Flourishing with Diabetes

Often we focus on the problems that people with diabetes face instead of noticing how some people have healthy, happy lives because they have diabetes. An article in the On the Cutting Edge Newsletter states there are three things that move people toward better health:

1. Clearly understanding the health challenge they are facing
2. Believing there are resources within and outside themselves to manage the challenge
3. Being motivated to do something about it.

People who flourish with diabetes focus on solutions instead of problems. These individuals plan these solutions based on what already works in their lives or in their diabetes management. They then clearly picture where they want to be. They think about times when the challenge does not exist and what contributes to those times. They also remember past success with other situations and explore what factors and choices lead to that success. Finally when they have a clear idea of their future goal, they carefully plan the next step to get them closer to that desired outcome.

This process relies on positive emotions like joy, happiness, curiosity, contentment, love and gratitude to open a person’s mind to more possibilities. These emotions also promote more social support and greater creativity and flexibility. In contrast, negative emotions, like fear or guilt, narrow a person’s vision and reduce the chances of finding a solution.

Some people are naturally good at this or they have friends or family members that help them do it. Others need outside help to sort things out. Talking with a health care provider or a mental health professional can help. Sometimes these professionals are called health or life coaches. They teach new skills, cheer you on when you are trying something different and give you a serious talking to when you get off track.

No one wants to just cope with diabetes. We want to integrate it well into our lives. Then we can become better and healthier persons because of it.
Determining your 10-year Cardiovascular Disease Risk

Since 1948, researchers have looked at the lifestyle and health habits of the citizens of Framingham, Massachusetts to find out what increases risk for heart attack or stroke. Based on this data, the research team created two tools called the Framingham 10 Year Risk Calculators to predict a person’s risk of developing cardiovascular disease (CVD) within 10 years.

What factors are measured by Framingham’s 10 Year Risk Calculators?

a) Gender: Men in general and women who have gone through menopause are at higher risk for CVD disease than younger women.
b) Age: Getting older increases risk for heart attack or stroke.
c) BMI: Body Mass Index shows if your weight is right for your height. A higher BMI is linked to a higher CVD risk.
d) Total Cholesterol: High total cholesterol levels cause cholesterol to stick to your arteries. The arteries narrow which can lead to a heart attack or stroke.
e) HDL cholesterol: HDL cholesterol carries cholesterol from the arteries and removes it from the body. Higher HDL levels are good.
f) Smoking: Smoking damages the blood vessels, raises blood pressure, makes the heart beat faster and increases risk for blood clots to form that can block the arteries to the heart and brain.
g) Diabetes: When blood glucose is high, fat can deposit on the walls of blood vessels and narrow them. This again cuts oxygen to the heart and brain.
h) Systolic Blood Pressure: High blood pressure damages the artery walls, leading to a hardening of the arteries.

How to access the 10 Year Cardiovascular Risk Calculators?

1. Go to http://www.framinghamheartstudy.org/risk/gencardio.html#
2. Look at the left side of the page and click on “Interactive Risk Score Calculator Using Lipids” or “Interactive Risk Score Calculator Using BMI.”
3. A window should pop up on the screen
4. Enter your information.
5. If you do not know your BMI, you can get it at http://www.nhlbi.nih.gov/guidelines/obesity/BMI/bmicalc.htm

What if your score is not ideal?

1. Increase Exercise: Exercise decreases blood pressure, lowers total cholesterol, controls weight and raises HDL or healthy cholesterol. Aim for a total of 30-60 minutes per day five or more days a week.
2. Eat healthier foods: People who eat fish rich in omega-3 fatty acids, fruits, vegetables, beans and peas, unsalted nuts and whole grains live longer than people who do not.
Kidneys also begin to leak protein. This is called diabetic nephropathy.

How Can You Prevent Kidney Disease?

To prevent or at least delay the onset of kidney disease:

- Keep blood glucose in your target range and your A1C less than 7%
- Lower your blood pressure to under 120/80 if possible. If your blood pressure is 140/80 or higher, you will need blood pressure medicine. One that seems to protect the kidneys is called an ACE inhibitor. It is common for people with blood pressure problems to need more than one medicine to control it. You can also
  - Lose weight
  - Consume less salt
  - Avoid tobacco
  - Drink little alcohol
  - Get regular exercise

Testing for Kidney Disease

Just because you have diabetes does not mean you will definitely develop kidney disease. Factors like genetics, blood glucose control, and blood pressure can determine whether you will have it. Often people do not notice the early signs of kidney problems. A doctor can do tests to help diagnose kidney changes before they get more serious. These tests will look for protein in your urine and waste buildup in your blood. Most people with diabetes need these tests yearly.

3. **Get regular medical check-ups:** Regular exams will detect problems early when they are easier to treat.
4. **Cut your sodium:** Keep your daily sodium intake to 2300 milligrams or less per day to control blood pressure.
5. **Eat fewer “problem or risky foods”:**
   - Cut partially hydrogenated oils (trans fats).
   - Limit sugar sweetened beverages and increase water intake.
   - Switch to low fat or fat-free dairy foods.
   - Eat smaller amounts of lean meat, skinless poultry and fish.
   - Consume eight or more servings of vegetables and fruits a day.
   - Eat out less often.

Back to Basics: Kidney Disease and Diabetes

The most common cause of kidney (or renal) disease is diabetes and high blood pressure. Your kidneys filter out waste from your body into the urine. The kidneys also work to regulate your blood pressure. When the kidneys are damaged, waste and fluid cannot be removed properly. This causes swelling of the ankles, vomiting, weakness, poor sleep, and shortness of breath. Damaged
Happy Family Chicken Salad
Everyone is trying to eat lighter after the holidays. Here is a tasty salad to enjoy. To make the salad more suitable for winter, add the chicken while it is still hot.

Dressing:    Salad:
¼ cup olive or peanut oil   6 ounce bag mixed salad greens
3 tablespoons rice vinegar   2 cups diced cooked skinless chicken breast
3 packets sugar substitute   11 ounce can mandarin oranges, drained
½ tablespoon blush wine   ½ cup sliced water chestnuts
½ tablespoon light soy sauce   ¼ cup thinly sliced red onion
1 teaspoon sesame oil   ¼ cup slivered almonds
¼ teaspoon grated fresh ginger

1. Combine dressing ingredients in jar with a tight lid. Shake well to combine. Refrigerate for two hours to enhance flavors.
2. Arrange the salad ingredients in a large salad bowl.
3. Right before serving, shake the dressing again and pour evenly on the salad.

6 servings

Nutrition Analysis per serving:

Calories: 219   Carbohydrate: 8 grams   Protein: 16 grams
Fat: 13 grams Saturated Fat: 2 gram   Cholesterol: 40 milligrams
Sodium: 105 milligrams   Fiber: 1.5 grams
Dear Friend,

*Diabetes Life Lines* is a bi-monthly publication sent to you by your local county Extension agent.

It is written by an Extension Nutrition and Health Specialist and other health professionals from the University of Georgia. This newsletter brings you the latest information on diabetes self-management, healthy recipes and news about important diabetes-related events.

If you would like more information, please contact your local county Extension Office.

Yours truly,

County Extension Agent

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