

November

Monday

Tuesday

Wednesday

1	2	3
8	9	10
15	16	17
22	23	24
29	30	

October

M	T	W	T	F	S	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

December

M	T	W	T	F	S	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

Thursday

Friday

Saturday

Sunday

	4		5	6	7
11			12	13	14
Veterans Day					
	18		19	20	21
25			26	27	28
Thanksgiving Day					

November

Health Activities and Observances

NOTES _____

American Diabetes Month
National Alzheimer's Awareness Month
National Epilepsy Month
National Marrow Awareness Month
Diabetic Eye Disease Month
National Adoption Month
GERD Awareness Week (23-29)
(gastroesophageal reflux disease)
Great American Smokeout (18)



*Never go to a doctor
whose office plants
have died.*

-Erma Bombeck

November

M	T	W	T	F	S	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

Mon	1	_____	Mon	8	_____
Tue	2	_____	Tue	9	_____
Wed	3	_____	Wed	10	_____
Thu	4	_____	Thu	11	_____
Fri	5	_____	Fri	12	_____
Sat	6	_____	Sat	13	_____
Sun	7	_____	Sun	14	_____

M	T	W	T	F	S	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

November

Mon 15 _____ Mon 22 _____

Tue 16 _____ Tue 23 _____

Wed 17 _____ Wed 24 _____

Thu 18 _____ Thu 25 _____

Fri 19 _____ Fri 26 _____

Sat 20 _____ Sat 27 _____

Sun 21 _____ Sun 28 _____



Wellness starts with... Diabetes



Prevention and Control

Do you have a family member or friend with diabetes? Have you ever talked with her about how diabetes affects her life, especially as a woman? Your friend or family member is one of more than nine million women in the United States who have diabetes, and about one third of them don't know they have it!

Most of the food we eat is turned into glucose (sugar) for our bodies to use for energy. The pancreas makes insulin, which helps sugar get into the cells. When you have diabetes, your body either doesn't make enough insulin or can't use the insulin it does make. This causes sugar to build up in your blood. Over the years, high blood sugar leads to problems like heart disease, stroke, blindness, kidney disease, nerve problems, gum infections, and amputations. Women with diabetes face other special concerns too, like an increased risk of vaginal infections and problems during pregnancy.



Also, millions of women have pre-diabetes, a condition in which blood sugar levels are higher than normal but not high enough for a diagnosis of diabetes. If you have pre-diabetes, you are more likely to develop type 2 diabetes within 10 years. You're also more at risk for a heart attack or stroke.

Signs of Diabetes

- feeling tired
- frequent urination (especially at night)
- being very thirsty
- weight loss
- blurry eyesight
- recurring skin, gum, or bladder infections
- sores that heal slowly
- dry, itchy skin
- loss of feeling or tingling in your feet

Type 1 and Type 2 Diabetes

There are different kinds of diabetes:

- **Type 1 diabetes.** Type 1 diabetes is usually first diagnosed in children, teenagers, or young adults. In this form of diabetes, the immune system (the body's way to fight infection) attacks the cells that make insulin in the pancreas and destroys them. The pancreas then makes little or no insulin, and cells can't take sugar from your blood. If not diagnosed

and treated with insulin, a person can lapse into a life-threatening coma. Someone with type 1 diabetes takes insulin shots or uses an insulin pump. She also needs to make wise food choices, exercise regularly, and control blood sugar, blood pressure, and cholesterol. We don't know yet how to prevent type 1 diabetes, but you can benefit by keeping your blood sugar under control.

- **Type 2 diabetes.** Type 2 diabetes is the most common form of diabetes. People can develop it at any age—even during childhood. Type 2 diabetes begins when your body can't use insulin right (insulin resistance). There is too much sugar in your blood. At first, the pancreas keeps up with the added demand by making more insulin. In time though, it can't make enough insulin. Treatment for type 2 diabetes includes taking diabetes pills, making wise food choices, exercising regularly, and controlling blood sugar, blood pressure, and cholesterol. **The good news is we now know that if you have pre-diabetes, you can reduce your risk of getting type 2 diabetes. If you have diabetes, you can prevent or delay complications.**

You Can Delay or Prevent Type 2 Diabetes

When you take steps to prevent diabetes, you also lower your risk for heart disease, stroke, kidney disease, blindness, and amputation. Small changes in your lifestyle can make a difference. They include getting 30 minutes of physical activity five days a week and losing 5 to 7 percent of your body weight. You don't have to run marathons or stop eating! *See chapter 1 for suggestions on adding physical activity into your life.*

