Diabetes Self Care
A guide to help you take care of your diabetes

ALASKA NATIVE TRIBAL HEALTH CONSORTIUM
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What can I do now to control my diabetes?

1. **Start moving your body every day.** Exercise is the best medicine for diabetes. Start doing whatever you can, for as long as you can, each and every day. It will help to lower your blood sugar and make you feel good.

2. **Take medicine as your provider prescribed.** It is important not to skip any doses. If you have questions about why you take a medicine, be sure to ask!

3. **Check your blood sugar with a blood sugar meter.** This will help YOU know if YOUR diabetes is controlled. If the numbers are high, then meet with your diabetes team to come up with a plan to get them closer to target. You are the only one that can control your diabetes.

4. **Choose healthy foods and small portions to fuel your body.** Color your plate with vegetables, choose 100% whole grains and lean meats (fish and wild game). Eat less processed, packaged, bagged /boxed foods. Choose your native foods when possible.

“**Healthy by choice, not by chance.**”
What is Diabetes?

Diabetes is an ongoing (chronic) disease in which the body does not make enough insulin or your cells have trouble using insulin. When you eat food, some of the food you eat is broken down into sugar. Insulin gets sugar into the cells. Sugar has to get into the cells in order for your body to use it as energy. When your body does not make enough insulin, or your cells block (or are resistant to) the insulin, sugar starts to build up in the blood. This is when you get high blood sugar, or diabetes.

Definitions:

- **Insulin**: a hormone your body makes to lower your blood sugar; it helps sugar get into your cells. When your body does not make enough insulin or any at all, you may need to give yourself shots to stay healthy.

- **Insulin Resistance**: Your body has trouble using insulin and it causes your blood sugar to rise.

- **Pancreas**: An organ in your body that makes insulin.

- **Glucose**: Another name for sugar. Glucose is your body’s main source of energy.

Where does glucose come from?

- **Glucose comes from two places**:

  Your body breaks down carbohydrate foods into glucose.

  Your liver makes glucose. When you have not eaten, blood glucose levels begin to drop. In response, your liver releases glucose into your bloodstream.
Types of Diabetes: which is it?

**Type 1 Diabetes**

With Type 1 diabetes, the pancreas makes little or no insulin. People with Type 1 diabetes will need to take insulin shots each day to keep their body healthy and working properly.

We see this type of diabetes mostly in kids and people under age 30. Trauma or certain environmental factors may trigger the onset, but a person has no control of whether or not they get this disease.

At this time, there is nothing that can be done to prevent Type 1 diabetes. We can successfully manage Type 1 diabetes with insulin and people can live long, healthy lives.

All people, whether they have diabetes or not, benefit from regular exercise and making healthy food choices.

**Type 2 Diabetes**

Type 2 diabetes is the most common type of diabetes; 90 percent of people with diabetes have this type. The body has trouble using the insulin it makes.

When people are overweight the body has trouble using the insulin. This can cause sugar to build up in the bloodstream causing high blood sugar.

Type 2 diabetes is more likely to develop when there is a family history of diabetes, if a person is overweight, and/or if a person does not maintain a healthy diet and does not get enough exercise.

Other contributing factors to diabetes are: ethnicity, smoking, and women who have had a baby that weighed more than 9 pounds or who have had gestational diabetes.

Type 2 diabetes is managed with pills and/or insulin, healthy food choices and exercise.
Signs and Symptoms of Diabetes

Some people don’t feel any different. Signs of diabetes appear when the sugar is already at very high levels. Some signs are listed below:

- Increased hunger or thirst
- Peeing a lot
- Blurred vision
- Itchy, dry skin
- Getting infections often
- Weight loss
- Feeling tired or sluggish

NOTE: Type 2 diabetes develops very slowly over time. People may have diabetes for several years without any of the above symptoms.

Which type of diabetes do you have? What will you do to take control of your diabetes? ______________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________
Diabetes Medicines

Along with being active and choosing a healthy way of eating, your doctor may prescribe medicine. Diabetes medicines can be taken in a pill or in a shot. Half of people with Type 2 diabetes will need a shot at some point. Shots are very good at lowering blood sugar.

