

**Gum disease**  
The importance  
of prevention

**Lower limb care**  
Know the warning signs  
of foot complications

**Nick Jonas**  
Managing blood  
sugar on the road

**MEDIA  
PLANET**

November 2010

# UNITED FOR DIABETES



## CO-STARS FOR THE CAUSE

**Paul and Mira Sorvino** discuss how diabetes  
has brought their family even closer.

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## CHALLENGES

**There is a battle raging globally...**a battle in which countries around the world are suffering many casualties. It is being fought right here in North America.

## United together for diabetes

In North America this year more than 313,000 deaths will be attributable to diabetes—over 231,000 in the United States of America alone. The US is among the world's top 10 countries with the largest population of people with diabetes.

Diabetes affects over 300 million people worldwide. If nothing is done, if no action is taken, we will have an even bigger problem on our hands tomorrow. The International Diabetes Federation (IDF) predicts close to half a billion people will have diabetes by 2030. Ninety years after the discovery of insulin, we are losing the battle against this cruel disease.

**The silent killer**

World Diabetes Day, celebrated every year on November 14, is the best opportunity we have to draw attention to the silent killer that is diabetes. Since 1991, World Diabetes Day has been

spreading the message of diabetes awareness, education and prevention to millions of people around the world. It's a global effort with local champions, backed by the World Health Organization and the United Nations. In 2006, IDF secured UN Resolution 61/225 which laid the foundation for global change. Our task is to ensure the political promise made by the world's governments become a reality for everyone living with diabetes.

The birth of World Diabetes Day can be looked back upon as a key turning point for diabetes and other non-communicable diseases (NCDs.) Securing the UN Resolution was a major achievement and the full impact and implications of it continues to unfold to this day: on May 13, 2010, UN member states unanimously voted to hold a UN High Level Summit on Non-Communicable Diseases (NCDs) in September 2011 in New York. This is the first step. Next year's Summit gives us



**Professor Jean Claude Mbanya**  
President, International  
Diabetes Federation

**BEST TIPS**

- Know the signs and symptoms of diabetes. Early diagnosis saves lives.
- Diabetes prevention and treatment is simple and cost-effective. Put it on top of the agenda.
- Your child could be affected. Know the warning signs. See your doctor to measure the risk.
- Enjoy an active life and prevent complications.

a chance to demand answers and action for diabetes.

**Let's take control of diabetes. Now.**

This year we're getting ready to make the world's biggest diabetes campaign even bigger and more impactful than ever before. The theme for World Diabetes Day 2010 is "Let's take control of diabetes. Now." We are promoting positive messages around diabetes prevention and awareness and calling on people to take control of this epidemic that is affecting our planet in alarmingly high numbers.

No matter where you are, it's your efforts that make World Diabetes Day a truly global, grassroots campaign.

We are united for diabetes. We are in this together.



International  
Diabetes  
Federation

**WE RECOMMEND**

**Holiday survival guide**  
Sugar-free alternatives to traditional holiday treats.

PAGE 4

"When you go into the holidays, go in with a plan."

