
Diabetes Life Lines



A newsletter from your County Extension Office
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Getting Motivated to Follow Treatment Plans

Are you ever tempted to not follow your doctor's advice? Are you often unsure about the treatment the medical team has recommended? Do you sometimes forget to take a drug or fail to do some other type of therapy? You are not alone. We all at times alter our health care provider's suggestions and get confused by the instructions we are given. And who hasn't forgotten a dose of medicine? But if you often do not follow treatment guidelines, your health may suffer. To stick with your treatment better, here are some things you can do:

- **Learn more.** Ask your doctor to explain the cause of your disease and how your treatment

works. If you know how it will help, you are more likely to follow the treatment consistently. Some doctor's offices also have nurses or assistants that can explain a medical regimen to you.

- **Find out the cost of any new drugs before you fill the prescription.** Ask about the cost of each medicine that is prescribed. Let your health care team know if the price will be a problem. They may be able to provide free samples of the drug, substitute a less costly generic drug, or refer you to agencies or programs that can help pay for your medicine.
- **Know everything you can about your medicines.** Ask your doctor about how much to take, how often to take it, and what side effects may occur. Repeat the information back to the doctor in your own words or ask for written instructions to be sure you understand.
- **Set up reminders.** Many people have trouble remembering to take their medicines. Special pill boxes that organize medicine by time of day and date may help. Place these boxes where you are likely to see them when you need them. Perhaps beside your coffee maker in the morning, at your

placemat on the dining room table, or next to the phone on your desk. You may also be able to set an alarm on your watch or send yourself an email or text message to remind yourself to take a dose.

Just remember, it is up to you whether or not you follow your treatment plan. Help yourself by asking questions, being honest and doing your best to implement the therapy both you and your medical team agreed is right for you.

Testing in Pairs

Do you sometimes wonder why you even check your blood glucose? Do you even use the numbers once you get them? Does your health care team even seem interested in your blood glucose records? Well, Dr. William Polonsky, PhD, an expert on diabetes and motivation, has a new way to make blood glucose monitoring more meaningful to you.

Dr. Polonsky encourages people with diabetes to “test in pairs.” In other words, you select an event that is important to you that may affect your diabetes control. Then you check your blood glucose before and after that event and see how it affects your blood glucose.

For example, let’s say your doctor wants you to get more active to control your blood glucose, but you are not that eager to do it. What Dr. Polonsky suggests is that you do an experiment for just one week. During that week, check your blood glucose before and after a 30-minute walk at a set time on five days that week. Then on the other two days, when you do not exercise, check at the same time. The blood glucose records will help you see how exercise affects your blood glucose. With this data, you can decide if it’s worth continuing to walk.



Or check before and after two different restaurant meals to see if one shoots your blood glucose up more than the other. In this case, you would check right before each meal and two hours later. Then you would compare those numbers with the upper blood glucose limit that your doctor recommends. (Some doctors say less than 140 two hours after a meal. Others say less than 180. Check with your doctor to see which one is right for you.) If neither meal works, try other meals or adjust the portion size of the first two.

Testing in pairs will make monitoring worthwhile for you. You and your medical team can fine tune your blood glucose control based on situations that matter to you. Then you will really be in charge of your diabetes and no longer waste your time and your strips on meaningless tests.

16th Annual Diabetes University

Each year, the Diabetes Association of Atlanta and its many partners sponsor the annual Diabetes University, one of the premier diabetes education events in the Southeast. It is worth a trip to Atlanta if you want to learn more about diabetes.

When: Saturday, November 14, 2009

Where: AmericasMart
(Atlanta Apparel Mart)
Building 2 WEST
230 Spring Street
Atlanta, GA 30303

Time:

- 8:00 am to 3:30 pm – Track for people affected by diabetes
- 7:30 am – 1 pm Vendor exhibits and health screenings

Registration: \$15 which includes lunch. Register on the Web at www.diabetesatlanta.org or by phone at 404-527-7150 Ext. 100

The keynote speaker will be Dr. Bruce Bode from the Atlanta Diabetes Associates, an internationally known endocrinologist and diabetes expert with a special interest in insulin delivery and continuous blood glucose monitoring. He will discuss the newest research in diabetes for both Type 1 and Type 2.

There will be 30 educational workshops to choose from and over 30 diabetes vendors. Free health screenings will be provided by leading heart, eye and foot specialists.

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Mediterranean Diet May Reduce Need for Diabetes Medicines

An Italian study of 215 overweight people who were newly diagnosed with Type 2 diabetes found that those following a lower carbohydrate, Mediterranean diet for four years were more likely to stay off diabetes medicine than those following a low fat, higher carbohydrate meal plan. The researchers in Naples randomly assigned patients to either a Mediterranean-style meal plan with less than 50% of the calories coming from carbohydrate or to a diet with less than 30% of the calories coming from fat.

The Mediterranean diet used unrefined carbohydrates like whole grains, fruit and vegetables and substituted fish and poultry for red meat. The diet had at least 30% of its calories from fat, mainly from 30-50 grams of olive oil. Olive oil is high in monounsaturated fat which has improved insulin sensitivity in other studies.

In contrast, the low fat, higher carbohydrate meal plan was based on the guidelines of the American Heart Association. It also encouraged plenty of whole grains, vegetables and fruits, but restricted added fats, sweets and high fat snacks.