**Medicines that could cause a low blood sugar:**
- Insulin
- Glyburide, Glipizide, Glimepiride (Micronase, Glucotrol, Amaryl)
- Nateglinide (Starlix)

**Medicines less likely to cause a low blood sugar:**
- Metformin (Glucophage)
- Pioglitazone (Actos)
- Liraglutide (Victoza)
- Saxagliptin (Onglyza)
- Canagliflozin (Invokana)

Alert your provider if you use any other alternative treatments for your diabetes, such as plants, herbs, or other supplements.

**Important:** There are many diabetes medicines and new ones are made often. The above list does not include all medicines, just some of the common ones. Always ask your pharmacist about the side effects of your medicines and if low blood sugar is more likely to occur with medicines that you take. Carrying your blood sugar meter and treatment for a low blood sugar with you is a good idea.

Healthy eating, weight control, increased physical activity and diabetes education are the foundation of healthy living with diabetes. If you are unable to reach your A1C goal with food choices and activity, the first medication recommended is **Metformin**.

<table>
<thead>
<tr>
<th>MEDICATION</th>
<th>How it works</th>
<th>Causes low blood sugar?</th>
<th>Supports weight loss?</th>
<th>Most common side effects?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Metformin</td>
<td>Tells liver not to make too much sugar</td>
<td>NO</td>
<td>YES</td>
<td>Upset stomach, diarrhea</td>
</tr>
</tbody>
</table>

If you are unable to reach your A1C goal with food choices, physical activity and metformin there are six second-line medicines to choose from:

<table>
<thead>
<tr>
<th>MEDICATION</th>
<th>How it works</th>
<th>Causes low blood sugar?</th>
<th>Supports weight loss?</th>
<th>Most common side effects?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liraglutide (Victoza®)</td>
<td>Tells pancreas to make more insulin and helps people feel full sooner</td>
<td>NO</td>
<td>YES</td>
<td>Nausea, diarrhea</td>
</tr>
<tr>
<td>Saxagliptin (Onglyza®)</td>
<td>Tells pancreas to make more insulin when you eat</td>
<td>NO</td>
<td>YES</td>
<td>Headache</td>
</tr>
<tr>
<td>Canagliflozin (Invokana®)</td>
<td>Allows kidneys to filter out extra sugar into urine</td>
<td>NO</td>
<td>YES</td>
<td>Yeast infections, urinary tract infections</td>
</tr>
<tr>
<td>Long-acting insulin (Lantus®)</td>
<td>Provides background insulin for about 24 hours</td>
<td>YES</td>
<td>NO</td>
<td>Low blood sugar, weight gain</td>
</tr>
<tr>
<td>Glyburide, Glipizide, Glimperide</td>
<td>Tells the pancreas to make more insulin regardless of food intake</td>
<td>YES</td>
<td>NO</td>
<td>Low blood sugar, weight gain</td>
</tr>
<tr>
<td>Pioglitazone (Actos®)</td>
<td>Helps your muscles use the insulin your body makes</td>
<td>NO</td>
<td>NO</td>
<td>Weight gain, ankle swelling</td>
</tr>
</tbody>
</table>
Hypoglycemia: Low Blood Sugar

What causes it?
- Too much medicine
- More exercise/activity than normal
- Less food than normal

How does it feel?
Below are some possible symptoms you may experience:
- Sweaty, shaky
- Tired, hungry, crabby
- Fast heart rate, confused, dizzy

To treat hypoglycemia (low blood sugar, less than 80) follow these steps:

1. Check blood sugar if possible.
2. Eat 15 grams of carbohydrates, such as:
   - 4 oz. juice, skim milk, or regular soda
   - 4-5 crackers or 1 piece of pilot bread
   - 3 to 4 glucose tabs
   - 1 Tablespoon of sugar or honey
3. Rest for 15-20 minutes. Give your blood sugar time to come up and check your blood sugar again. If your blood sugar is still under 80, eat another 15 grams of carbohydrate (Step 2). Try not to over-treat.

