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# Diabetes Life Lines



A newsletter from your County Extension Office  
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## Does Your Diabetes Put Your Partner at Risk?

If you have diabetes, your life partner is also at risk for developing health problems. Studies show that partners of people with diabetes have higher triglyceride levels and are more overweight than the partners of people without diabetes. These partners are twice as likely to get diabetes themselves and twenty percent have glucose intolerance.

Some of this risk may be due to shared lifestyles. Couples are more likely to eat the same food and have similar physical activity levels. They also have similar smoking and drinking habits.

Sadly diabetes can also affect your partner's mental well-being. If

you are worried, depressed or feel unhappy with your quality of life, your partner is likely to feel this way as well. This is especially true for female partners of men who have diabetes.

So what does this mean? First, diabetes is a family affair. The changes in food and activity recommended for you should be adopted by your entire family. You and your partner will feel better and be healthier.

Second, you and your partner may need to discuss your concerns with a counselor. Diabetes can bring out relationship problems that have been beneath the surface for years. Just talking about your feelings may help. You both may also learn new ways to relieve stress and solve problems.

So this is your chance to support each other in your efforts to get healthier. Diabetes may be the challenge you need to grow stronger together mentally and physically.



## How Hard Should You Exercise?

You've heard that you should exercise moderately for 30 minutes most days of the week. But how hard is moderate? Exercise experts assign a score to each activity to show how intense it is. This measurement is called a MET or metabolic equivalent. One MET is defined as the energy needed to sit quietly. All the other activities are compared to it.

If an activity equals three to six METS then it is considered of moderate intensity. Examples of these types of activities are listed in the following table:

Activity	METS
Walking (3 mph)	3.3
Leisurely cycling	3.5
Calisthenics (no weight added)	4.0
Golf without cart	4.4
Slow swimming	4.5
Walking (4 mph)	4.5
Chopping wood	4.9
Doubles tennis	5.0
Fast ballroom dancing/square dancing	5.5
Moderately fast cycling	5.7
Loading/unloading car	3.0
Taking out trash	3.0
Walking dog	3.0
Household tasks, moderate effort	3.5
Vacuuming	3.5
Lifting continuously	4.0
Raking lawn	4.0
Gardening, no lifting	4.4
Mowing with power mower	4.5

Adapted from a table in the article "Exercise" from the Harvard School of Public Health. For the entire table go to <http://www.hsph.harvard.edu/nutritionsource/Exercise.htm>

Does this mean that if you cannot do these activities, you might as well forget it? A study of Harvard graduates found that unfit or disabled older adults benefit as much from slow walking or other less intense exercise as a fitter, younger person that does more vigorous exercise. In other words, if an activity feels challenging to you, it is probably helping your heart and fitness level.



But there is another way to judge if you are working at the right level. You want to be able to talk while you exercise or work, but you don't want to be able to sing. If you meet that criteria, you have MET your intensity goal.

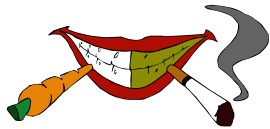
## Keeping the Weight Off When You Quit Smoking

January is the time for resolutions. If you resolved to quit smoking, congratulations! If you are now worried about weight gain that often occurs when you quit, here are some ideas from Justin Sherman

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PharmD, an expert in smoking cessation:

At first, aim to prevent weight gain, not to lose weight. Eat healthy food in reasonable portions, but don't try to quit smoking and lose weight at the same time.



Chew cut up raw vegetables to satisfy the hand-to-mouth habit that smoking caused. Keep the vegetables prepared crisp and fresh in the refrigerator. Carry them along in plastic bags when you leave home.

Talk to your doctor about getting more active. This will reduce your tobacco cravings, help with depression, control your weight and improve your lung capacity.

Plan your meals ahead so you consciously eat healthy foods and don't snack all the time. Drink plenty of water and cut back on the coffee and alcohol if you link them with smoking.

Set up a reward system to celebrate every day you don't smoke that does not include food. Have large and small rewards that give you pleasure like seeing a movie, having your hair done, going fishing, enjoying a ball game, getting a

massage or visiting your grandchildren.

Get the support of your friends and family. If they also smoke, quit together. Call each other when you are tempted to smoke. Plan activities after meals like walking or playing board games so after eating smoking will be interrupted.

Use the HALT system to reduce risk for smoking and overeating – don't get too Hungry, too Angry, too Lonely or too Tired. By doing this, you will be less likely to light up or chow down.

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## How Have the Nutrition Guidelines for Diabetes Been Revised?