**You are what and how much you eat**  
Weight is a key factor in diabetes maintenance.

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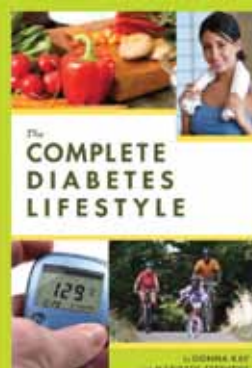
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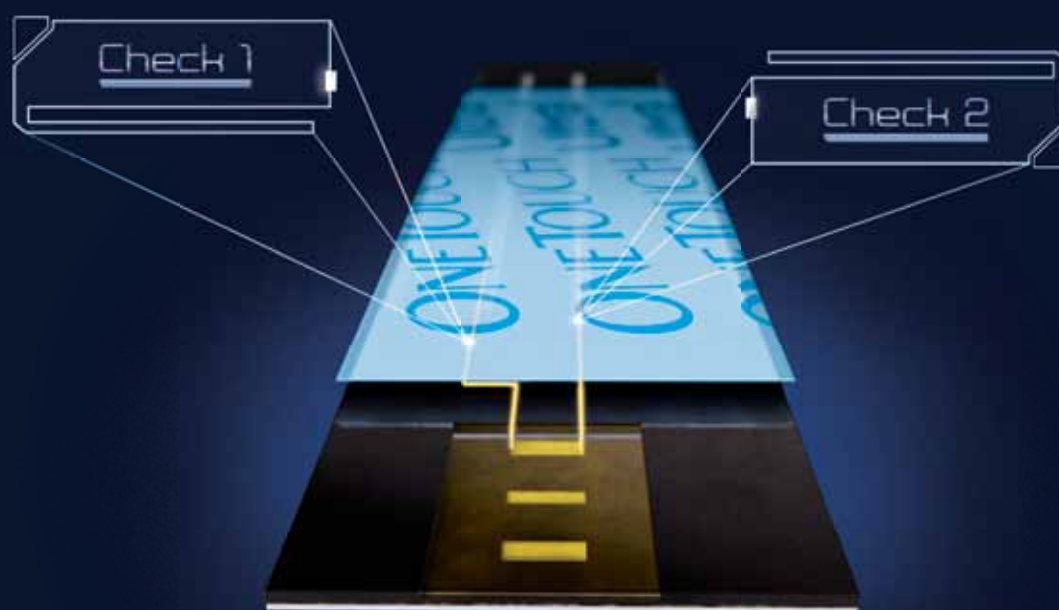
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## INSPIRATION

↓ HOLIDAY  
SURVIVAL GUIDE**The most wonderful (and sugar-filled) time of the year**

■ Managing diabetes may feel like a challenge during the weeks of sugarplum dreams.

"When you go into the holidays, go in with a plan," Donna Kay, author of *The Complete Diabetic Lifestyle* says. "When will I exercise? How can I manage my stress? What will I eat? The key is to think through and plan ahead."

While moderation is the key to everything, make more room on your plate for healthier alternatives. Steam vegetables. Cut back on the sauces and gravies. Plan your portions ahead, and remember it's not impolite to refuse multiple helpings.

Attending a party where a buffet will tempt you to over-indulge? Eat a small, healthy meal prior to reduce attraction. Then, treat yourself with only a few special foods, not those you find throughout the year.

When the cookies and pies call, bake and bring your own. Revise recipes with sugar substitutes—which also come in brown and confectioner's sugar options—and spices. Sugar-free candy alternatives keep you from missing out on traditional candy canes and gumdrop trees. Carrying a few of these treats with you also helps fulfill sweet urges while resisting high-fat, sugary treats at gatherings.

WENDY TAYLOR

**Question:** Can you recognize an appropriate food serving size?

**Answer:** For millions of diabetic patients and those heading toward the disease, this challenge can have frustrating and dangerous results.

# You are what and how much you eat

**A recent study by Harvard's department of biophysics predicts that if current trends remain, the U.S. obesity rate will reach 42 percent by mid-century.**

The Center for Disease Control echoed with the warning that the nation's diabetes rate will also rise to a third of the population at that time.

Weight is a key factor in diabetes maintenance, and portion control is an essential element. When you enlarge overall meal size, you often increase the amount of higher glycemic index foods and skew blood sugar.

"Our whole vision of appropriate portions no longer exists," Katherine Zeratsky, R.D., L.D., a clinical dietician at Mayo Clinic said. "We need to retrain eyes and



"Our whole vision of appropriate portions no longer exists."

**Katherine Zeratsky, R.D., L.D.**  
Clinical Dietician, Mayo Clinic

mindsets around portion."

Looking at fast-food menus, a chicken sandwich can vary from 82 to 351 grams in serving size.

The American Diabetes Association devised the "Create Your Plate" plan to help Americans get a handle on portion control. The program visualizes a three-sectioned plate distributing healthy servings of pro-

tein, starches, and non-starchy vegetables.

**Still having a hard time—or lack of time—to figure out portions?**

Many commercial diet plans also work to re-establish appropriate consumption.

Bruce Daggy, Ph.D, vice president of research and de-

velopment at Nutrisystem says clients often underestimate the amount they eat and need a recalibration to appropriate portions. Single-serving food provides a visual cue.

Zeratsky agrees food plans assist in balancing portions of proteins as well as good carbohydrates. The key, she adds, is remembering the lessons for long-term maintenance.

