

Diabetic Monthly

July 8, 2010
Volume 3 Issue 7

Gunnison Valley Diabetes Self-Management Education Program
45 East 100 North Gunnison, Utah 84634

July Support Groups - Taking Medications

By Angie Merchant

This month's Diabetic Support Group will focus on "Taking Medications". I often get questions about what Over-The-Counter medications that can be taken when you have diabetes. I also have many people ask what their medications are suppose to do, and if they can be taken together. There are endless questions when it comes to medications. July's Support Group will hopefully answer these questions for you.

The Gunnison Support Group will be taught by **Bill Tucker, Registered Pharmacist**, and the Monroe Support Group will be taught by **Angie Merchant, RN, Diabetic Educator**. Write down any questions you can think of, and bring them with you to support group. We want these classes to be as helpful as possible.

Thanks to everyone who attended the Diabetic Health Fair in June. It was a lot of fun, and very well attended. A big **THANK YOU** to **Dr. Steven Embley** for his class on "Preventing Diabetic Complications." He done an excellent job, and everyone seemed to really enjoy it. We are all very happy to have him here at Gunnison Valley Hospital.

Diabetic Support Groups are always free of charge, and everyone is invited to attend. We welcome friends and family members whether you have diabetes or not. It is a good chance to socialize with others, learn about staying healthy, and enjoy healthy snacks. I look forward to seeing you there.

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Support Group Schedules

Gunnison Support Group

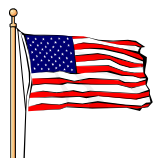
Gunnison Valley Homecare at 45 East 100 North Gunnison

July 20, 2010 at 3:00pm – 4:00pm

Monroe Support Group

South Sevier Senior Center at 140 West 100 South Monroe

July 27, 2010 at 11:00am – 12:00pm



Happy 4th of July

Tip of the Month:

Question: Why do I get dizzy when I stand up?

The Science of Sweat... Is Exercise the Best Medicine??

By Erika Gebel, PhD. *Diabetes Forecast*, July 2010, pg 47-49.

Exercise... It's free. Most people can't get enough of it. Entreaties to do more of it abound. Yes, it's the crux of healthy living: Exercise. And while just about everyone is better off working out regularly, exercise is, in some sense, the perfect drug for diabetes. Not only can it improve blood glucose control - which in itself reduces the risk for diabetes complications- but research suggests it may combat heart disease, weight gain, depression, and more.

How does exercise help my blood sugar?

Muscle contractions have a powerful effect on how the body processes glucose, the original biofuel. The muscles are the major consumer of glucose during exercise. It's not surprising since they do most of the work. In each cell, muscles store dense packets of glucose, accounting for around 2,000 calories worth of energy throughout the body, according to Sheri Colberg-Ochs, PhD. "(This energy) just stays there unless you contract the muscle."

During exercise, the muscles deplete their individual glucose reserves. To help restock their glucose supplies, the muscles change in two important ways: They become more sensitive to insulin- a hormone that escorts glucose from the blood stream into body cells- and they also start to absorb glucose on their own, independently of insulin.

This second pathway created during exercise is a boon for anyone with type 2 diabetes, which is marked by insulin resistance. "When the body is at rest, it has one mechanism for getting glucose out of the blood stream. That way is insulin, says Colberg-Ochs. "What's so good about exercise is that even if the muscles are insulin resistant at rest, that's irrelevant with exercise."

Exercise's effect on glucose use occurs not just in people with type 2 but in almost everyone, including those with type 1 and pre-diabetes. A large study found that, in people with pre-diabetes,

Lifestyle changes that included 150 minutes a week of moderate-intensity exercise reduced the risk of progression to full-blown type 2 diabetes by 58%.

Exercise makes a little insulin go a long way. That's generally a good thing. But people who get their insulin from a shot or a pump can end up with too much insulin in the body. That can cause blood glucose to go too low (hypoglycemia), particularly when glucose is diverted to the muscle cells during exercise.

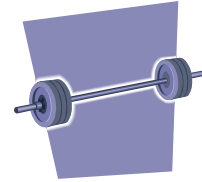
"That's why some type 1's shy away from exercise," says Colberg-Ochs. But they needn't. "If you plan ahead and reduce insulin intake, you can go through exercise without swings in blood glucose." People with type 2 can also suffer hypoglycemia with exercise because of medication, but the risk isn't as great.

