It is the best thing you can do for yourself. It might be hard sometimes, but it is worth it! In no time at all, you will feel better and have more energy.

Get Started

- **Test your blood sugar.** Ask your doctor when to test and how often.
- Keep a record of your blood tests and medicines.

Most meters come with a log book. Review the log book with your doctor.

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- **Take your diabetes medicine** as your doctor told you to do.
- Eat "balanced meals" to control your blood sugar. Eat lean protein, whole grains, and fruit and "veggies" with each meal. Do not skip meals. Do not wait longer than four or five hours to eat. Try to eat meals at about the same time each day.
- Get moving! Start slowly, if you have not been active. Walking after meals is a great start. Do things you enjoy and will stick with.



 Check your feet each day for cuts, blisters, red spots, and swelling. Call your doctor right away about any sores that do not heal.



- If you smoke, quit! Talk to your doctor about ways to quit.
- Brush your teeth and gums after meals. Floss daily too.

Keep These Points in Mind

- Stay at a weight that is good for you. Ask your doctor how much you should weigh. If you are overweight, a loss of 10 or 15 pounds could improve your blood sugar.
- Treat low blood sugar right away. Use diabetes tablets or gel made of glucose. You can also use 4 to 5 lifesavers or 4 ounces of juice or soda (not diet).
- Learn more about diabetes and diabetes self-care. Ask your doctor about classes or programs that you can join.
- Ask for help from family and friends. Join a diabetes support group. Call your local hospital or ADA to find a support group.



Work with your Doctor

- Write down your questions. Take them with you to each visit.
- Ask your doctor for your blood sugar goals.
- Ask for an A1c test at least twice a year. Know your test result and what it means.
- Ask for your blood pressure to be checked at each visit. Ask your doctor about tests for cholesterol and other blood tests.
- Remove your shoes and socks at each visit. Ask your doctor to check your feet.
- Get your eyes and kidneys checked at least once a year.
- See your dentist at least twice a year. Tell your dentist you have diabetes.

Set Goals You Can Reach

- **Break a big goal into small steps.** Say you want to be more active. Start by taking one five-minute walk three times a week. Then try walking longer or more often.
- Make changes that you can stick with for the rest of your life. If you want to lose weight and keep it off, be active and limit portion sizes. Don't just go on a diet.

Create a Plan to Live Well With Diabetes

- Think about all of your reasons for wanting to control your blood sugar. Make a list and post it where you will see it often.
- Think about what can tempt you to slip up when it comes to controlling your blood sugar. Decide now how you will overcome it.
- **Reward yourself** for staying in control. Rent a movie, buy a plant, or spend time with a friend.
- Ask for help from friends and family when you're down or need someone to talk to.

Do Not Give Up!

- If you slip up, admit it. Learn what you can from it.
- Do not be too hard on yourself. A setback is not the end of the world.
- Let go and move on. Take it a day at a time.

For more information

Contact a Diabetes Educator (nurses, dietitians, pharmacists, and other health professionals) To find a diabetes teacher near you, call:

The American Association of Diabetes Educators toll-free at 1-800-TEAMUP4 (1-800-832-6874) or visit the website at www.aadenet.org and click on "Find an Educator."

All Material on this handout is for information only. This does not replace your doctor's advice Adapted from the National Diabetes Clearinghouse Website Publication



Do not worry. You do not need to eat "special foods." Eating with diabetes is healthy eating for all!

What are the simple rules for eating?

- Try to eat 3 meals at about the same time each day.
- Your body can better control your blood sugar if you eat at about the same time each day.
- Do not skip meals. Never go more than 4 to 6 hours without eating.

What do you eat?

- Eat protein, starch, and a "veggie" (vegetable) at each meal to help control blood sugar.
- Do not eat more than 1 to 2 servings of starch (such as bread, potatoes, or rice) at each meal. Starches change quickly into sugar. Eating too many starches at one meal can make your blood sugar number go too high. A serving of bread is one slice, a serving of potato is one small potato, and a serving of rice is 1/3 cup.
- Choose foods high in fiber. High fiber foods such as oatmeal, whole wheat bread and dark green "veggies" help control your blood sugar. Starches with fiber do not break down into sugar as quickly.
- Cut down on portion size if you are trying to lose weight.
- Most of the fluids you drink should be drinks without sugar. Water is a great choice.
- Eat foods from all the food groups.