Daggy and Zeratsky both insist a physician or dietician should monitor any reduction. As weight loss progresses, medications such as insulin or blood pressure medications often need adjustments to reflect diet and exercise accomplishments.

WENDY TAYLOR

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†† In a 3-month clinical study at Temple University School of Medicine and published in the journal *Postgraduate Medicine*, Nutrisystem program participants lost an average of 18 lbs., and lowered fasting blood sugar levels from 149.5 to 115.2, compared to those in a control group, who lost 1.3 lbs., and lowered fasting blood sugar levels from 151.4 to 144. Not all menu items were included in the study. Study funded through a research grant from Nutrisystem.



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On Nutrisystem you add in fresh grocery items. Nutrisystem D is a portion-controlled, low-fat, reduced calorie comprehensive program designed to help people with type 2 diabetes achieve meaningful weight loss. It does not treat or cure diabetes, and is not a substitute for diabetes medications. Your physician may need to reduce your medications due to changes in your diet or weight loss while on this program. Consult your physician before starting this or any other diet program.

## NEWS



## Q&amp;A: NICK JONAS OF THE JONAS BROTHERS

**What was your first thought when you found out you were diagnosed with diabetes?**

■ I was diagnosed with Type 1 diabetes when I was 13 years old. When I first found out I had Type 1 diabetes, I was afraid and thought ‘why me?’ Then I thought, ‘why not me?’

I quickly decided I was not going to let diabetes slow me down. I stay positive, eat right and check my blood glucose level several times each day so I can make better decisions that help me stay in range. Learning how to give myself insulin was also very important in my everyday understanding of my diabetes. My family has been very supportive and they made sure I never felt like I was alone.

**What symptoms did you have and when did you decide it was time to go to the doctor?**

■ A month or two before I was diagnosed, I noticed I was always thirsty, I was losing weight and I was irritable. I lost about fifteen pounds in two to three weeks.

I took some time off from touring to see a doctor. The doctor sent me to the hospital after she heard all of my symptoms. My blood sugar was over 700, which is very, very high.

**Has it been difficult managing your hectic schedule on top of the demands of diabetes?**

■ Life can be complicated when you have diabetes, especially when you’re on the road for extended periods of time. It’s important to know your blood sugar level and what impacts it, like food, exercise and emotions. I monitor my blood sugar sometimes up to 12 times a day.



**Nick Jonas**  
of the Jonas Brothers talks about managing diabetes on the road.

I make sure my family and crew have extra testing supplies on hand while I’m on tour so I’m always prepared if I’m in a rush to get on stage.

The meter I use plugs into my computer wherever I am. The technology makes monitoring my blood sugar, logging the results and sharing information with my doctor an easier process for me, especially with my busy schedule. I can quickly see my recent blood sugar levels and trends and share them with my doctor from the road.

**What advice can you offer readers with Type 1 and Type 2 diabetes?**

■ Stay active and stay positive. Build a support team with your doctor, family and friends and know that diabetes is nothing to be embarrassed about. Go online, read as much as you can. If you go to my website, NicksSimpleWins.com, there’s a lot of great information about diabetes and ways you manage it.

**Why did you decide to go public with your diabetes?**

■ Having the support of my family was definitely a big part of getting through the first couple of months with diabetes. It’s important that other people with diabetes don’t feel like they are alone. Nearly every day I hear from someone like me who says that I make them feel it’s OK to have diabetes, and it’s that’s really cool that I can do that.

**Question:** Amazed by your strength and bravery when stepping on that tack?

**Answer:** Loss of feeling in limbs is often a first visible symptom of diabetes.

# New steps away from amputation in diabetic limb treatment

**For many years, a diabetes diagnosis triggered a gloomy warning from family and friends, “Careful you don’t lose your foot.” In fact, foot wounds often land diabetic patients in the hospital more than other complications.**

However, foot ulcers and neuropathy, or numbness, no longer equate to a death sentence for a limb if the patient remains proactive with care and wound treatment.

“The advanced therapies we have access to today are cost effective ways to encourage wound healing faster which avoids complications that lead to hospitalization and amputation,” says Damien M. Dauphinée, DPM, FACFAS, CWS, Medical Director for the Center for Wound Healing and Hyperbaric Medicine at North Texas Hospital.

