

Diabetes University

C O U R I E R

UPDATED GUIDELINES FOR

Diabetes Management

We learn more about diabetes every year, which leads to changes in the recommendations on diagnosing, treating and managing diabetes. Due to the results of recent research, the American Diabetes Association has made some important changes in the 2010 guidelines.

Hemoglobin A1c has traditionally been used to measure glucose control over a two to three month period in order to assess a patient's long-term glucose control. It will continue to be used for this purpose in patients who are already diagnosed with diabetes. Additionally, it will now also be used as a way to diagnose diabetes with a cut point of 6.5% or above.

In the past, the American Diabetes Association and American Heart Association have recommended low-dose aspirin therapy as primary prevention in diabetic patients who were 40 years of age or older with additional risk factors. Aspirin is known to be beneficial for patients who have already experienced a heart attack or stroke. Whether or not it has a significant benefit in those who have never experienced a cardiovascular event is debatable. Recent studies of aspirin use in diabetic patients did not show a significant decrease in cardiovascular events. Therefore, there is not enough evidence to continue to recommend aspirin for low risk individuals who have never experienced a heart attack or stroke. Aspirin is now recommended as prevention of cardiovascular disease only in diabetic patients who have high cardiovascular risk. This includes men 50 years of age or older and women 60 years of age or older who also have at least one additional major risk factor including: family history of cardiovascular disease, high blood pressure, smoking, high cholesterol, or albuminuria.

Be sure to talk with your health care provider regarding your specific situation. Your health care provider will take your individual risk factors into consideration to determine whether or not you should take a low-dose aspirin daily for prevention of cardiovascular disease.

Frequently Asked QUESTIONS

From Our Patients

1 How does Diabetes affect my Cardiovascular health?

- Cardiovascular disease is the leading cause of early death among people with diabetes.
- Adults with diabetes are two to four times more likely than people without diabetes to have heart disease or experience a stroke.

2 What should I do when I am sick?

- Continue taking your pills and insulin.
- Test your blood glucose every 4 hours and check your temperature daily.
- Drink plenty of fluids and eat normally. If you cannot eat, try to have soft foods or liquids that contain the same amount of carbs you usually eat.

3 Why is it so important that I take care of my feet with diabetes?

- Nerve damage, circulation problems, and infections can cause serious foot problems for people with diabetes. Pressure points may turn into blisters, sores, or ulcers. Poor circulation can make these injuries slow to heal. Injuries that go unnoticed and untreated can lead to ulcers and possibly even amputation.

UPCOMING EVENTS

Cornerstone Diabetes University

Clinical Pharmacy Services offers a 4 week education seminar on living with diabetes. The class meets on Tuesdays for 2 hours.

Call 336 802-2588 to enroll.

- June 22, 2010 (evening classes)
- August 3, 2010 (morning classes)

FREE Diabetes Support Group

- Meets from 5:45 pm to 7:00 pm on the second Monday of each month
- Moses Cone Nutrition and Diabetes Management Center
- For more information, call 336 832-3236

Don't forget about your Mouth!

Dental problems can happen to anyone. People with diabetes are more likely to have problems with their teeth and gums due to high blood glucose. Diabetic patients are at increased risk for developing gum disease. Gum disease can cause pain while chewing and eventually may lead to tooth loss. Gingivitis and periodontitis are examples of common gum diseases. Sore, swollen gums that bleed when you brush your teeth are signs that you may have gingivitis, which is the first sign of gum disease. Periodontitis occurs when your gums get smaller or pull away from your teeth. All of these problems may increase your risk for developing a dental infection. Like all infections, dental infections will likely cause your blood glucose to increase.

Tooth and gum problems occur more often in diabetic patients that consistently have high blood glucose. Smoking also significantly increases the risk for developing gum disease, particularly in diabetic patients who are 45 years of age or older. People with diabetes are also at higher risk for developing fungal infections in the mouth, slower healing following oral surgery, and dry mouth.

Good control of your blood glucose is the best way to prevent developing gum disease. To keep your teeth and gums healthy, brush your teeth after each meal and snack using a soft toothbrush. Additionally, use dental floss once daily to prevent the buildup of plaque. Get your teeth and gums checked by your dentist twice a year. Always be sure your dentist knows you have diabetes. Also, be sure to call your dentist immediately if you have any problems with your teeth or gums. If you smoke, talk with your doctor about ways to help you quit smoking.

NEED HELP

Paying For Your Diabetes Medications?

There are Prescription Assistance Programs available to help low-income or uninsured patients get medications they cannot afford. The Partnership for Prescription Assistance brings together America's pharmaceutical companies, health care providers, patient advocacy organizations, and community groups to help qualifying patients without prescription drug coverage get medications at no cost or at discounted prices. There are many different programs and some require an extensive application process. Patients must meet specific qualifications in order to qualify. Talk with your health care provider to see if you qualify.

What's Cooking

BAKED APPLE PANCAKES

- 1/2 cup ground flax
- 1/4 cup plain Kefir
- 1 cup fat-free milk
- 3/4 cup whole wheat flour
- 2 egg whites
- 1 whole egg
- 1/2 tsp baking powder
- 1 tsp baking soda
- 2 tbsp sugar
- 2 tbsp Splenda, *optional*
- 1 tbsp Olive Oil
- 2 tsp pure vanilla extract
- 1/2 tsp cinnamon

APPLE TOPPING

- 1 large tart apple, peeled, cored, and thinly sliced
- 2 tsp lemon juice
- 1/4 tsp cinnamon
- 2 tbsp Splenda brown sugar

Preheat oven to 350°F. Spray a 10-inch skillet with nonstick spray. Beat egg whites until frothy. Gradually add sugar. Mix other pancake ingredients in bowl then fold into egg whites. Pour into prepared skillet. Bake 20-25 minutes or until puffed and browned. Meanwhile, spray a small skillet with nonstick spray. Add the apples slices, Splenda brown sugar, lemon juice, and cinnamon. Sauté over low heat until the apples are soft and slightly caramelized, about 10 minutes. Spoon over the pancake. Cut pancake into 6 servings and serve immediately.

Serving Size: 1/6 pancake + 1/6 apple mixture
(2 carb choices)

Calories 177, Total Fat 5g, Total Carbs 24g

Diabetes

R E S O U R C E S

Diabetes Well-Being

<http://www.diabeteswellbeing.com>

- *Diabetes topics, publications, natural or alternative treatments, diet reviews*

Behavioral Diabetes Institute

<http://behavioraldiabetesinstitute.org>

- *The world's first organization dedicated to tackling the unmet psychological needs of people with diabetes*
- *Offers workshops, lectures and other programs to help with emotional obstacles*