What are some healthy choices from each of the food groups?

Starch: Whole grains, corn, potatoes, rice, beans, bread, tortillas
"Veggies": Fresh, frozen, or canned (rinse to lower the salt)
Fruit: Fresh, frozen or canned (without extra sugar added)
Milk: Nonfat or low-fat (1%) milk or yogurt
Protein: Lean meat, chicken, fish, eggs and low-fat cheese
Fats: Small amounts of oil, butter or salad dressing (Choose canola, peanut, or olive oil. Do not use margarine with trans-fats. Look for the words, "no

How much?

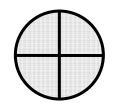
- Pretend your plate is cut into four equal parts.
 - Your protein choice should fit on one of the four parts.
 - Your starch choice should fit on one of the four parts.
 - Fill two parts of your plate with your "veggies."

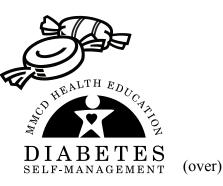
What about candy and desserts?

• It is best to eat dessert as part of your meal. When you eat a small serving of "sweets," eat fewer servings of starch at the meal.

trans-fats" on the food label.)

- Ask your diabetes teacher how to fit desserts into your meals. Any food you enjoy can fit into your meal plan.
- You can use NutraSweet[®], Equal[®] (aspartame), or Splenda[®] to sweeten your food or drinks rather than sugar.







Common Questions

Will I have to eat less?

Your doctor may have told you to lose weight. Losing weight if you are overweight can help improve your diabetes control. Sometimes a loss of only 10 to 15 pounds will help blood sugar. Do not eat fried foods. Eat small serving sizes. Just cutting back on the amount of food you eat can help you reach your weight goal.

What about fast foods?

You can eat fast foods. Plan ahead and think about what you are going to order. Get a broiled or grilled sandwich instead of a fried one. If you want to eat french fries, share a small order. Choose water, sugar free tea or diet soda for your drink.

Can I drink alcohol?

Ask your doctor if drinking is OK. Drinking alcohol may be dangerous with the medicines you take. Your blood sugar can go down, if you drink beer, wine or liquor on an empty stomach. Ask your doctor how to fit beer, wine, or liquor into your meal plan and if it is OK for you.

Do I have to measure everything I eat?

No. Here are some quick and easy tips to keep on track of portions without using a measuring cup. A serving of meat is about the size of a deck of cards or the palm of your hand. Look at the pictures below to see other portion sizes.





fist = 1 cup (Such as: two servings of pasta or oatmeal)

palm = 3 oz (Such as: a cooked serving of meat)



thumb tip = 1 teaspoon (Such as: a serving of mayonnaise or margarine)



handful = 1 oz snackfood (Such as: 1 oz nuts)



thumb = 1 oz (Such as: a piece of cheese)

Eating and taking care of your diabetes can be easy. Your whole family can help you. Plan ahead. Shop for healthy foods. Keep portion sizes in mind. Take a short walk after meals.

For more information

Contact a Diabetes Teacher (nurses, dietitians, pharmacists, and other health professionals) To find a diabetes teacher near you, call: The American Association of Diabetes Educators toll-free at 1-800-TEAMUP4 (1-800-832-6874) or visit the website at www.aadenet.org and click on "Find an Educator."

Control Diabetes: Know Your Blood Sugar Numbers

You must know your blood sugar numbers to control your diabetes. Testing is the only way to know whether your blood sugar is too high, too low, or just right.

There are two types of tests to measure your blood sugar.

- 1. The **A1c test** measures your blood sugar control over the **past 3 months.** It is the best way to know if your blood sugar is under good control.
- 2. A **blood sugar (glucose) test** measures your blood sugar **at the time you test**. You can do this test at home using a simple meter and test strips. This test is also done in your doctor's office.

You need both tests to get a complete picture of your blood sugar control. The A1c test is a simple lab test.

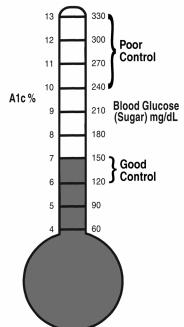
Your doctor takes a small sample of your blood and sends it to the lab. This test tells you and your doctor the amount of sugar in your blood over the past 2 to 3 months. Your A1c number is the best test to see if your blood sugar is close to normal or too high.