Adjunctive therapy and innovations such as bioengineered tissue products, hyperbaric oxygen treatments and negative pressure wound therapy allow for faster closing of wounds, saving patients thousands of dollars, recovery time and possible catastrophic complications.

**Time is the greatest risk**

Recent studies suggest if a



“Every day a wound remains open is another chance for it to become infected.”

**Damien M. Dauphinée, DPM, FACFAS, CWS**  
Medical Director, Center for Wound Healing and Hyperbaric Medicine, North Texas Hospital

wound is not closed by 50 percent within the first four weeks, chances of it closing by 12 weeks drop to a slim three to five percent margin. With treatment such as those using regenerative measures, wound size is not as much of a threat for closure as infection.

“Every day a wound remains open is another chance for it to become infected,” Dauphinée said.

Of course, doctors stress the most effective treatment is prevention. Regular doctor’s exams, specialty shoes or inserts (often covered by Medicaid or Medicare) or, in some cases, surgery to decompress limb nerves can prevent foot complications from getting too far down the road.

WENDY TAYLOR

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## WARNING SIGNS OF FOOT COMPLICATIONS

- **Neuropathy**—loss of pain or temperature sensation
- **Skin damage**—cracking, peeling skin from decreased oil production
- **Calluses**—faster callus growth, usually in high-pressure areas
- **Foot ulcers**—sores typically occurring on the ball of the foot or

big toes

- **Poor circulation**—numbness or extremely cold limbs

**Read more on the web:**

[www.aens.us](http://www.aens.us)

[www.apma.org](http://www.apma.org)

[www.acfas.org](http://www.acfas.org)

STEP

2

KNOW THE  
WARNING  
SIGNS OF  
COMPLICATIONS



Now I understand.

I didn't think my diabetic foot sore was serious.  
But when I couldn't even feel the pain,  
I knew something was wrong.  
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## NEWS

**Question:** What's one of the best ways to manage or prevent diabetes in a fast-paced world?

**Answer:** Slow down your carbs.

STEP

3

EAT SLOWLY  
DIGESTED  
CARBS

# Finding the right carbohydrates

**Americans recovered from the no-carb frenzy of recent years scratching their heads about which carbohydrates they should eat.**

Those with Type 2 Diabetes must learn the tricks of a slow-carbohydrate diet for proper maintenance. However, as many Americans are on the road to the disease, it's also a tool for prevention.

"If everybody lived as if they are diabetic, they'd find it's a preferred diet for health," Andrew Mandell, executive director of the Defeat Diabetes Foundation said, "Unfortunately, diabetics discover it after the fact."

## Absorption rate

The place and absorption rate of a carbohydrate holds the key. Slowly digested carbohydrates, sometimes referred to as soluble fiber, move all the way to the large

"If everybody lived as if they are diabetic, they'd find it's a preferred diet for health."

**Andrew Mandell**  
Executive Director,  
Defeat Diabetes Foundation

intestine for fermentation by gut bacteria. This slower digestion delays carbohydrate absorption, resulting in a lower blood glucose after meals.

## Which foods claim this hero status?

Yams, wild rice, beans, slow-cooking oats, and fruits with edible skins and seeds such as apples or berries fall into this category. Carbohydrates resulting from multiple production steps or

added sugars, such as white rice or bread, cakes, quick cereals or processed fruit juices, enter the blood stream faster and cause an insulin spike.

However, people on the run can't always carry a list of foods. The easiest tip on carbohydrates is remembering slowly absorbed carbs are key.

**WENDY TAYLOR**

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# NEWS

## Detect early signs and symptoms

**Often times people with diabetes are not aware they have diabetic eye disease.**

That's because in the early stages there usually aren't any symptoms. Even people with good vision can suffer from diabetic eye disease. Often symptoms don't appear until damage has already occurred.

Diabetic retinopathy is the leading cause of blindness for people with diabetes, but the majority of cases are preventable. Diabetic retinopathy occurs when the blood vessels in your eyes become damaged. The blood vessels may swell and leak fluid. And abnormal blood vessels may begin to grow. If not treated, diabetic retinopathy can cause vision loss or blindness.