IMPORTANT: If you experience low blood sugar often, it may mean your medicines need to be adjusted. Having a low blood sugar 1-2 times a week would be a reason to contact your provider right away.

It is important to always carry treatment for low blood sugar with you. It’s also a good idea to test your blood sugar before you drive or start exercising to make sure your blood sugar is not too low.

My low blood sugar treatment will be:_______________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
Monitoring Your Blood Sugar

Why should I check my blood sugar?
You want to know if your blood sugar is in control. If it is high often, it could mean you ate too much, forgot your medicines, or you did not exercise. If you have been eating healthy, taking your medicines and exercising, but your blood sugar is still high, then you need to talk to your provider to come up with a new plan to manage your diabetes.

When should I check?

<table>
<thead>
<tr>
<th>When to Check</th>
<th>Blood Sugar Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fasting or before meals</td>
<td>80-130</td>
</tr>
<tr>
<td>2 hours after a meal</td>
<td>Less than 180</td>
</tr>
<tr>
<td>Bedtime</td>
<td>100-140</td>
</tr>
</tbody>
</table>

Fasting blood sugar is the first check you do after you wake up from sleeping. When a person has diabetes, the liver puts out extra sugar at night while you sleep. Your fasting blood sugar can give you information about how much sugar your liver is putting out during the night.

To learn more about how your current diabetes plan is working with the foods you eat, you can check your blood sugar before you eat and again two hours after you eat, and look at the difference between the two numbers. This is called paired testing. Paired testing helps you learn how certain foods affect your blood sugar. There is a paired testing log on the next page.
**Paired Testing Log**

Choose one meal each day. Check before you eat and 2 hours after you are done. Record your results on the chart below. Don’t eat anything after your meal, until you have done your 2-hour check. Keep track of the foods you ate at each meal.

<table>
<thead>
<tr>
<th>Pre-B-fast</th>
<th>2 hrs after</th>
<th>Difference</th>
<th>Pre-lunch</th>
<th>2 hrs after</th>
<th>Difference</th>
<th>Pre-Dinner</th>
<th>2 hrs after</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>137</td>
<td>200</td>
<td>200-137=63</td>
<td>100</td>
<td>150</td>
<td>150-100=50</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Hemoglobin A1c or eAg**

What do I do with all these numbers?

1. **Are you getting blood sugars less than 80 at least once a week?**
   - TALK TO YOUR PROVIDER IMMEDIATELY, you may need a medicine change

2. **Are your fasting or pre-meal blood sugars high?**
   - Talk to your provider about changing your medicines
   - Adjust your evening meal/snack
   - Try adding exercise each day

3. **Do your blood sugars rise more than 50-60 points after you eat? (Compare before you eat to 2 hours after you eat.)**
   - Talk to your provider about adjusting your medicine
   - Try cutting back on your carbohydrates
   - Talk to your dietitian about your diet and see if there is anything that could be changed.
   - Take a 15-30 minute walk after you eat.

4. **Are your blood sugars high before you go to bed?**
   - Change or skip your bedtime snack
   - Talk to your provider about adjusting your medicine

**HEMOGLOBIN A1c — estimated average glucose**

The A1c test gives you a picture of your average blood glucose control for the past 2 to 3 months. The results give you a good idea of how well your diabetes treatment plan is working.

You should have your A1c test done 2-4 times each year depending on your overall diabetes control. Your doctor will guide you when to have the test done.

My most recent A1c result was: ___________________

<table>
<thead>
<tr>
<th>Action Needed</th>
<th>Hemoglobin A1c (Lab Test)</th>
<th>Estimated Average Glucose (eAg)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Action Needed</td>
<td>12%</td>
<td>298</td>
</tr>
<tr>
<td></td>
<td>11%</td>
<td>258</td>
</tr>
<tr>
<td></td>
<td>10%</td>
<td>240</td>
</tr>
<tr>
<td></td>
<td>9%</td>
<td>212</td>
</tr>
<tr>
<td>Caution</td>
<td>8%</td>
<td>183</td>
</tr>
<tr>
<td>Excellent</td>
<td>7%</td>
<td>154</td>
</tr>
<tr>
<td></td>
<td>6%</td>
<td>126</td>
</tr>
</tbody>
</table>
Insulin

What is it?
Insulin is medicine to lower blood sugar. If your body does not make enough insulin, you may need to give yourself insulin.

