

Diabetic Monthly

May 2013

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

May Support Groups: Complications

By Heidi Ison LPN

I want to thank Dr. GJ Wilden for teaching April's support group. He gave great ideas on how to start or enhance your exercise program. Hopefully he was able to motivate those who attended to start an exercise plan.

This month's topic for Gunnison and Monroe groups will be complications of Diabetes. Having diabetes puts you at an increased risk for having serious medical complications. Come learn about some of these from our Diabetic Educator Angie Merchant RN.

I am excited to announce we will be offering a new support group in Mt. Pleasant every fourth Thursday of each month. This month's topic for Mt. Pleasant will be proper nutrition and carbohydrate counting. Remember to write down your questions and bring them with you.

As always, these support groups are free of charge and everyone is welcome to attend. We encourage you to bring your family or friends, as they can be a great support when they have a better understanding about Diabetes. We look forward to seeing you at support group.

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Support Group Schedules

Gunnison Support Group

Gunnison Homecare building at 45 East 100 North Gunnison

May 21, 2013 at 3:00 – 4:00 pm

Monroe Support Group

South Sevier Senior Center at 140 West 100 South Monroe

May 28, 2013 at 11:00- 12:00

Mt. Pleasant Support Group

1125 Black Hawk Boulevard

May 23, 2013 at 2:00- 3:00

June support group
to be announced

Tip of the Day

Question

Am I at more risk to develop heart disease because I have diabetes?

Answer**Yes**

For reasons , having diabetes does put you at an increased risk of heart disease and other diseases that are caused by blocked arteries. In fact, your risk is the same as a person without diabetes who has already had one heart attack. That is why it is very important for you to minimize your other risk factors by getting plenty of exercise, keeping your weight normal, avoiding cholesterol and fatty foods (saturated fat), and maintaining normal blood pressure.

Walking is a good exercise and helps in all those areas as well as reducing stress. Most important (at least in our opinion) is that you do not smoke cigarettes. If you are already smoking, join a "quit smoking" support group. These are available in most communities and health care facilities. Nicotine skin patches may help. Many of the risk factors that cause heart disease can be greatly reduced with a healthy lifestyle, and this should be your goal with or without diabetes. However, because you already have one risk factor for heart disease (diabetes), there is even more reason to reduce other risk factors



"I'm the Blood Sugar Fairy.
If you can see me, yours is too low."

© 2009 Diabetes Health

Healthy ABCS

Taken from the Diabetes Association

Taking care of your diabetes and the conditions that come with it can help you lower your chances of heart and blood vessel disease. Even if you have heart disease or have already had a heart attack or a stroke, every step you take to keep your ABCs (A1C, blood pressure, and cholesterol) in your target range will help lower your risk of future heart disease or a stroke.

A is for A1C. Your A1C check, which also may be reported as estimated average glucose (eAG) tells you your average blood glucose for the past 2 to 3 months.

B is for blood pressure. High blood pressure makes your heart work harder than it should.

C is for cholesterol. Your cholesterol numbers tell you about the amount of fat in your blood. Some kinds, like HDL cholesterol, help protect your heart. Others, like LDL cholesterol, can clog your arteries. High triglycerides raise your risk for a heart attack or a stroke.

Peripheral Arterial Disease (PAD)

- PAD increases the risk of heart attack and stroke.
- Many people don't recognize the warning signs or get the treatment they need.
- PAD can be treated with physical activity, medication, and surgery.

What is Peripheral Arterial Disease (PAD)?

Peripheral arterial disease, also called PAD, occurs when blood vessels in the legs are narrowed or blocked by fatty deposits and blood flow to your feet and legs decreases. If you have PAD, you have an increased risk for heart attack and stroke. An estimated 1 out of every 3 people with diabetes over the age of 50 have this condition. However, many of those with warning signs don't realize that they have PAD and therefore don't get treatment.

What Does Diabetes Have to Do With PAD?

If you have diabetes, you're much more likely to have PAD, a heart attack, or a stroke. But you can cut your chances of having those problems by taking special care of your blood vessels.