**LEFT:** An example of healthy sight. **RIGHT:** An example of diabetic retinopathy.

It's important to get an annual eye exam, especially if you have diabetes. A comprehensive eye exam is more than a quick eye check. It includes dilation of your eyes, and focuses on your eye health and overall wellness. Through a dilated eye exam, an eye doctor gets a better view inside your eyes to look for vision problems and

damage from diabetes, as well as other health conditions.

Detecting eye health issues early is a critical part of making sure you protect your vision. By the time you start experiencing problems with your vision, it could be too late for treatment.

*Source: VSP*



KEEP IT  
IN FOCUS

### Steps to avoid eye problems

- 1** Most important, keep your blood sugar levels under tight control. In the Diabetes Control and Complications Trial, people on standard diabetes treatment got retinopathy four times as often as people who kept their blood sugar levels close to normal. In people who already had retinopathy, the condition progressed in the tight-control group only half as often.
- 2** Bring high blood pressure under control. High blood pressure can make eye problems worse.
- 3** Quit smoking.

**4** See your eye care professional at least once a year for a dilated eye exam. Having your regular doctor look at your eyes is not enough.

**5** See your eye care professional if:

- your vision becomes blurry
- you have trouble reading signs or books
- you see double
- one or both of your eyes hurt
- your eyes get red and stay that way
- you feel pressure in your eye
- you see spots or floaters
- straight lines do not look straight
- you can't see things at the side as you used to.

*Source: American Diabetes Association*

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## NEWS

## 7 TIPS

**Healthy eating**

**1** Making healthy food choices, understanding portion sizes and learning the best times to eat are central to managing diabetes.

**Being active**

**2** Regular activity is important for overall fitness, weight management and blood glucose control.

**Monitoring**

**3** Daily self-monitoring of blood glucose provides people with diabetes the information they need to assess how food, physical activity and medications affect their blood glucose levels.

**Taking medication**

**4** Diabetes is a progressive condition. Depending on what type a person has, their healthcare team will be able to determine which medications they should be taking.

**Problem solving**

**5** A person with diabetes must keep their problem-solving skills sharp because on any given day, a high or low blood glucose episode or a sick day will require them to make rapid, informed decisions about food, activity and medications.

**Reducing risks**

**6** Effective risk reduction behaviors such as smoking cessation, and regular eye, foot and dental examinations reduce diabetes complications and maximize health and quality of life.

**Healthy coping**

**7** Health status and quality of life are affected by psychological and social factors. Psychological distress directly affects health and indirectly influences a person's motivation to keep their diabetes in control.

Source: AADE



**Question:** Got a bad taste in your mouth?

**Answer:** If you're diabetic, that might be a warning sign of serious gum disease.

# Diabetics can't afford to brush aside oral hygiene

**Your mother always warned you about sugar rotting your teeth. The statement doesn't just apply to candy and cavities. It's a whole new concern looking at blood sugar and periodontal disease.**

Diabetics are twice as likely to develop gum disease. Much of this may be due to diabetics' increased risk of general infection. Altered glucose rates slow healing time in gums, often resulting in more severe infections. If untreated, the infection can destroy connective tissue and eventually lead to tooth loss.

**Two-way cycle**

However, it doesn't stop there.

Diabetes and periodontal disease actually link in a vicious two-way cycle. As severe periodontal disease can increase blood sugar, the gum disease itself can then increase diabetes complications.

According to studies published in the Journal of Periodontology, a diabetic patient

with periodontal disease may be six times as likely to lose control of their blood sugar than those without. Those with gum disease were also shown four times more likely to suffer additional complications such as kidney or eye disease.

Diabetic patients should men-

tion their condition when discussing care with their dentists. While traditional oral hygiene steps are recommended, it is up to individual diabetic patients to remain vigilant about brushing and flossing.

In addition, diabetes requires a closer monitoring to look for early signs of gum disease such as swollen, red or bleeding gums, bad breath, or ill-fitting dentures. Additional preventive care such as using anti-bacterial toothpaste and regular oral exams keep periodontal health from becoming a major diabetic complication.

**DON'T MISS!****Diabetes and oral health tips**

- Brush your teeth at least twice daily with a soft-bristled toothbrush and anti-bacterial toothpaste.
- Floss daily.
- Monitor gums for bleeding, swelling or receding.

- Schedule regular dental check-ups.
- Inform your dentists of your diabetes and current medications.
- Don't smoke.
- Monitor your blood sugar. The better you manage your diabetes, the easier it is to control gum disease.