Every few years the American Diabetes Association appoints a committee to review recent research to update the nutrition guidelines for diabetes. The newest version was published in September 2006. Here are the main points of this update and how they may apply to you:

- See a registered dietitian for the best nutrition counseling to meet your needs. If you have never seen a dietitian or have not seen one in two years, get

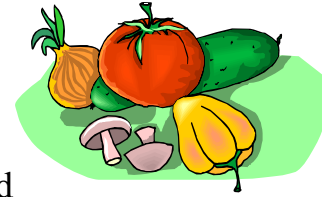
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an appointment soon. Even if you saw a dietitian recently, schedule a follow-up if your blood glucose is out of your target range.

- If you are overweight, lose weight. It is one of the best ways to control your diabetes. Just losing 5-10% of your present weight can lower your blood glucose significantly. Eating fewer calories and being active for at least 30-60 minutes per day will help you succeed.
- If you are obese and have lost weight many times, weight loss drugs or bariatric surgery may be an option for you. Bariatric surgery either reduces the size of your stomach and/or changes how you absorb calories. Discuss these options with your doctor, but remember they can have serious side effects.
- Have at least 130 grams of carbohydrate a day. That means no low carb diets! How much carbohydrate you need depends on your weight, activity level and blood glucose readings. Get most of your carbohydrate from vegetables, fruits, cooked dried beans and peas and low fat or non-fat milk. These foods may raise your blood glucose

less after meals. Vegetables, beans and fruits will also help increase

your fiber intake.



You need

14 grams of fiber for every 1000 calories you consume.

- Use small amounts of oils and nuts as your fat sources instead of saturated animal fats or partially hydrogenated or hydrogenated vegetable oils (the trans fats). Read food labels. Then add up saturated and trans fat grams together. Choose the foods that have the lowest total of both. Also get more omega-3 fatty acids by eating at least two fish servings per week that are not fried.
- Keep your intake of cholesterol from your diet to less than 200 milligrams per day. If you have high blood cholesterol, consider eating margarine that has plant stanols and sterols (Brand names Benecol® and Take Charge®). Family or friends that do not have high cholesterol should not use these products since they are like drugs. Also these margarines contain fat so they will add calories.

- Don't overly restrict protein unless you have signs of kidney disease. However, many high protein foods are high in saturated fat and cholesterol so keep your portion of meat, chicken or fish to the size of a deck of cards.
- Treat low blood glucose with 15-20 grams of quick acting carbohydrate like glucose tablets. Wait 15-20 minutes to check to see if your blood glucose has gone up. Research has not shown that adding a protein food like cheese or peanut butter to the carbohydrate treatment will keep blood glucose up afterward. However, many people with diabetes, and health care providers who treat diabetes, believe adding a little protein to the carbohydrate does help keep the blood glucose up longer.

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## Lowering After Meal Blood Glucose Values May Reduce Cardiovascular Disease Risk

Some people with Type 2 diabetes may have well controlled blood glucose levels before meals, but high levels after meals. You should suspect this if your A1c levels are high or increasing while your pre-meal blood glucose readings are in the normal range.

Several studies have shown that when after meals readings are out of control, risk for heart attack and stroke increase. Even people who have pre-diabetes have a higher risk for cardiovascular disease as their blood glucose levels go up above normal levels.

What should you do? Check your blood glucose after meals at least a few times a week even if your A1C is in the normal



range. Ask your medical team what your after meal readings should be. If they are out of range, work with the team to figure out what you need to do to get them back down. This may mean eating differently, being more active or taking medication that has more effect on glucose levels after meals.

## Recipe Corner

### Apple & Grape Salad

2 cups apples, cubed  
1 cup grapes, halved  
½ cup celery, chopped  
¼ cup walnuts, chopped

1 teaspoon lemon juice  
⅓ cup fat-free sour cream  
⅓ cup plain yogurt

1. Wash hands and assemble clean equipment.
2. In large bowl, combine apples, grapes, celery, walnuts and lemon juice.
3. Mix yogurt and sour cream. Mix lightly into fruit mix. Refrigerate. If desired, serve on lettuce lined plates.

#### Makes 8 servings

Nutrient Analysis, per serving:

76 calories    13 grams Carbohydrate    2 grams Protein,    3 grams Fat  
2 grams Dietary Fiber    2 milligrams Cholesterol    29 milligrams Sodium

Exchanges: 1 fruit, ½ fat

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### Suggested Menu

<u>Menu Item</u>	<u>Exchanges</u>	<u>Carbohydrate</u>
Grilled pork tenderloin, 3 ounces	3 meat exchanges	0 grams
Lima beans, 2/3 cup	1 starch exchange	15 grams
Cooked carrots, ½ cup	1 non-starchy vegetable exchange	5 grams
*Apple-grape salad, ½ cup	1 fruit and 1 fat exchange	15 grams
Whole wheat roll, 1 small	1 starch exchange	15 grams
Light margarine, 1 tablespoon	1 fat exchange	0 grams

\*This issue's featured recipe.

*Note: Portions may need to be adjusted for your meal plan.*

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**The University of Georgia**

## **Cooperative Extension**

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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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Scott Angle, Dean and Director

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