How Do I Know Whether I'm at High Risk for PAD?

Just having diabetes puts you at risk, but your risk is even greater under the following conditions:

- Smoking
- High blood pressure
- Abnormal blood cholesterol levels
- Overweight
- Not physically active
- Over age 50
- History of heart disease, or you've have had a heart attack or a stroke
- Family history of heart disease, heart attacks, or strokes

You can't change your age or your family history, but taking care of your diabetes and the conditions that come with it can lower your chances of having PAD.

What are the Warning Signs of PAD?

Many people with diabetes and PAD do not have any symptoms. Some people may experience mild leg pain or trouble walking and believe that it's just a sign of getting older. Others may have the following symptoms:

- Leg pain, particularly when walking or exercising, which disappears after a few minutes of rest
- Numbness, tingling, or coldness in the lower legs or feet
- Sores or infections on your feet or legs that heal slowly

How is PAD Diagnosed?

The ankle brachial index (ABI) is one test used to diagnose PAD. This test compares the blood pressure in your ankle to the blood pressure in your arm. If the blood pressure in the lower part of your leg is lower than the pressure in your arm, you may have PAD. An expert panel brought together by the American Diabetes Association recommends that people with diabetes over the age of 50 have an ABI to test for PAD. People with diabetes younger than 50 may benefit from testing if they have other PAD risk factors.

These other tests can also be used to diagnosis PAD:

- Angiogram (AN-gee-oh-gram): a test in which dye is injected into the blood vessels using a catheter and X rays are taken to show whether arteries are narrowed or blocked.
- Ultrasound: a test using sound waves to produce images of the blood vessels on a viewing screen.
- MRI (magnetic resonance imaging): a test using special scanning techniques to detect blockages within blood vessels.

How is PAD Treated?

People with PAD are at very high risk for heart attacks and stroke, so it is very important to manage cardiovascular risk factors. Here are some steps you can take:

- Quit smoking. Your health care provider can help you.
- Aim for an A1C below 7%. The A1C test measures your average blood glucose (sugar) over the past 2 to 3 months.
- Lower your blood pressure to less than 130/80 mmHg.
- Get your LDL cholesterol below 100 mg/dl.
- Talk to your health care provider about taking aspirin or other antiplatelet medicines. These medicines have been shown to reduce heart attacks and strokes in people with PAD.

Studies have found that exercise, such as walking, can be used both to treat PAD and to prevent it. Medications may help relieve symptoms.

In some cases, surgical procedures are used to treat PAD:

- Angioplasty, also called balloon angioplasty: a procedure in which a small tube with a balloon attached is inserted and threaded into an artery; then the balloon is inflated, opening the narrowed artery. A wire tube, called a stent, may be left in place to help keep the artery open.
- Artery bypass graft: a procedure in which a blood vessel is taken from another part of the body and is attached to bypass a blocked artery

Chicken Souvlaki

Ingredients

2 cups coarsely shredded, rotisserie-cooked chicken
1 medium English cucumber, peeled, seeded, and diced
1/2 cup finely diced sweet onion
3 Tbsp. fresh lemon juice
2 Tbsp. olive oil
1/2 tsp. ground cumin
1/4 tsp. kosher salt
1/4 tsp. freshly ground black pepper
4 small whole wheat pita breads
(4-inch diameter), warmed or toasted
1/2 cup plain nonfat Greek yogurt, stirred



Nutrition

Per Serving: Calories 290, Fat 12 g (Sat. Fat 2.2 g), Carbohydrate 21 g (Fiber 3 g, Sugars 4 g), Cholesterol 80 mg, Sodium 555 mg, Potassium 425 mg, Protein 26 g, Phosphorus 285 mg
Exchanges: Starch 1, Vegetable 1, Lean Meat 3, Fat 1

Preparation

Makes: 4 servings

Serving Size: 1 sandwich

Preparation Time: 30 minutes

In a large bowl, combine the chicken, cucumber, onion, lemon juice, olive oil, cumin, salt, and black pepper. Divide the chicken mixture among the pita breads. Top each sandwich with 2 Tbsp. of the Greek yogurt.

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