Exercise's short-term effects can last anywhere from two hours to three days. "That's generally why, when we talk about how often people should exercise, we say that they should do it at least every other day, though probably every day is better." Other benefits of regular physical activity can last a lifetime.

"Exercises short-term effects can last anywhere from two hours to three days."

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MUSCLE UP



If you keep with it and incorporate resistance training into your routine, exercise can provide additional opportunities to help with blood glucose control by building muscle. “Over the long term, there can be a change in muscle composition that can favor getting Glucose into the cell,” says Ronald Sigal, MD, MPH, FRCPC, a professor of medicine, kinesiology, cardiac sciences. “Also, over time, there are changes in body composition that can help glucose uptake, such as an increase in muscle mass.”

Weight is made up of more than just pounds; the relative amounts of muscle and fat, how much fat is inside muscle, and where fat is found on the body are far more important fitness criteria than simply weight alone. Muscles can use fat or glucose for energy; as fat tissue in the body is decreased, the muscles become better at using glucose for their energy needs.

Exercise can tip the scale toward a healthier body composition. The best way to build muscle mass is through resistance training. It involves working the muscles against an opposing force by, for example, lifting weights or one’s own body weight (as with push-ups, sit-ups, or yoga). One study of older men with type 2 diabetes found that a four-month resistance training program skimmed off some of the visceral fat from deep inside their abdomens, which is known to be particularly bad for the heart.

Every ounce of muscle is a glucose burning powerhouse, so the more muscle a body has, the better it will be able to control blood glucose levels. “You can only fit a certain amount of glucose in muscle, but if you have more muscle, then you can store more,” says Colberg-Ochs.

A 2007 study published in the *Annals of Internal Medicine* compared different approaches to exercise, including aerobic exercise, resistance exercise, a combination of both aerobic and resistance exercise, and no exercise at all. The exercise group that combined aerobic and resistance training saw the greatest improvements in blood glucose control. To get the most from exercise, says Sigal, who led the study, you should do both: **GET YOUR HEART PUMPING AND BUILD MUSCLE.**

Answer: Patients with long-term diabetes can lose the ability to maintain their blood pressure in response to changes in posture. Your blood pressure can drop very low when you stand up and cause dizziness, temporary loss of vision, or fainting spells.

You may be experiencing “Postural dizziness,” which can be serious. Abnormal function of the nerves that regulate your heart and blood vessels is the most common cause of postural dizziness, but other causes must be ruled out by your health care team. Blood pressure medications, such as diuretics, can cause postural dizziness and so can antidepressants, nitroglycerine, and certain calcium-blocking drugs.

If your postural dizziness is due to diabetes alone, then you will need specific treatment for this problem. Tilting your bed so that the head is 6–9 inches higher than the foot may reduce your dizziness. Other therapies include carefully increasing the salt in your diet, wearing support stockings to prevent blood from pooling in your legs, or taking a hormone pill to help your body retain fluid. These treatments can be dangerous in people who have heart disease, so be sure to consult your health care team before trying any of them.

Recipe of the Month... Lime Shrimp Kebabs

Makes 2 servings; each serving equals 1 cup of fruit or vegetables.

Ingredients:

- 16 large shrimp, uncooked, deveined
- 3 large limes
- 2 cloves garlic, crushed and peeled
- ¼ tsp. Black pepper
- 2 tsp. Olive oil
- 2 Tbsp. Fresh cilantro, cleaned and chopped
- 10 medium cherry tomatoes, rinsed
- 10 small white-button mushrooms,
wiped clean and stems removed.

Nutritional Facts per serving:

Calories	190
Protein	18g
Fat	7g
Cholesterol	85mg
Carbohydrates	20 g
Fiber	5g
Sodium	116mg
Calories from fat	28%

Directions: In a glass measuring cup, squeeze limes- yielding ¼ cup of juice. Add the garlic, pepper, olive oil, and cilantro and stir. Place the shrimp in a medium bowl and pour the cilantro-lime marinade over the shrimp. Let the shrimp marinate for 10 to 15 minutes in the refrigerator (do not let them marinate for more than 30 minutes as the acid of the juice will alter the texture of the shrimp). Alternate cherry tomatoes, mushrooms, and shrimp on four skewers.

Grill the skewers over medium heat for 3 to 4 minutes on each side until the shrimp are just cooked through.

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