How does it work?
Insulin is injected into your fat tissue with a needle and it gets absorbed by your body.

Does it hurt?
Giving yourself insulin shots is usually painless. You typically can't feel the injection and it tends to hurt less than poking your finger to check your blood sugar.

What are the common side effects?
- Low blood sugar
- Weight gain, so it is important to make healthy food choices.

Most common insulin prescribed:

<table>
<thead>
<tr>
<th>Name of insulin</th>
<th>Time it starts working after you inject</th>
<th>Working at its strongest</th>
<th>Done working</th>
</tr>
</thead>
<tbody>
<tr>
<td>A+spart (Novolog)</td>
<td>5-15 minutes (give before meal)</td>
<td>1-2 hours</td>
<td>4-6 hours</td>
</tr>
<tr>
<td>Glargine (Lantus)</td>
<td>1-2 hours (give once a day)</td>
<td>The next 24 hours</td>
<td>20-24 hours</td>
</tr>
</tbody>
</table>

What do I do if I miss a dose?
Missing your insulin often can be very serious. Try not to miss taking your insulin.

Do I have to check my blood sugar if I am on insulin?
Yes. Checking your blood sugar will let you know how well your insulin is working. Check 2-4 times per day.

Will I need to carry a syringe and insulin vial around with me?
Maybe not. More and more often, people are using insulin pens. Insulin pens are prefilled with insulin. That means you don’t have to draw any insulin into them, insulin is already in the device. The pen is compact and can easily be carried in a pocket or a purse. You just dial up the correct amount of insulin. Once the pen is used it is good for 28 days without refrigeration.

IMPORTANT: If you experience low blood sugar often, it may mean your insulin needs to be adjusted. Having a low blood sugar 1-2 times each week would be a reason to contact your diabetes provider right away. It is important to always carry treatment for low blood sugar with you. It’s also a good idea to test your blood sugar before you drive or start exercising to make sure your blood sugar is not too low.
Drawing Up and Injecting Insulin

Lantus (glargine)
2. Wash your hands.
3. Wipe top of insulin vial with alcohol wipe pad.
4. Take both caps off the syringe.
5. Pull the plunger down to let AIR into your syringe. The amount of air you draw up should equal the amount of insulin you will be drawing out.
6. Insert the needle into the insulin vial, aim for the center of the rubber.
7. Push air into the vial.
8. Turn the insulin vial upside down and carefully draw up your dose of insulin.
9. Check for air bubbles, if you see them, slowly push the insulin back in and draw it up again. Bubbles in your syringe will keep you from getting your full dose of insulin.
10. Pull the syringe out of the vial.

Injecting the insulin
1. Clean a small area of skin on your belly, thigh, or arm. Insulin is best absorbed in your belly.
2. Hold the syringe like a dart.
3. Gently pinch up your skin and push the needle into your skin.
4. Press the plunger to deliver the insulin.
5. Release your pinch, count to 10 quickly and remove the needle.
6. Do not attempt to recap your needle. Dispose of it properly, either a sharps container or laundry detergent container. Syringes are not recyclable.
Using an Insulin Pen

1. Getting your pen ready
   - Get your supplies: You will need the insulin pen and a disposable needle
   - Remove the protective paper from your disposable needle.
   - Attach the needle to the insulin pen.
   - Pull off the outer needle cap.
   - Pull off the inner needle cap. You should now see your needle.

2. Do an “air shot”:
   An air shot is when you shoot a small amount of insulin out of your pen to make sure there is not a small air bubble in your needle. An air bubble would keep you from getting the right dose of insulin.
   - To do an air shot, turn your dose selector to 2 units.
   - Hold the pen with the needle facing toward the sky.
   - Tap the cartridge a few times to help the air bubble rise to the top.
   - Next push the push button all the way in. The dose selector will return to zero.
   - A drop of insulin should appear at the needle tip. If insulin does not appear on the needle, change the needle and try again. If you are unable to see a drop of insulin, contact your pharmacist about getting a new pen.