No matter what diet they were assigned, all the men were given an 1800-calorie meal plan and the women were given a 1500-calorie meal plan. Everyone was also told to do at least 30 minutes a day of physical activity. The goal was for each person to work up to 175 minutes of moderately intense physical activity per week.

After four years, only 44% of those on the Mediterranean diet needed diabetes medicine to keep their A1c values under 7%, compared to 70% of the individuals on the low fat diet. Also people on the Mediterranean diet had greater improvements in insulin sensitivity, lower total cholesterol and triglyceride values and higher healthy HDL-cholesterol levels than those on the low fat diet. Even their blood pressures were lower.

At first, those on the Mediterranean diet lost more weight than those on the low fat diet, but this difference gradually disappeared. This shows that weight loss alone was not the reason people on the Mediterranean diet stayed off diabetes medicines. The olive oil or the combination of a lower carbohydrate

intake and the higher monounsaturated fat diet may have helped blood glucose control.

To understand the difference between the meal plans, here are two sample 1500 calorie menus. One is based on the Mediterranean diet, and the other on a low fat diet that is higher in carbohydrate.

1500 calorie Mediterranean Diet 35% of calories from fat	1500 calorie Low Fat diet 25% of calories from fat
Breakfast 1 ¼ cup strawberries 1 cup plain yogurt 1 slice whole wheat toast 1 tablespoon peanut butter 1 teaspoon reduced sugar jelly Coffee with artificial sweetener if desired	Breakfast 1 ¼ cup strawberries 1 cup plain yogurt 2 slices whole wheat toast 1 teaspoon margarine 1 teaspoon reduce sugar jelly Coffee with artificial sweetener if desired
Lunch Chicken stir-fry made with 1 ounce chicken 1 cup mixture of broccoli, carrots, onions, cauliflower Cooked in 1 teaspoon olive oil 2/3 cup brown rice Tossed salad dressed with 2 teaspoons olive oil, 1 tablespoon balsamic vinegar and 1 packet artificial sweetener 1 apple Ice tea with artificial sweetener	Lunch 1 ounce sliced turkey 1 small whole wheat bun 1 teaspoon mustard Tossed salad with 1 tablespoon Ranch Dressing 1 apple 1 cup non-fat milk
Dinner 3 ounces salmon 1 small baked sweet potato 1 cup green beans ½ cup greens 1 teaspoon olive oil for vegetables 1 pear 1 cup non-fat milk	Dinner 3 ounces baked pork chop 1 small baked sweet potato 1 cup green beans 1 small whole wheat dinner roll 1 teaspoon margarine 1 pear Iced tea with artificial sweetener
Snack 3 cups popcorn, air popped 2 teaspoons olive oil mixed into popcorn Diet drink	Snack 1 cup non-fat milk ¾ cup bran flakes cereal ½ banana

Recipe Corner

Sweet Potato Shepherd Pie

This recipe is nearly a complete meal that you can make ahead and serve as a casual supper.

4 servings

2 cups mashed sweet potatoes	1 cup low sodium chicken broth
$\frac{3}{4}$ cup evaporated non-fat milk	$\frac{1}{2}$ teaspoon cumin
$\frac{1}{4}$ teaspoon salt (optional)	$\frac{1}{8}$ teaspoon nutmeg
1 clove garlic, minced	$\frac{1}{8}$ teaspoon Dijon mustard
$\frac{1}{2}$ cup raw mushrooms, sliced	1 $\frac{1}{2}$ teaspoon reduced sodium soy sauce
$\frac{1}{2}$ cup chopped onion and diced	10 ounces boneless, skinless chicken breast, cooked
2 tablespoons flour	1 $\frac{1}{2}$ cup of frozen mixed vegetables
	Non-stick cooking spray

1. Preheat oven to 350.
2. Combine the sweet potatoes with $\frac{1}{4}$ cup of the evaporated milk. Add the salt if desired and the pepper.
3. In a heated non-stick skillet, add the olive oil. Sauté the mushrooms, onions and garlic until soft and just turning brown.
4. Sprinkle on the flour and cook 1 minute while stirring. Slowly add the remaining $\frac{1}{2}$ cup of evaporated milk stirring constantly.
5. Add the chicken broth, cumin and nutmeg and bring to a gentle boil. Stir constantly until slightly thickened. About 1-2 minutes.
6. Remove skillet from the heat and stir in mustard and soy sauce.
7. Combine mushroom sauce with chicken and mixed vegetables in a large bowl. Pour into a shallow baking dish sprayed with non-stick cooking spray.
8. Spread sweet potatoes evenly over chicken-vegetable mixture. Bake for 25-30 minutes or until heated thoroughly.

Nutrition Information with added salt:

Calories: 367 Carbohydrate: 46 grams Protein: 35 grams Fat: 4 grams
Saturated Fat: 1 gram Cholesterol: 73 milligrams Sodium: 416 milligrams
Fiber: 6 grams Exchanges: 2 $\frac{1}{2}$ starches, 2 vegetables, 3 very lean meats

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Dear Friend,

Diabetes Life Lines is a bi-monthly publication sent to you by your local county Extension agent.

It is written by Food and Nutrition Specialists at the University of Georgia, College of Family and Consumer Sciences. This newsletter brings you the latest information on diabetes, nutrition, the diabetic exchange system, recipes, and important events.

If you would like more information, please contact your local county Extension office.

Yours truly,

County Extension Agent

Connie Crawley, Principal Writer

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Official Business

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