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## Diabetes - the Medical Perspective



Many people with diabetes eventually lose sensation in their feet. The loss of sensation happens because blood glucose has been high, and over time damages the small nerves in the feet.

Not being able to feel if you've stepped on a rock or something sharp can lead to serious problems with sores on the feet. Ulcers or sores can occur even when nothing has been stepped on. Sometimes it is the bone itself that causes pressure and an ulcer on the foot. Rubbing on a sock or shoe can also cause an ulcer to develop.

Foot ulcers are usually painless and round, sometimes with a callus

around the outside edge. The top of the first toe and the bottom of the big toe

are common places for ulcers to be found.

Treating foot ulcers before they become infected is important! Sometimes antibiotics are needed, and sometimes special bandages will help heal the ulcer quickly. If left untreated, a foot ulcer can become infected. Severe cases need to be amputated.

Preventing foot ulcers takes time and patience as well. Proper shoes may be hard to find or expensive. Socks should fit properly as well, being neither too tight so that circulation is hindered nor so loose that the sock falls into the shoe and makes a ridge against the foot. Take the time to find the best-fitting socks and shoes.

Look at your feet daily for sores or tears in the skin. Cut toenails and have any calluses treated when you visit your doctor. Ask your doctor or nurse how to care for toenails and calluses between doctor's visits.

We often don't notice our feet until they hurt. Until you have the habit of good foot care, think of a "reminder activity" – comb your hair-



check your feet, or take a bath-check your feet.

## Diabetes and Food

Lately, protein has been in the news almost as much as fat. Where does protein fit into a meal plan for those who have diabetes?

It's a good idea for those who have diabetes to include a protein source in each meal and snack.. Protein and fat can blunt the rise in blood glucose that is seen after eating only carbohydrate. Protein is needed not only for muscle maintenance but also for every other body tissue and system.

The amount of protein each person needs will depend upon his or her meal plan that has been tailored to their overall diabetes care plan. The Food Guide Pyramid is not a bad starting point, though. Two to three servings each day are recommended by the Food Guide Pyramid.

Good sources of animal protein include beef, pork, chicken, turkey and fish – try to choose low-fat or lean cuts. Protein is also found in legumes, eggs and peanut butter. All of these foods are part of the Meat, Poultry, Fish, Dry Beans, Eggs, and Nuts Group that we usually call “the Meat Group”. In addition to protein, these foods also are good sources of iron, zinc, and B vitamins.

What about protein bars? Protein bars do provide protein that can supplement many diets. However, they

are also high in calories that need to be included in any meal plan for those with diabetes. Talk to your dietitian about how protein bars may fit into your meal plan if they are a new favorite food for you!

## Exercise as a Part of Living

Recent research confirms that regular aerobic and weight-lifting activities not only help control blood sugar and lower blood pressure, but also provide cardiovascular benefits. For some people, exercise training will also help reduce total and abdominal fat, both of which can lead to improvements in insulin sensitivity, blood pressure and blood vessel function. To be effective in this way, the exercise has to be part of a structured plan – a real training program.

Remember to check with your health care provider before increasing your activity level greatly. To read more about this research, look at Stewart, Kerry J., "Exercise Training and the Cardiovascular Consequences of Type 2 Diabetes and Hypertension," *Journal of the American Medical Association*, Oct. 2, 2002. The *Journal of the American Medical Association* is often available through your local library.



## Recipes to Try

### St. Kitt's Vegetable Salad

1 serving = 1 cup  
6 servings/recipe

1 cup chopped tomatoes  
1 cup chopped asparagus  
¼ cup chopped red onion  
2 tablespoons reduced fat sour cream

1 banana, sliced  
½ cup diced celery  
1-1/2 cup cooked rice

1. Combine tomatoes, asparagus, onion, banana, celery, and rice.
2. Toss mixture with sour cream.
3. Serve or refrigerate.

Per serving:	80 calories	2 grams protein
	2 mg cholesterol	16 grams carbohydrate
	1 gram total fat	10% calories from fat

Note: ½ cup servings would be one half of above values and 12 servings per recipe.

### Apple Raisin Bread Pudding

12 servings

4 cups "lite" white bread cubes (about 6 slices)  
1 medium apple, chopped  
12 ounces fat free evaporated skimmed milk  
2 large eggs  
non-stick cooking spray

1/2 cup apple juice  
¼ cup Splenda®  
1 cup raisins  
1-1/2 teaspoons cinnamon

1. Preheat oven to 350°. Spray an 11 x 7" baking dish with non-stick cooking spray.
2. Combine bread cubes, apple, and raisins.
3. Beat eggs in a medium bowl. Stir in evaporated milk, apple juice, Splenda®, and cinnamon; mix well.
4. Pour egg mixture over bread mixture, pressing bread into egg mixture. Let stand for 10 minutes. Pour into baking dish.
5. Bake at 350° for 40 to 45 minutes, or until set and apples tender.

Per serving:	112 calories	4 grams protein
	35 mg cholesterol	22 grams carbohydrate
	1 grams fat	10% calories from fat

## Medication Update

If you have diabetes do you have to take oral medications or insulin to keep you blood glucose within a normal range? Not necessarily. For some people who have Type 2 diabetes (adult onset), losing weight, eating a balanced, moderate diet, and exercising regularly will keep their blood glucose normal or near-normal. For other people, this doesn't work well enough and medications have to be taken.

However, taking medication isn't a substitute for a healthy diet. If you are overweight, taking diabetes medication, following a meal plan, and exercising, there is a possibility that your medication dose can be lowered. It may even be stopped if you reach your goal body weight.

But isn't it easier to just take the medication? Yes and no. It may be easier in the short term to take medication. However, in the long run those who have been taking medication and not following a healthy diet have blood glucose levels that often creep up. Medication doses can be increased, but at some point insulin may need to be included.

Eating a healthy diet is part of the overall plan for keeping blood glucose within a healthy range. Whatever your medication, consider your meal plan part of that prescription!

## **New Resources**

“Learn to count carbs the right way, easy and effortlessly, and you can simplify your life, feel better, and avoid long-term diabetes complications.” The American Diabetes Association Complete Guide to Carb Counting. Authors, Hope Warshaw, MMSc, RD, CDE and Karmeen Kulkarni, MS, RD, CDE. Includes fast food and restaurant dining choices. 192 pages. \$16.95 from [store.diabetes.org](http://store.diabetes.org)

My Other Checkbook, by John Walsh PA, CDE, & Ruth Roberts, MA, \$12.95. Graph your blood sugar, insulin doses, oral medications and/or exercise. Fits in your checkbook. Available from the Diabetes Mall at <http://www.diabetesnet.com/> which is owned by the authors.

Betty Crocker's Diabetes Cookbook: Everyday Meals, Easy as 1-2-3, Betty Crocker Editors; Richard Bergenstal, Diane Reader, Maureen Doran, authors, 2003; 256 pages. Available at [www.BettyCrocker.com](http://www.BettyCrocker.com), [www.wiley.com](http://www.wiley.com), [www.amazon.com](http://www.amazon.com) or local bookstores. Prices range from \$17 to \$25.