- The goal for most people with diabetes is less than 7%. (Look at the meter on the right to see what your A1c number tells you about your blood sugar number over time.)
- If your number is over 8%, your doctor will most likely change your treatment plan. We know that the higher your A1c is over time, the more likely you are to have problems related to diabetes.

The blood sugar (glucose) test.

This is a quick and simple test you can do at home. Blood sugar testing at home is a key part of good diabetes care. Ask your pharmacist or diabetes teacher to show you the proper way to test. Ask your doctor about when and how often to test. Common times to test are before meals, at bedtime, and two hours after eating.







Blood sugar goals for most people with diabetes

These goals are common for home tests.

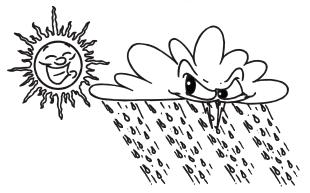
- Before Meals Between 80 and 120 mg/dl
- At Bedtime Between 100 and 140 mg/dl
- Two hours after meals No more than 30 to 50 "points" above your blood sugar number before you ate
- **Testing two hours after meals** is a good way to see how your food choices affect your blood sugar.
- Keep a record of your blood tests and medicines. Most meters come with a log book. Write down any changes made in your meals and how you were feeling. Bring your record with you to your doctor visits. Share it with your doctor.
- Treat low blood sugar right away. Use diabetes tablets or glucose gel. You can also use 4 to 5 lifesavers or 4 ounces of juice or soda (not diet). Write it down in your log book. Tell your doctor when this happens. Your medicine may need to be changed.

Do Not Give Up!

If you slip up, admit it. Learn what you can from it.

Do not be too hard on yourself. A setback is not the end of the world. Try again. Get help. Ask questions.

Let go and move on. Take it a day at a time.



For more information

Contact a Diabetes Teacher (nurses, dietitians, pharmacists, and other health professionals) To find a diabetes teacher near you, call:

I only have type 2 diabetes.

If you have type 2 diabetes, your pancreas makes insulin. But your body cannot use the insulin you make correctly. The medicine helps your insulin work better.

Here are some key points.

- Pills that lower blood sugar (glucose) never take the place of healthy eating and exercise.
- If your blood sugar gets too low more than a few times in a few days, call your doctor.
- Take your diabetes pills even if you are sick. If you cannot eat much, call your doctor.
- Just because your doctor changes or adds medicine does not mean it's your fault.

What do I need to know about diabetes pills?

Many types of pills can help people with type 2 diabetes lower their blood sugar (glucose). Each type of pill helps lower blood sugar in a different way. Check the chart on the back side of this fact sheet. Each row outlined boldly is a type of diabetes medicine. You may take more than one kind of pill. As each pill works in its own way, you may get better results using more than one type of pill. Always take your pill(s) as your doctor tells you to do. If you are not sure how to take the pill, ask your doctor. You can also ask your pharmacist.

Your doctor may start you out on one type of pill. If the pill does not lower your blood sugar enough, your doctor can increase the amount you take. Your doctor may also add a new pill. You may then take two types of pills.

At some point your doctor might ask you to take insulin with one of the diabetes pills. Medicines are changed to get your blood sugar numbers as close to normal as possible. This prevents damage to your body from diabetes. Your doctor will work with you to get the best treatment plan to keep you living well with diabetes. Always tell your doctor about any side effects.





What are side effects?

Side effects are changes that may happen in your body when you take a new pill. Ask your doctor what to expect when you are given new pills. Ask what the side effects might be.

Some side effects happen only when you start to take new pills. Then they go away.

Some side effects happen only once in a while. You may get used to them or learn how to manage them.

Some side effects are more severe. Tell your doctor but do not stop taking the medicine until your doctor tells you to stop. Your doctor may try another medicine.

Brand name*	Generic Name**	How It Works	How You Take It
Amaryl Diabeta Glucotrol Micronase	Glimepiride Glyburide Glipizide Tolazamide	Helps your pancreas make more insulin.	Take 30 minutes before your meal.
Glucophage	Metformin	Helps your liver put out less glycogen (stored sugar).	Take just before you begin to eat your meal.
Precose	Acarbose	Slows down the time it takes for your body to break down food into sugar.	Take with the first bites of food.
Prandin	Repaglinide	Helps your pancreas make more insulin.	Take with meals
Humulin R	Regular human insulin	Gives your body insulin	Depends upon the type. Regular insulin is injected 30 minutes before your meal.