3. Dialing the Dose
   - Turn the dose selector to the number of units you need to inject.
   - The pointer should line up with the dose. You can turn the dial in either direction.

4. Giving the injection
   - Push the needle into a fatty area of your body. Many people use fat on their stomach.
   - Hold the push button down until the dial goes to zero.
   - Keep the needle in the skin and the push button pushed all the way in for 6 seconds. This is to make sure the full dose of insulin has been given.

5. Remove the needle and place it in a sharps container.
Traveling with Diabetes

Things to remember:

- Insulin, pills, syringes, pens, blood sugar meter and strips, should all travel with you in your carryon.
- Carry your original bottles or boxes that have your prescriptions so if there is any question, you have all the information with you.
- Pack at least twice as much medicine as you think you need in case you are delayed.
- Carry healthy snacks with you when you travel and treatment for low blood sugar.
- Do not leave your insulin or blood sugar meter in a hot trunk or directly in the sunlight, you also want to take care that your insulin and meter do not get too cold.
- You do not have to refrigerate your insulin during travel unless you know you will be in a very hot environment where you will have trouble keeping it cool.
- If you are crossing several time zones, talk to your provider or diabetes educator about when to take your insulin (particularly your long-acting insulin).
- In foreign countries, insulin is dosed in different strengths. If you have to get insulin in an emergency, you should contact your diabetes team for some help.
- Take an empty refillable water bottle and be sure to fill up before you get on the plane. It is important not to get dehydrated when you fly.
- Consider wearing a medic alert bracelet.

Other resources:

www.diabetes.org
www.dlife.com
Nutrition and Diabetes

1. Read food labels
   • Look at the serving size
   • Look at Total Carbohydrates, not sugars
   • Choose foods with 3g of fiber or more per serving
   • Aim for 25-35g dietary fiber per day

2. Women get 30-45 grams of carbs PER MEAL. Men get 45-60 grams of carbs PER MEAL. This is a starting point for better blood sugar control through diet.

3. Choose less boxed, packaged foods from the aisles at your store. Instead, choose fruits, vegetables, dairy and lean meat.

4. Drink lots of water and avoid juice, Tang, Kool-Aid and soda. These foods are high in sugar and less healthy.

5. Eat foods close to how they were found in nature. (Hint: you do not see bologna walking around, but you do see moose) Choose 100% whole grains, whole fruits and vegetables—canned and frozen are good too!

6. Choose to bake, broil, or boil your foods; avoid frying.

7. Even though fat and protein do not have a big impact on your blood sugar, they can still affect your heart health. Choose wild game, birds, fish, and seafood more often than red meat/pork.

8. Smaller amounts of food = smaller rise in blood sugar. Eat smaller amounts of food throughout the day instead of 1-2 large meals.
Balancing Your Plate

- Fill half of your plate with non-starchy vegetables such as: spinach, celery, lettuce, carrots, peppers, broccoli, asparagus, seaweed, green beans, onions, mushrooms, tomatoes, etc.
- Fill one-quarter of your plate with LEAN meat or fish.
- Fill one-quarter of your plate with starchy or carbohydrate foods, such as: rice, potatoes, pasta/noodles, bread, corn, peas, squash, and beans.

The plate method will help you get the right portions and a healthy balance.
Reading Food Labels

Look at the serving size: It says “1 cup” (the 228 g next to it is just how much the food weighs).

**How many Total Carbohydrates are in one serving of this food?**
“31g”. That means there are 31 grams of carbohydrate in 1 cup of this food.

**How many grams of fiber are in 1 cup of this food?**
If you said 0 grams you were correct. If the food you are eating comes from a plant (such as bread or cereal) it should contain at least 3 grams of fiber per serving.

**Sodium can raise your blood pressure.** Keep your sodium under 2300 mg. per day. Aim for 600 mg or less per meal when your food has a label to read.