WENDY TAYLOR

WENDY TAYLOR

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## INSPIRATION

STEP

5

USE YOUR  
SUPPORT  
SYSTEM

**A FAMILY AFFAIR**  
Paul and Mira Sorvino.

# Working together as a family to manage diabetes

## Q&A

■ **Paul Sorvino**, Actor  
■ **Mira Sorvino**, Academy Award-winning actor

### What was the first thought to run through your mind when you were diagnosed with diabetes?

■ **Paul:** When I was first diagnosed with diabetes, I was in denial. I didn't know very much about it so I didn't think about the life changes I was going to have to make.

■ **Mira:** I was extremely concerned for him, but I really knew very little about diabetes. I realized I needed to educate myself and learn what it meant to live with diabetes so that I could help my dad in any way that I could.

### Were you aware that you were at risk?

■ **Paul:** My brother has diabetes

so I knew it was in my family, but I didn't think about how that could affect me. So, no, I wasn't aware that I was at risk for being diagnosed with diabetes.

### How did diabetes change your life in a positive way?

■ **Paul:** Since my diagnosis with Type 2 diabetes, I have started to make healthier decisions. I've always exercised, but now I make healthier food choices, like cooking my favorite Italian dishes with low-carbohydrate pastas. I put more focus on the things I put into my body and how they will affect my blood sugar levels. I also worked with my doctor to determine the right overall treatment plan for me, including insulin and oral diabetes medications, along with my healthy diet and exercise.

■ **Mira:** All my life, my dad has taught me so much and given to

us children his whole heart. After his diagnosis with Type 2 diabetes, I finally have a way to give back to him. I can help him pay attention to staying on track with a diabetes healthy diet, and I find new ways to be active together as a family, like skipping the dessert course and taking a long walk after dinner instead. We started doing it because of Dad's diabetes, but now we all look forward to the time we spend together outdoors. We are actually making beautiful family memories together; my kids love walking with Grandpa on the beach!

### How has diabetes affected your family and how have you overcome these obstacles?

■ **Paul:** I know I'm not alone, I know Mira and my family are here to help me. Having a support system is a huge part of living with

diabetes, which is actually why we came together to talk about this. We partnered with sanofi-aventis U.S. for Diabetes Co-Stars, which is a campaign designed to help educate people about diabetes and how to support loved ones living with the condition.

■ **Mira:** Actually I feel that working together as a family to manage Dad's diabetes has brought us even closer together! We've all adopted his diabetes-friendly lifestyle and we're teaching a healthier lifestyle to our kids, which can only be good for all of us. I want people out there to know that the Diabetes Co-Stars campaign is all about empowerment: you and your loved ones with diabetes can take proactive steps to manage blood sugar levels. If you face it together as a family, you build a healthier lifestyle and grow stronger (and older!) together. No one should have to face this alone,

and together, you can make positive strides so you are in control of your blood sugar levels, not the other way around.

### What do you want people to know about the overall impact of diabetes? What advice can you offer to those who have been diagnosed with the disease?

■ **Paul:** Every person is different so it is important to talk to your doctor. I worked closely with my doctor to find a treatment plan that worked the best for me. Now I take a once-daily insulin, along with a healthy diet, exercise plan and my other diabetes medications, and I have my blood sugar levels under control.

■ **Mira:** Get informed! Visit [www.diabetescostars.com](http://www.diabetescostars.com) to get more information, hear more about our story and find suggestions to help support people living with diabetes.



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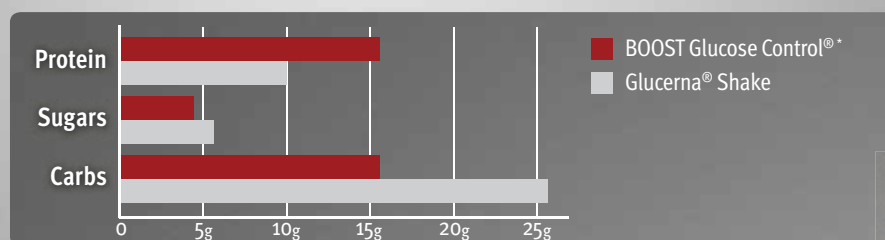
PANEL OF EXPERTS