* There are other names for this type of medicine.

** Many types of insulin are now available.

For more information

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If you have type 1 diabetes, your pancreas cannot make any insulin. You must take insulin to live. If you have type 2 diabetes and need insulin it is because all the other medicines are not working to keep your blood sugar where it needs to be to prevent problems. Keep in mind, insulin does not cause the problems. **High blood sugar** causes the damage to organs and your body.

What do I need to know about insulin?

You take insulin as a shot. You inject the insulin just under the skin with a small, short needle.

Can insulin be taken as a pill?

No. Insulin is a protein. If you took insulin as a pill, your body would break it down and digest it before it got into your blood to lower your blood glucose.

How does insulin work?

Insulin lowers blood sugar levels by moving sugar (glucose) from the blood into the cells of your body. Once inside the cells, glucose provides energy. Insulin lowers your blood glucose whether you eat or not. This is why you must eat on time if you take insulin.

How often should I take insulin?

Most people with diabetes need at least two insulin shots a day. Some people take three or four shots a day. Your doctor works with you to get good glucose control.

When should I take insulin?

Take insulin 30 minutes before a meal if taking regular or long-acting insulin. If you take a fast-acting insulin, you should take your shot just before you eat.

How many types of insulin are there?

There are six main types of insulin. Each one works at it's own speed - fast, medium, or slow. Many people take two types of insulin.

Does insulin work the same all the time?

After a short time, you will get to know when your insulin starts to work, when it works its hardest to lower blood glucose, and when it finishes working. You will learn to match your mealtimes and exercise times to the time when each insulin dose you take works in your body.





How quickly or slowly insulin works in your body depends on many things.

- Your own body.
- The place on your body where you inject insulin.
- The type and amount of exercise you do.
- The length of time between your shot and exercise.

Where on my body should I inject insulin?

You can inject insulin into many places on your body. Inject near the stomach and it works fastest. Inject into the thigh and it works slowest. Inject into the arm and it works at medium speed. Ask your doctor or diabetes teacher to show you the right way to take insulin and in which parts of the body to inject it.

How should I store insulin?

It depends upon how much you use.

If you use a whole bottle of insulin in 30 days...

- Keep the bottle you are using at room temperature.
- Once open, write the date 30 days away on your bottle. Do this every time you open a bottle. For example, if today's date were 11/14/03 then you would write 12/14/03 on the bottle.
- Throw away the bottle after the 30 days have passed.

If you use <u>less</u> than a whole bottle of insulin in 30 days...

- Keep the bottle in the refrigerator <u>all the time</u>.
- Do **not** keep the bottle in very cold places like the freezer.
- Do **not** keep the bottle in hot places such as the trunk of the car or by a window.

Heat and extreme cold breaks down insulin and it will not work. It is helpful to keep extra bottles of insulin in your house. Make sure to store all extra bottles in the refrigerator.

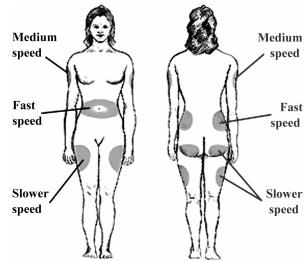
What are some side effects of insulin?

The most common side effects are weight gain and having low blood sugar (glucose). You need insulin to keep your blood sugar in good control. Your doctor will work with you to get the best treatment plan to keep you living well with diabetes.

For more information

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or visit the website at www.aadenet.org and click on "Find an Educator."



Taking Charge of Your Diabetes Will Take Time

"Listen" to your feelings.

Denial is common when dealing with diabetes. You have heard it a million times, "Diabetes care is up to you." This is easy to say but hard to do. Staying on track 24 hours a day, seven days a week can tire anyone out. If you find you are in a slump, you might want to check to see if your feelings are getting in the way.

Denial

Denial is that voice inside that keeps saying, "Not me." Most people go through denial when they are first told they have diabetes. "I don't believe it. It must be a mistake," they say. Saying this to yourself is normal. The trouble comes when you keep trying to deny your diabetes. Long-term denial stops you from learning what you need to know to keep yourself healthy.

How to Spot Denial

Denial has a few catch phrases.

- One bite won't hurt.
- This sore will heal by itself.
- I'll go to the doctor later.



