

October-November, 2004

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Diabetes – the Medical Perspective

Having diabetes does not increase your risk of having arthritis, and vice versa, although many people have both of these chronic conditions. Achieving or maintaining optimal body weight is very important for those who have diabetes and arthritis. Being overweight makes it harder to keep blood glucose levels normal. Being overweight also puts a strain on joints already affected by arthritis.

Exercise is a great tool to shed extra pounds, but for those with arthritis exercise is often painful. If a joint is inflamed, additional exercise may worsen the inflammation. Swimming is usually a good choice for those who have arthritis and diabetes.

Medications used to treat arthritis include pain killers, anti-inflammatory medications, and

steroids. Some of these can raise blood glucose levels. Be sure to talk to your doctor about your diabetes and arthritis care at the same time.

Although having diabetes does not increase the risk of having arthritis “diabetic arthritis” is a term that is sometimes used for a group of bone and joint conditions often found in those with diabetes.

Diabetic cheiropathy is a condition affecting the hands. The skin is tight and waxy and it may be difficult to extend fingers or press the palms together flat.

Charcot's joint usually affects the foot and ankle. There are tiny fractures that don't correctly repair themselves. Nerve damage is often also present. The joints can be swollen and painful.

Those with diabetes also often develop *carpal tunnel syndrome*. The fingers and hand may become numb and tingly because the nerve running through the wrist is compressed.

Talk to your doctor about any joint pain you have and available treatments or therapy.



Diabetes and Food



Those with diabetes know they are at increased risk of developing heart disease. Very often a lower fat diet is recommended along with dietary changes to control blood sugar.

Recently the FDA has ruled that the *trans* fat content of foods must be on the Nutrition Facts label. While some companies are complying now with this law, manufacturers have until the year 2006 implement the new labelling. *Trans* fat is formed when liquid oils are made into solid fats like shortening and hard margarine. The process is called hydrogenation, and it increases the shelf life and flavor stability of foods that have these fats.

Trans fat can be found in vegetable shortenings, some margarines, crackers, candies, cookies, snack foods, fried foods, baked goods, and other processed foods made with partially hydrogenated vegetable oils. A small amount of *trans* fat is found naturally in some animal-based foods.

Trans fat has been shown to raise low-density lipoprotein (LDL) cholesterol that increases the risk of heart disease.

To keep the amount of *trans* fat in your diet low

- Check the Nutrition Facts panel Choose foods lower in saturated fat, *trans* fat, and cholesterol.
- Choose Alternative Fats. Replace saturated and *trans* fats in your diet with mono- and polyunsaturated fats.

- Choose vegetable oils (except coconut and palm kernel oils) and soft margarines (liquid, tub, or spray) more often because the combined amount of saturated and *trans* fats is lower than the amount in solid shortenings, hard margarines, and animal fats, including butter.

Exercise as a Part of Living

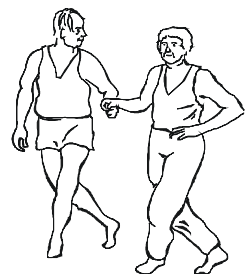
Pedometers can help people set activity goals and give feedback for good (or bad) behavior. Pedometers measure the up and down motion of your body while you walk.

Accuracy will be best when:

- ! You walk at a brisk pace,
- ! Your feet strike firmly,
- ! You have an even stride length,
- ! The pedometer is clipped to a waistband or belt that is firm around your waist.

Models may vary. Some require stride length input, require height and weight input, tell you how many steps you've walked or how many calories you've burned. Some will calculate speed, or have alarms or stopwatches in them. Others may even talk to you!

Before you begin any new exercise, remember to talk to your health care provider.



Recipes to Try

Fruited Slaw

8 servings (1 cup each)

1 can (20 oz.) pineapple tidbits	1/2 cup chopped walnuts
1 tbsp. lemon juice	1/2 cup raisins
1 medium banana, sliced	1/2 tsp. salt
3 cups shredded cabbage	6 oz. low-fat tropical yogurt
1 can (15 oz.) mandarin oranges, drained	

1. Drain pineapple, reserving 2 tbsp. juice.
2. Stir lemon juice into reserved pineapple juice. Add banana slices.
3. In large salad bowl combine cabbage, oranges, walnuts, raisins, salt, and juice mixture.
4. Add yogurt. Toss to coat. Chill until serving.

Per serving:

156 calories	4 grams protein	28 grams carbohydrate
4.5 grams total fat	26% calories from fat	0 mg cholesterol
2.8 grams fiber		

Pear Pie with Cheddar Cheese Topping

8 servings

3 lbs. pears, peeled and sliced	1 tbsp. cornstarch
1/3 cup Splenda®	1/8 teas. salt
	1 unbaked frozen pie shell, 9''*

Topping:

1/2 cup shredded, low-fat cheddar cheese	3 tbsp. margarine, melted
1/2 cup flour	1/4 cup Splenda®
	1/8 teas. salt

1. Combine pears, Splenda®, cornstarch, and salt. Pour into pastry shell.
2. Combine topping ingredients until crumbly. Sprinkle over pear mixture.
3. Bake at 425° for 25-35 minutes until crust is light brown and cheese has melted.

Per serving:

163 calories	3 grams protein	28 grams carbohydrate
5 grams total fat	30% calories from fat	2 mg cholesterol
3.5 grams fiber		

*The calories in pie shells vary from 80 to 130 per 1/8 of a pie. The calories calculated in this recipe used the 86 calories per slice value. Read labels to find the pie shell with the calories you desire.

Medication Update

A new medication has just been approved for treating the pain associated with diabetic peripheral neuropathy. Diabetic peripheral neuropathy is nerve damage to the legs and feet that occurs when blood glucose levels have been too high for too long. Often this damage leads to pain in the feet and calves.

The new medication is Cymbalta[®], manufactured by Eli Lilly. Cymbalta[®] is the only FDA approved medication for treatment of peripheral neuropathy pain. Cymbalta[®] is also approved by the FDA to treat depression.

In the clinical study that led to its approval as treatment for peripheral neuropathy, participants felt relief from pain in the first week after taking the medication, and continued to improve through the 12 weeks of the study.

The most frequently mentioned side effect was nausea. Other side effects mentioned included sleeplessness, constipation, and dry mouth. The symptoms were usually not severe enough to cause the participants to stop taking the medication.

It is possible that Cymbalta[®] could raise blood pressure and monitoring blood pressure is suggested. If you have severe pain in

your legs or feet, talk to your doctor about new treatment options.

New Resources

Although not new, *The I Hate to Exercise Book for People with Diabetes* by Charlotte Hayes, RD, CDE, may help you start and keep an exercise program going! 117 pgs. American Diabetes Association, 2001. \$14.95-\$10.47

Always looking for quick recipes? *Last Minute Meals for People with Diabetes* by Nancy S. Hughes may provide you with some new, easy ideas. 113 pgs. The paperback contains 100 recipes using 6 ingredients or less. American Diabetes Association, 2002. \$16.95-\$11.95

If you have more questions about *trans* fat, visit www.cfsan.fda.gov/~dms/qatrans2.html, updated, June, 2004 for more "Questions and Answers about *Trans* Fat Nutrition Labeling".

If you take Avandia, you may want to visit www.fda.gov/cder/consumerinfo/druginfo/avandia.HTM, updated May, 2004. The FDA has posted new consumer information about the drug.