**Choose foods that do not have a lot of items in the ingredient list.** If you can barely read the ingredients in a food, the food is highly processed.

**Tip:** Do not spend all day at the grocery store reading labels. For each grocery trip choose one food that you eat regularly and find the healthiest version of it. You will be eating healthier in just a few weeks!
Carbohydrate Counting

Below is a list of foods that will affect your blood sugar.

You should eat these foods at each meal in small amounts. Aim for about 45 grams of carbs at each meal.

Each serving here equals about 15 grams of carbs — choose 3 servings at each meal.

**Grains, beans, starchy vegetables:**
- 1 slice bread
- 1/3 cup cooked rice, pasta
- 1/2 cup cooked mush, oatmeal, cream of wheat
- 1/2 cup beans, potatoes, corn, or peas
- 4-6 saltine crackers
- 1 piece pilot bread
- 1/2 bun or English muffin
- 1 6” tortilla
- 1 4” pancake or waffle

**Fruit, milk, yogurt:**
- 1 small piece fruit
- 1/2 cup canned fruit, unsweetened
- 1 cup melon
- About 15 grapes or cherries
- 2 tablespoons raisins
- 1 cup milk, soymilk, or light yogurt

**Sweets, snacks - choose less often:**
- 1 2” brownie
- 2 small cookies, about 12 potato chips
- 1/2 cup regular soda, juice

**NOTE:** Fruit juice and regular soda will cause your blood sugar to rise quickly. You may want to avoid these drinks for a while. They contain large amounts of carbs and not a lot of nutrients.

Below is a list of some foods that will have very little effect on your blood sugar:

**Protein:** Wild game, birds, seafood, fish, cheese, cottage cheese, tofu, eggs, bacon (high fat), sausage (high fat)

**Fats:** Nuts, seal oil, peanut butter, butter, sour cream, salad dressing, mayonnaise, oil.

**Non-Starchy vegetables:** Asparagus, carrots, fiddle head ferns, green beans, beets, sour dock, broccoli, brussel sprouts, cabbage, sea weed, zucchini, salad, greens, mushrooms, onions, peppers, cucumbers, celery, tomatoes.

**Other:** Sugar free Jell-o, tea, salsa, Crystal Light

Eat 1-2 cups of vegetables at lunch and dinner. Choose lean versions of your favorite proteins to keep your heart healthy.
Sick Day Guidelines

Things to remember:

• Take your diabetes medicines. Continue your Lantus (glargine), and contact your doctor for guidelines on your Novolog if you do not feel like eating.
• You should consider checking your blood sugar every 4 hours to see if your illness is causing your blood sugar to go higher than normal.
• Call your diabetes team if your blood sugar stays higher than normal and will not come down.
• Let your provider know if you are taking any herbs, supplements or over the counter medicines to treat your sickness.
• Stay hydrated by drinking water or unsweetened liquids.
• Call your provider for treatment if you have:
  » Severe diarrhea or vomiting that lasts longer than 12 to 24 hours.
  » Moderate ketones or higher (Type 1 diabetes).
  » Blood sugars greater than 240 mg/dl twice in a row.
  » Fever greater than 100 degrees for more than 24-48 hours.

What to Eat:

Choose clear, low sodium broths or soups
Crackers, Jell-O or fruit popsicles
If you are unable to eat food, it would be OK to sip on regular juice or ginger ale to keep energy going into your body.
Contact your provider with further questions.
Exercise

The American College of Sports Medicine and the American Diabetes Association joined together to make the guidelines for physical activity in people with diabetes.

- At LEAST 150 minutes a week of MODERATE to VIGOROUS aerobic exercise spread over at least 3 days during the week.
- Avoid going more than 2 days in a row between your exercise sessions.
- **Strength training** is just as important as aerobic activity and should be included at least 2 days per week.