- I don't have time to do it.
- My diabetes isn't that bad. I only have to take a pill, not shots.

If you hear yourself thinking or saying them, you are not taking care of some part of your diabetes.

The Dangers of Denial

Denial is bad because it can creep into any part of diabetes self-care. Any denial robs your health care. Not testing. It can be a bother to check your blood sugar each day or more. You may decide you "know" what your blood sugar is by how you feel. But a meter is much better at telling you your blood sugar than feelings are.



Not sticking with your meal plan. Changing eating habits and food choices is tough. You may have told yourself:

- I can't ask my family to change what they eat. I don't want to eat alone or fix two meals.
- There's no place to buy healthy food where I work.
- Eating right may not be as hard as you think. A dietitian or diabetes teacher can help you.

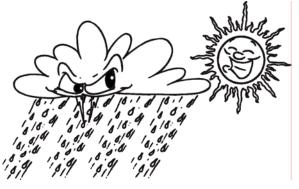
Not taking care of your feet. You know you should check your feet each day, but it takes too much time, or you forget. Washing and checking your feet for signs of trouble daily is needed to avoid injury. This is true no matter what type of diabetes you have.

Smoking. You might tell yourself, "I only take a few puffs." You may say smoking keeps you from eating too much. Smoking and diabetes are a deadly duo. People with diabetes who smoke are more likely to get diabetes problems than people with diabetes who do not smoke. Quitting is one of the best things you can do for your health.

What Can You Do About Denial

Denial is human. It is bound to crop up from time to time. See it and fight back. Write down your diabetes care plan and your health care goals. Know why each item in your plan is needed.

Know your reasons for wanting to control your blood sugar. Accept that it will take time to reach your goals. Tell your friends and family how they can help. Let them know that tempting you to go off your plan is not a kindness. Tell them about how you take care of your diabetes. They might want to adopt some of your healthy habits.



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Taking Charge of Your Diabetes Will Take Time

"Listen" to your feelings.

Depression is common when dealing with diabetes. You have heard it a million times, "Diabetes care is up to you." This is easy to say but hard to do. Staying on track 24 hours a day, seven days a week can tire anyone out. If you find you are in a slump, you might want to check to see if your feelings are getting in the way.

Depression

Feeling down once in a while is normal. But some people feel a sadness that just will not go away. Life seems hopeless. Feeling this way most of the day for at least two weeks can be a sign of depression. Not everyone with diabetes is depressed. But studies show that people with diabetes are more likely to have depression, than people without diabetes.

The stress of living with diabetes can build. You may feel alone or unlike others. You may feel like you are losing control of your diabetes, if you are having trouble keeping your blood sugar levels where they need to be. You may feel tension between you and your doctor.

Depression can get you into a bad cycle. It can block good diabetes self-care. If you are depressed and have no energy, you may find such tasks as blood sugar testing too much to handle. If you feel so anxious that you cannot think straight, it will be hard to keep up with a good diet. You may not feel like eating at all. Of course, this will affect your blood sugar levels.

What You Can Do

Seeing the depression is the first step. Getting help is the second. If you have been feeling really sad, blue, or down in the dumps, check for these common signs.

- Loss of pleasure. You no longer want to do the things you used to enjoy.
- **Change in sleep patterns.** You have trouble falling asleep. You wake often during the night. You want to sleep more than normal, even during the day.
- Early to rise. You wake up before you used to and cannot get back to sleep.







- Change in feeling hungry. You eat more or less than you used to. This results in a quick weight gain or weight loss.
- **Trouble focusing.** You cannot watch a TV program or read an article because other thoughts or feelings get in the way.
- Loss of energy. You feel tired all the time.
- Nervousness. You always feel so anxious you cannot sit still.
- **Guilt.** You feel you "never do anything right." You worry that you are a burden to others.
- **Morning sadness.** You feel worse in the morning than you do the rest of the day.



• Suicidal thoughts. You feel you want to die or are thinking about ways to hurt yourself.

Do you have three or more of these signs? Do you have just one or two but have been feeling bad for two weeks or more? If your answer is "yes" to either question, it is time to get help.

Getting Help

Do not keep these feelings to yourself. Talk them over with your doctor. There are many causes for depression. If you are on medication do not stop taking it without telling your doctor. Your doctor may ask you to see someone else. Many types of healthcare workers are trained to help in this area. There are two types of treatment. One is counseling (talking). The other is antidepressant medicine.