	<p><b>Jan Lessem, MD, Ph.D</b> Vice President &amp; Chief Medical Officer , Advanced BioHealing, Inc.</p> 	<p><b>Bruce Daggy, Ph.D.,</b> Head of R&amp;D, Nutrisystem</p> 	<p><b>Andrew P. Mandell</b> Mr. Diabetes, co-founder and Executive Director, Defeat Diabetes Foundation</p> 
<p><b>Question 1:</b> What is the best advice you can offer someone recently diagnosed with diabetes?</p>	<p><b>For people with diabetes,</b> prolonged high blood sugar levels can lead to damaged nerves in your feet. This condition, called peripheral neuropathy, can cause you to lose sensation in your feet and may prevent you from noticing injuries.</p> <p>If you have diabetes, and you develop even a small sore, it can be a big problem. If left untreated, foot sores can turn into diabetic foot ulcers (DFUs), and may lead to serious complications, like amputation.</p> <p>Diabetics who do develop a sore should be treated by a physician immediately, and if the wound doesn't heal by 50 percent in the first four weeks with standard wound care, they should see a wound care specialist who focuses on treating DFUs and will have access to advanced technologies to help heal the wound.</p>	<p><b>Knowledge is power.</b> Learn what you can do to better manage your diabetes. Your resources include your doctor, your Certified Diabetes Educator (CDE), the American Diabetes Association's website and publications, and companies like Nutrisystem that offer support programs and tools. You are not alone in facing this challenge.</p>	<p><b>Diabetes is not a death sentence.</b> Knowledge and a good medical team are key to your long-term health. Your medical team should include an internal medicine specialist who will coordinate all your medical needs, an endocrinologist, a Certified Diabetes Educator, a nutritionist and a fitness advisor.</p>
<p><b>Question 2:</b> What is the most important aspect of diabetes management?</p>	<p><b>Arguably the most important</b> aspect of diabetes management is for patients to take a proactive role in managing their disease. Patients should follow the medical advice of their physicians which often includes following a diet and exercise plan, checking blood sugar regularly, taking medicines when appropriate, and offloading (staying off of a wounded foot), if a DFU develops.</p>	<p><b>Just as it would be harder</b> to operate a car without the use of the speedometer and fuel gauge, it's hard to manage diabetes without keeping an eye on your own gauges. Your doctor or CDE will explain the importance of measuring your blood sugar and A1c. If you need to lose weight, log your weight at least weekly. If you need to increase physical activity, use a pedometer or other tracking tool. Share your numbers with others—your doctor, a family member, or a buddy with diabetes. Tell them you want their help living to a ripe and active old age.</p>	<p><b>There are 1440 minutes in each day.</b> A diabetic patient spends 63 minutes, annually, with their doctor. Self-management and personal responsibility for daily living decisions are important components. Daily glucose testing and regular A1C checks are key. Daily routines should include eating five to nine servings of fruits and vegetables, three servings of whole grains, examining your feet, practicing great oral hygiene and getting physically active for 30 minutes.</p>
<p><b>Question 3:</b> A recent study has shown that by 2050, approximately a third of the world's population will suffer from diabetes. Is there anything we can do to stop this?</p>	<p><b>While the diabetes epidemic</b> is growing, and it may be difficult to stop the disease in its tracks, I do believe there is significant value in educating on the life-altering side effects of diabetes, and encouraging prevention measures, such as leading a healthier lifestyle by eating a low-fat diet and exercising regularly.</p>	<p><b>Absolutely!</b> About nine out of 10 people with Type 2 diabetes are overweight. Losing just a little excess weight—a 200 pound person losing 10 pounds, for example—is enough to reduce the risk of developing diabetes. If you currently get no regular physical activity, then a 30 minute walk after dinner most evenings is an important step—literally and figuratively—towards staying healthy. Making lasting lifestyle changes on your own can be difficult—don't be afraid to seek help.</p>	<p><b>Learn if you are at risk</b> by taking the two minute Defeat Diabetes Screening Test. Live your life as if you already have diabetes. To lower your risk by as much as 55 percent reduce/eliminate sugary beverages, processed and fast foods, and lose five percent of your weight, if overweight, and get 30 minutes of physical activity daily.</p>



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