**Tips for Getting Started:**

- Choose something that you enjoy and that is fun!
- Use music, a favorite TV show or an audio book to take your mind off the exercise.
- Try new things.
- Start slow, then over time, increase how long you exercise or the intensity (how hard you breathe while exercising). Ten minutes 3 times a day is as good as 30 minutes all at once!
- March in place, walk around the block, do a seated march while you watch TV, use arm bands, just start moving.

**Things to Remember:**

Exercise helps to lower your blood sugar. Be sure to carry treatment with you to treat a low if you are at risk. If you get low often during exercise, you may need less medicine, call your provider.

- Check your blood sugar before exercise.
- Talk to your provider about getting started and what exercise is best for you.
- Wear proper shoes and socks. Choose shoes with good support exercise
- Enjoy your life!
Weight Loss and Diabetes

If a person with diabetes is overweight, losing a small amount of weight can make a big difference. Losing even a few pounds by exercising and eating healthy can reduce your risk of complications and improve your blood sugar control.

Losing Weight takes three steps:

1. Take an honest inventory of your current lifestyle habits:

   Food
   Write down everything you eat for three or more days. There are several free computer apps that will help you figure out how many calories you are eating. Your dietitian can also do this for you. The key is to learn when and how much you are really eating.

   Activity
   Do you get exercise beyond your daily living activity? Daily living activity is the activity everyone does as part of a typical day: light cleaning, cooking, child care, etc... Daily living activity is important, but are you doing any moderate activity that makes your heart beat faster, or creates a light sweat? Record how much moderate activity you are getting each day.

   Sleep
   Are you getting enough sleep? Getting enough rest is an important part of losing weight. People who do not get enough sleep are more likely to be overweight. Pay attention to how many hours you are getting.

   Stress
   Does life feel out of control? Stress can increase blood sugar and make it harder to lose weight.

2. Review and compare your information:

   • Is the amount of calories you are taking in keeping you from losing weight? Can you identify a time of day that is a problem for you? Talk to your dietitian about how many calories you should be taking in to lose weight. How do you compare?

   • How much moderate activity are you getting compared to the 30-60 minutes that are recommended? You can start slow and work your way up!

   • Are you running on 5 hours of sleep a night? If you are getting less than 7 hours of sleep a night, you are not getting enough!

   • Are you feeling very stressed? What changes can you make in your life to feel more in control and relaxed? Meditation and exercises are two ways to help reduce the effects of stress.
3. Make a plan:

- Pick one or two things you want to work on.
- Make a goal. Be very specific. What EXACTLY do you want to do?

**For example: I would like to increase my activity.**

*My goal for this is: I will walk on my lunch break for 30 minutes on Monday, Wednesday and Friday of this week. I will walk at a pace that leaves me a little sweaty when I'm done.*

Your dietitian and diabetes educator are here to help you with this process. There isn’t one way to lose weight that works best for everyone. Finding out where you need help and choosing goals that make sense to you, will help you be successful.

You are in charge of managing your diabetes. You can take action to help prevent complications. We are here to help you meet your goals, let us know how we can help you. Come prepared to your diabetes visit by bringing your blood sugar meter or blood sugar logs, your medicines, and a list of questions or topics that are on your mind.

**Foot Care**

Over time, some people with diabetes can lose feeling in their feet due to nerve damage. Some people will notice increased sensitivity and pain, others may begin to lose feeling altogether. Consider some of these tips to help protect your feet.

- Look at your feet each day. Check for cuts, scrapes, blisters, sores, or bruises. If you see a problem, take action. Ask a family member or friend to help you if you cannot see your feet.
- Wash your feet every day, especially between the toes. While you wash them, this is a good time to inspect them. Dry them well. Soaking your feet is not recommended.
- Cut your toenails straight across. Ask for help if you have trouble reaching your feet or if you cannot see.
- Wear shoes with good support that fit properly.
- Test water temperature in a bath before stepping in. Avoid using heating pads to warm your feet; you may not be able to feel if it is too hot.
- Have your provider look at your feet regularly.
- See your podiatrist (foot doctor) with further concerns about your feet.
More Information

For more information or if you have questions, contact:

Diabetes Educator: ______________________
Phone: ________________________________

www.anthc.org/diabetes
(907) 729-1125