To help you lose weight, choose low-fat foods and foods high in fiber. Cut down on fat and cholesterol by having low-fat dairy products, lean cuts of



meat, fish, poultry, fruits, and vegetables. Also, limit foods high in salt and sugar. *For more information on having a healthy diet, see page 116.*

The Diabetes Prevention Program, a research study, found that diet and exercise lowered the chances that a person with impaired glucose tolerance, a pre-diabetic condition, would develop diabetes. These strategies worked for both men and women and for people of all ethnic groups who were in the study. Lifestyle changes worked really well for people age 60 and older. In the study, treatment with the drug metformin also reduced risk, mostly in people 25 to 44 years old and in those who were at least 60 pounds overweight.

Know Your Risks That Can Lead to Type 2 Diabetes

It's important to find out early if you have type 2 diabetes or if you are at risk of developing it. To find out if you're at risk, check off each item that applies to you.

- I am overweight or obese. See *chapter 1 to figure out your body mass index.*
- I have a parent, brother, or sister with diabetes.
- My family background is African American, American Indian, Asian American, Latina, or Pacific Islander.
- I had gestational diabetes (diabetes developed during pregnancy) or gave birth to at least one baby weighing more than nine pounds.
- My blood pressure is 140/90 or higher, or I have been told I have high blood pressure.
- My cholesterol is not normal. My HDL or "good" cholesterol is less than 50 or my triglycerides are 250 or higher.
- I am not very active. I exercise less than three times each week.

Talk to your health care provider about the risks that you checked off. If you are age 45 or older, talk to your health care provider about getting tested for type 2 diabetes. If your test result is normal, you should then be tested every three years. People younger than age 45 who are overweight or obese and checked off any of the items above should also talk to their health care provider about getting tested for diabetes.

Steps to Controlling Diabetes: Know Your ABCs

Women with diabetes are more likely to have a heart attack, at a younger age, than women without the disease. Prevent both heart attack and stroke by controlling the ABCs of diabetes:

A1C. The A1C test (or hemoglobin A1C) measures your average blood sugar over the past three months. An A1C of 7 is an average blood sugar of 150. Target your A1C level below 7.

Blood pressure. High blood pressure forces your heart to pump harder to move blood through your body. Your target blood pressure is below 130/80.

Cholesterol. Low-density lipoprotein (LDL) or "bad cholesterol" blocks your arteries. Try to get your LDL below 100.

Know your ABC numbers, and talk to your health care provider about what your target ABC numbers should be and how you can reach these goals.



Prevent Other Health Problems from Diabetes

Diabetes can also cause these serious health problems:

- **Eye disease and blindness.** Control your blood sugar and blood pressure and get a dilated eye exam once a year to prevent blindness from diabetes.
- **Kidney disease.** Control blood sugar and blood pressure to lower your chances of having kidney failure. See your health care provider if your urine is cloudy or bloody, if you feel like you have to urinate often, or if you have pain or burning when you urinate. Have a urine test once a year.
- **Foot problems.** Check your feet every day for cuts, sores, bumps, blisters, or red spots. Ask your health care provider to check your feet at every office visit. Have a complete foot exam every year.
- **Mouth problems.** Twice a year, have a dentist clean your teeth and check your gums. Don't forget to tell your dentist that you have diabetes. Use dental floss at least once a day. Brush your teeth with a soft toothbrush after each meal and snack.
- **Nerve damage.** Nerve problems can come in many forms. Tell your health care provider if you have any problems in your feet, legs, hands, or arms or problems digesting food or with urination.
- **Flu and pneumonia.** Get a flu shot every year. Also ask your health care provider about getting a shot to protect you from pneumonia.
- **Stiff hands.** Keep your blood sugar under control and stretch your hands. Using clay or putty can keep your hands strong.



Diabetes and Pregnancy

The burden of diabetes is especially heavy for women, because the disease can affect both women and their unborn children. However, with good control of diabetes during pregnancy, women with type 1 diabetes, type 2 diabetes, or gestational diabetes (diabetes developed during pregnancy) can have safe pregnancies and healthy babies.