- 1. **Talking** with a well-trained therapist can help you look at the problems that bring on depression. It can also help you find ways to help the problem. You may see someone for a few weeks or for many months. You want to feel at ease with the therapist you choose.
- 2. Medicine may be prescribed that can help. Ask your doctor about side effects. Ask your doctor how long it will take to feel a change. Make sure you know how it might affect your blood sugar.

Many people do well with a medicine **and** counseling. Check with your health plan to see what services are covered.

If you have symptoms of depression, do not wait too long to get help. Your local American Diabetes Association may also be a good resource for counselors who have worked with people with diabetes.

For more information

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Increase High blood sugar from diabetes causes two problems with your feet.

- 1. High sugar in your blood can damage nerves in your legs and feet.
- 2. High sugar in your blood can also slow down the flow of blood to your legs and feet. A sore or infection may take longer to heal. If you smoke and have diabetes this makes blood flow problems much worse.

You may have heard about someone who has had an amputation. If you take care of your feet every day this does not have to happen.

What can you do to take care of your feet?

Tell your doctor right away about **any** foot problems. Do not let small problems become big problems.



Wash your feet in warm water every day. Do not use hot water. Do not soak your feet. Dry your feet well, even between your toes.



Look at your feet every day. Check for sores, blisters, redness, calluses, or other problems. Use a mirror if you cannot check your feet by lifting them up. You can also ask someone else to check your feet.



If your skin is dry, rub lotion on your feet after you wash and dry them. Do not put lotion between your toes.



- File corns and calluses gently. Use an emery board or pumice stone. Do this after your bath or shower. Move the emery board in only one direction.
 - Cut your toenails once a week. Cut toenails after a bath or shower when they are soft. Cut them in the shape of the toe and not too short. Do not cut into the corners because you might cut the skin. If you cannot cut your own toenails, ask a friend or family member.





- Never walk barefoot. Always wear shoes or slippers, even when you are at home.
- Always wear socks or panty hose. Do not wear socks or stockings that are too tight below your knee.



Wear shoes that fit well. Buy shoes made of canvas or leather. Shop for shoes at the end of the day when your feet are bigger. Break in shoes slowly. Wear them 1 to 2 hours each day for the first 1 to 2 weeks. When buying new shoes, take a piece of paper and draw the outline of your foot. Place your shoe on top of the outline. If you can see the outline of your foot, your shoes are too small.

What can you do at your doctor visits?

- Take off your shoes and socks at every visit.
- Ask your doctor to look at your feet.
- Ask your doctor to check the feeling in your feet. It is a very simple test.



For more information

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Control Diabetes: Low Blood Glucose (sugar)

What is low blood glucose?

In most people with diabetes, a blood glucose number lower than 70 mg/dL is too low.

What causes low blood glucose?

If you take insulin or **diabetes pills**, you can have **low blood glucose**. (This is called **hypoglycemia.**) Low blood glucose can be caused by:

- eating less or later than normal.
- being more active than normal.
- taking too much diabetes medicine.
- drinking beer, wine, or liquor.

Low blood glucose happens more often when you're trying to keep your glucose level near normal. Talk this over with your doctor and diabetes teacher.

This is not a reason to stop trying to control your diabetes. It just means you have to be careful and watch for low levels.

What are signs of low blood glucose?

You may have low blood glucose if you feel ...

- nervous
- shaky
- sweaty
- dizzy



The signs of low blood glucose may

be mild at first. If not treated, a low glucose level can quickly drop much lower. When your glucose level is very low, you may get confused, pass out, or have seizures. You should test your blood glucose if you can. If it is low, treat a low blood glucose level.

If you have signs that your blood glucose is low and you cannot test go ahead and treat it. Treat every 15 minutes until your glucose level is at least 70 mg/dl.

How do you treat low blood glucose?

