?

Because of high blood glucose, people with diabetes are more likely to have problems with their teeth and gums and like all infections, dental infections can make your blood glucose go up. Some of the warning signs of possible dental problems include:

- Red, sore, swollen gums that bleed when you brush your teeth (gingivitis).
- Gums shrink or pull away from teeth (periodontitis).
- Loose or sensitive teeth.
- A bite that feels different.

You can help maintain your oral health by:

- Keeping your blood glucose as close as possible to normal.
- Brushing your teeth after each meal and snack – Use a soft toothbrush.
- Flossing once a day – Flossing helps prevent the buildup of plaque on your teeth. Plaque can harden and grow under your gums and cause problems.

*Source: www.cdc.com & www.diabetes.niddk.nih.gov*

## How Can Diabetes Hurt My Skin?

Diabetes can hurt your skin in two ways:

- If your blood glucose is high, your body loses fluid. With less fluid in your body, your skin can get dry. Dry skin can be itchy, causing you to scratch and make it sore. Also, dry skin can crack. Cracks allow germs to enter and cause infection. If the blood glucose is high, it feeds germs and makes infections worse. You might get dry skin on your legs, feet, elbows, and other places on your body.
- Nerve damage can decrease the amount you sweat. Sweating helps keep your skin soft and moist. Decreased sweating in your feet and legs can cause dry skin.

You can use the following tips to take care of your skin:

- After washing with a mild soap, make sure to rinse and dry yourself well.
- Keep your skin moist by using a lotion or cream after you wash.
- Drink lots of fluids, such as water, to keep your skin moist and healthy.
- Check your skin after you wash. Make sure you have no dry, red, or sore spots that might lead to an infection.

*Source: diabetes.niddk.nih.gov*

## How Can Diabetes Affect Nerve Endings?

Having high blood glucose for many years can damage the blood vessels that bring oxygen to some nerves, as well as the nerve coverings. Damaged nerves may stop sending messages, or send messages too slowly, or at the wrong times. Numbness, pain, and weakness in the hands, arms, feet, and legs may develop. Problems may also occur in various organs, including the digestive tract, heart, and sex organs. Diabetic neuropathy is the medical term for damage to the nervous system from diabetes. The most common type is peripheral neuropathy, which affects the arms and legs.

An estimated 50 percent of those with diabetes have some form of neuropathy, but not all with neuropathy have systems. People with diabetes can develop nerve problems at any time, but the longer a person has diabetes, the greater the risk. The highest risk of neuropathy is people who have had the disease for at least 25 years.

Diabetic neuropathy also appears to be more common in people who have had problems controlling their blood glucose levels, in those with high levels of blood fat and blood pressure, in overweight people and in people over the age of 40.

*Source: www.cdc.gov*