Pregnancy in Women with Type 1 or Type 2 Diabetes

If you already have diabetes and would like to get pregnant, your chances of having a healthy baby are good. However, it's important to plan your pregnancy and to follow these steps:

- Bring your diabetes under control *before* you get pregnant. Try to keep your blood sugar under control three to six months before you get pregnant.
- Keep your blood sugar under control during your pregnancy. Keep food, exercise, and insulin in balance. Remember, as your baby grows, your body changes, which will affect your sugar levels.

- Talk to your health care provider about your diabetes medicines. If you have type 1 diabetes, you may need more insulin, especially during the last three months of pregnancy. If you have type 2 diabetes, you will not be able to take diabetes pills and will need to switch to insulin.
- Ask your health care provider about what check-ups you need before or during pregnancy for your eyes and your kidneys.
- Ask your health care provider how often you should check your blood sugar levels. Keep a record of your test results.

Pregnancy in Women with Gestational Diabetes

During pregnancy, about 4 percent of women get gestational diabetes, or high blood sugar levels. This causes the baby's sugar levels to rise too. Control of gestational diabetes during pregnancy can help you stay healthy and have a healthy baby. Treatment includes special meal plans and exercise. Some women also need insulin shots to control blood sugar levels. Gestational diabetes usually goes away when the pregnancy is over. However, it places you at a higher risk of developing it again in another pregnancy and developing type 2 diabetes in the future. Talk to your health care provider to see if you need to be tested for diabetes during pregnancy.

Health Risks to You and Your Baby

You must control your diabetes if you have it before you get pregnant or develop it during pregnancy.

Diabetes Before You Get Pregnant

If you have diabetes before you get pregnant, and it's not controlled, here are some health problems you and your baby might have:

Mother

- low blood sugar (hypoglycemia)
- high level of ketones, or acids, in your blood (ketoacidosis)
- high blood pressure
- heart disease
- infections
- too much amniotic fluid (hydramnios)
- preterm labor (baby born too early)
- worsening of diabetes-related health problems, such as eye disease, kidney disease, and nerve damage

Baby

- injuries during birth
- birth defects
- heart failure
- low blood sugar (hypoglycemia)
- growing very large (macrosomia)
- breathing problems
- stillbirth (dying in your womb)

Diabetes Developed During Your Pregnancy (gestational diabetes)

If you develop diabetes during your pregnancy (gestational diabetes), and it's not controlled, here are some health problems you and your baby might have:

Mother

- high blood pressure
- too much amniotic fluid (hydramnios)
- delivering by caesarian section

Baby

- growing very large (macrosomia)
- injuries during birth
- low blood sugar (hypoglycemia)

Breastfeeding and Diabetes

Breastmilk gives children benefits that last their entire lives. In fact, children that breastfeed exclusively for the first six months of life are at a lower risk of developing diabetes. Children who are *not* exclusively breastfed for six months are more likely to develop type 1 diabetes and become overweight.



For more information on diabetes prevention and control, check out these resources:

Centers for Disease Control and Prevention & National Institutes of Health National Diabetes Education Program

Internet: <http://ndep.nih.gov>
Phone: 800-438-5383

National Institute of Diabetes and Digestive and Kidney Diseases

National Diabetes Information Clearinghouse

Internet: <http://diabetes.niddk.nih.gov>
Phone: 800-860-8747

HealthierUS.gov

Internet: www.healthierus.gov

Centers for Disease Control and Prevention

Internet: www.cdc.gov/diabetes
Phone: 877-232-3422

American Diabetes Association

Internet: www.diabetes.org
Phone: 800-342-2383

National Oral Health Information Clearinghouse

Internet: www.nohic.nidcr.nih.gov
Phone: 301-402-7364

Publications:

Am I at Risk for Type 2 Diabetes?

Internet: <http://diabetes.niddk.nih.gov/dm/pubs/riskfortype2>

Your Guide to Diabetes: Type 1 and Type 2

Internet: <http://diabetes.niddk.nih.gov/dm/pubs/type1and2>

Diabetes Prevention Series (7-booklet series)

Internet: <http://diabetes.niddk.nih.gov/dm/pubs/complications>

Take Charge of Your Diabetes

Internet: www.cdc.gov/diabetes/pubs/tcyd

Your Game Plan for Preventing Type 2 Diabetes

Internet: <http://ndep.nih.gov/materials/pubs/DPP/GPToolkit.pdf>