Eat 10 to 15 grams of carbohydrate (carbs) right away. This could be:

- 3 to 4 glucose tablets (You can get these at a drug store. These are good to carry with you. You would eat them if needed.)
- 2 to 3 packets of sugar
- 1/2 cup (4 oz.) fruit juice
- 1/2 cup (4 oz.) soda pop (not diet soda)
- 3 to 5 pieces hard candy
- 3 teaspoons sugar or honey





- 1. Check your blood glucose in 15 minutes.
- 2. Eat another 10 to 15 grams of carbs every 15 minutes until your blood glucose is above 70 mg/dL.
- 3. Ask yourself, is your next planned meal or snack more than 30 minutes away? If yes, eat something like crackers and a spoonful of peanut butter or a slice of cheese.
- 4. Write down the numbers in your testing log book. Note the date and time. Think about what may be the cause of your low blood glucose. Write the reason beside the number.
- 5. Call your doctor. Ask if you need to change your diet, activity, or diabetes medicine.

Tell family members, close friends, teachers, and people at work that you have diabetes. Tell them how to treat low blood glucose. If you use insulin, ask your doctor about getting glucagon.

How do you prevent low blood glucose?

Stay close to your normal schedule of eating, activity, and medicine. You may need to eat a snack if you are late getting a meal. You may also need a snack if you are more active than normal.

Be safe and always check your glucose before you:

- Drive a car, truck, or SUV.
- **Use heavy equipment.**



- **Exercise very hard.**
- **Exercise for more than 30 minutes.** (The best time to exercise is one to two hours after a meal.)

How do you stay prepared?

- Always carry some type of fast acting "carb" with you. You can then treat a low glucose level if you have to.
- Always wear something that says you have diabetes. This might be a bracelet or necklace. Carry a card in your wallet that says you have diabetes. This is really important if you take medicine for your diabetes.

For more information

Contact a Diabetes Teacher (nurses, dietitians, pharmacists, and other health professionals) To find a diabetes teacher near you, call:





Taking Charge of Your Diabetes Will Take Time

"Listen" to your feelings.

Anger is common when dealing with diabetes. You have heard it a million times, "Diabetes care is up to you." This is easy to say but hard to do. Staying on track 24 hours a day, seven days a week can tire anyone out. If you find you are in a slump, you might want to check to see if your feelings are getting in the way.

Anger

Anger can start when you are told that you have diabetes. You ask the question, "Why me?" You may dwell on how unfair diabetes is. "I'm so angry at this disease! I don't want to treat it. I don't want to control it. I hate it!" This type of anger causes more harm than good. Learn to use your anger instead. You can even put it to work for better diabetes care.

Anger and Self-Care

Anger worked against Mary, a woman in her thirties who was told she had diabetes six months ago. She was so mad! She saw diabetes not just as a threat to her health, but to her whole way of life. "*I have three little kids to take care of*! *I do not have time to fix special food now for me*!" Mary even felt that her husband saw her as a "sick person" and that she was "less of a woman".

Breaking Out of the Anger Circle

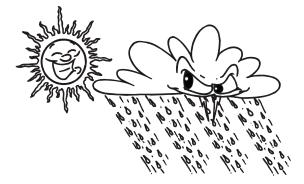
Mary was stuck in an anger circle. She was angry at diabetes for changing her life.

She refused to face her health care needs. She refused to change her life. As the disease went on poorly controlled, Mary felt worse and her anger at diabetes grew.

You do not have to stay stuck if you find yourself in an anger circle, like Mary. One way to break the circle comes from Dr. Weisinger's book *Anger Work-Out*. He says you do three things:

1. Find out what is making you angry. How is anger changing your life? Keep track of when you feel angry. Each night, think back over the day. When were you angry? What time was it? Who were you angry at? What did you do about it? After a few weeks, read over your notes. See any patterns?

When Mary read her anger notes, she learned that she did not like talking about her diabetes in public. She felt angry if friends asked her what she could eat or if they made special food. When she and her husband tried to go out with friends, she felt her diabetes was what all our friends were thinking about.





- 2. Change the thoughts and actions that fuel your anger. Look for warning signs that your anger is building. Do you feel tense? Are you talking louder and faster? Take charge of your anger by the doing the following:
 - Talk slowly.
 - Slow your breathing.
 - Get a drink of water.
 - Sit down.
 - Be quiet. Silence can be best when anger is building.
- **3.** Find ways to make your anger work for you. Your anger notes can help. Read your notes again and look at each time you got angry. Ask yourself, "How was my anger helping me cope?"

Mary found out her anger was helping her avoid talking about her diabetes with others. Mary's anger told her that she still had not accepted having diabetes. To get more support, she joined her local American Diabetes Association. Meeting other people with diabetes helped her feel less alone. She also learned that having diabetes did not make her less of a woman. Slowly, she was able to enjoy her friends again. She was able to talk about her disease with others. She was also able to tell her friends that she did not want special treatment.

Let Anger Be Your Ally

The goal is not to get anger out of your life. When you feel afraid or frustrated, anger is a normal response. But you can put your anger to work for you. Your anger may be a sign that you need to take action. Talking with someone can help. Anger can be a force for action, change, and growth. The better you understand your anger, the better you will be able to use it for good self-care.



For more information

Contact a Diabetes Educator (nurses, dietitians, pharmacists, and other health professionals) To find a diabetes teacher near you, call:

The American Association of Diabetes Educators toll-free at 1-800-TEAMUP4 (1-800-832-6874) or visit the website at www.aadenet.org and click on "Find an Educator."

All Material on this handout is for information only. This does not replace your doctor's advice

Control Diabetes: My Action Plan to Control My Blood Sugar

I will ask my doctor

\checkmark	What is my A1c goal?
\checkmark	What is my blood sugar goal before meals (testing at home)?
\checkmark	What is my blood sugar goal at bedtime (testing at home)?

I will work on the following three goals over the next two weeks to control my blood sugar.

I	•
2	

3.

Note: Pick things that you really want to do. For example, I will eat vegetables in my daily meals.

Here are 3 people who can help me do these things (e.g., friend, co-worker, doctor).

1.	
2.	
3.	
_	

My main reasons to keep my blood sugar in a good range.

1	ECC	S
2.		J
3.		
		-



I will review this plan in two weeks. First review date:

I know that my goals will change over time. I will write out a new plan at least every three months. I will place my action plan where I will see it often. *I can do this!*

Signature:

Date:



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What happens to your body when you are stressed?

Your body gets ready for action. Stress hormones go into your blood. These hormones make your liver put out stored sugar and fat needed for extra energy. These changes happen to help you face stress or to run away. Your body cannot use the extra energy, without insulin. You may not have enough insulin or it may not work well when you have diabetes. This means that your blood sugar will rise with stress.

Your blood sugar will also go up if you get sick or hurt. Injury or illness is stress to the body. Many of us have other types of stress too. We have too many problems to deal with all at once. We have money problems or family problems. Your blood sugar may go up or down with this type of stress. Testing your blood sugar and rating your stress level will help you to know how your body reacts.

You can choose how you wish to deal with stress. You can handle it in a way that makes you feel in control. Or you can handle it in a way that makes you feel worse. Some people turn to ways that are harmful, such as drinking liquor, using lots of caffeine, smoking, or eating the

wrong kinds of food. None of these will take the stress away. Doing these things can be bad for you.

Deal with stress in a safe way

Take deep breaths. Sit or lie down. Close your eyes. Breathe in slowly and deeply through your nose. Breathe out slowly through your mouth. Relax your muscles. Do this for at least 5 minutes.

Tense and let go of muscles in your body.

Lie down. Close your eyes. Think about one part of your body. Tense the muscle, hold, and then release that muscle. Go to the next part of your body. Start at your head and work your way down to your feet.

Loosen up and have fun. Do the "hokeypokey." You can even do this alone. Picture



the circle being in front of you. "You put your right hand in. You put your right hand out. You put your right hand in and you shake it all about. You do the hokey-pokey and you turn yourself around, that is what it's all about!"



Be active. Go for a long walk. Dance in your living room. Jump rope. Do anything that makes you move. Do it often. Exercise is one of the best ways to deal with stress.

Talk to a friend. Sharing with someone else can be helpful. Try going to a diabetes support group. Reach out to others.



Say "NO." Many of us take on way too much. It is OK to say no. You may want to do something but if you are already stretched it causes stress. It is hard to help others when we are too tired ourselves.

Laugh. Try to laugh hard at least once a day. Seek out funny movies. Share funny comics or stories. Try to look at the funny side of life.

Eat healthy foods. You use up more B & C vitamins, protein, and calcium under stress. Eat more whole grains, nuts, seeds, and beans. Eat oranges, grapefruits, and dark green "veggies." Have lean chicken, fish or egg whites as part of your meal. Drink fat free milk or eat low-fat yogurt.

For more information

Contact a Diabetes Teacher (nurses, dietitians, pharmacists, and other health professionals) To find a diabetes teacher near you, call: