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**Back To Basics: Immunizations**

Two Vaccines You Need to Get

**Flu and pneumonia** are illnesses that can be very hard on someone with diabetes. Catching one of them can be severe enough that a person may need treatment in the hospital or could even die. The Centers for Disease Control says that people with diabetes are three times more likely to die from flu or pneumonia than people without diabetes. That is why getting immunized against flu and pneumonia is so important.

Usually one pneumonia shot in a person’s life time is enough. However if a person has a weak immune system, the doctor may recommend a second shot 5-10 years after the first one. The vaccine is very safe since it contains no live bacteria.

In contrast, flu viruses can change so you must get a new flu shot every year. Both you and your family need to be immunized since the flu is very contagious. Again the vaccine is very safe since the virus used to make it is dead.

A mild redness or swelling in the arm where one of these shots is given may occur. Normally this disappears in a day or two. If something more serious happens, tell the health care provider who gave you the shot so it can be documented.

Medicare Part B will pay for flu and pneumonia shots. Other insurance coverage may vary, but taking the shots will be much cheaper than being treated for either illness.

**Other Vaccines that May Help**

People with diabetes are also more likely to get **Hepatitis B** compared to other people. This virus infects the liver and may lead to cirrhosis or liver cancer later in life. Most doctors only recommend the Hepatitis B vaccine for people until they are age 59, but some may suggest it for older adults in certain situations. It requires a series of three shots taken over 6 months, but once you take them, you never have to do it again.

About 30% of older adults will suffer from **shingles**. Diabetes does not make you more likely to get shingles. However anyone who has had this painful, itchy rash will tell you that it is one of the most uncomfortable diseases they’ve ever had. Some people have nerve pain long after the rash clears up. Most people get the shingles vaccine after age 60 although newer guidelines say you can take it once you turn 50.
Safe at School

Your child with diabetes is protected against discrimination at school by Section 504 of the Rehabilitation Act of 1973 and the Individuals with Disabilities Education Act. These federal laws apply as long as the school accepts federal funding in any form. A Georgia law passed and signed by the governor in 2012 also outlines how schools should assist children and youth with diabetes. The goal of these laws is to ensure that students with diabetes have equal access to the same education and school activities as other students without diabetes.

The American Diabetes Association states that there are three guiding principles that lead to proper support of the student with diabetes:

1) All staff at the school with any contact with the student will have a basic knowledge of diabetes and know whom to contact if the student needs help.
2) The school nurse, if available, is the primary care provider at school, but other trained school personnel can help if the nurse is not available.
3) The child or teen with diabetes does as much of their own care as possible.

To make going from home to school as easy as possible, the American Diabetes Association has some excellent materials at


You will find detailed explanations of your rights and responsibilities as well as the rights and responsibilities of the school. There is also a sample written care plan that can be filled out by the student’s health care provider and a sample Section 504 plan that the parents and school can use to detail exactly what care the child or teen will need and how it should be done. Also explained is an Individual Education Plan that you may need if diabetes affects your child’s ability to learn.

Since diabetes care changes over time, you should update these documents yearly – ideally before school begins. However it is never too late to have a meeting with school officials and the school nurse to make sure they know exactly how to help your child or teen. Of course, if a student’s treatment plan changes during the school year, these documents will need to be revised.

The law that governs school districts in Georgia is very specific about what the school and parent should do to support the student. This includes the role of the school nurse, the training of other school personnel and even how field trips should be handled. You can read the bill online at http://www.legis.ga.gov/Legislation/20112012/126950.pdf

Every child and teen deserves to be safe at school. Filling out the forms, meeting with school personnel and providing the training needed to make sure everyone knows what to do is well worth the effort.
Why Is Your Blood Glucose Out of Target?

No one has perfect blood glucose control, but certainly figuring out why a blood glucose reading is higher or lower than desired is worth the effort.

To figure things out, you will need to gather some data. Record you food intake to tell what you ate, how much you ate, and when you ate. Also document the time and amounts of your medicines, including those you buy over-the-counter, and any physical activity you do. You may also need to check your blood glucose more often. Using a graph or chart to record your blood glucose readings will help you to see trends. There are apps for smart phones and computer programs to do this, but a paper chart will work just as well.

When you log this information, add comments about why you think a blood glucose reading is out of range. Here are some questions you might want to ask:

- Am I eating at regular times and consuming consistent amounts of carbohydrate?
- Have I introduced a new food or am I eating at a new place?
- Have I been eating more or less than usual?
- Am I catching low or high blood glucose levels quickly and treating them correctly?
- Am I under more stress?
- Could I possibly be getting sick or, if I am a woman, is it time for my monthly period?
- Is my physical activity different lately or could I do it more regularly?
- Am I taking my medicine correctly or have I added or stopped a medicine that could be affecting my blood glucose? Are any of my medicines out-of-date and am I storing them properly?

While you may be able to decide what is going on yourself, reviewing these records with a health care provider can be helpful. This person may see things that you have missed. They may also offer some ideas for handling the problem that you have not considered.

Tell the health care provider you will need some time to review these records and brainstorm solutions when you make your appointment. A diabetes educator is likely to be able to take more time with you than a busy doctor. Of course only you can decide on the changes that you are willing to make. Sometimes you have to be honest with yourself about a realistic blood glucose goal and what you are willing to do to attain it.

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**Recipe Corner**

**Buffalo Chicken Tenderloins with Buttermilk - Blue Cheese Sauce**

This lower fat, lower sodium version of Buffalo Wings uses lean skinless chicken breasts instead of fatty chicken wings. To make it less spicy, substitute one tablespoon of wine, apple juice or BBQ sauce for one tablespoon of hot sauce.

**6 servings**

1 pound chicken tenderloins (tenders)  
1½ teaspoon olive oil  
1 tablespoon paprika  
2 tablespoon hot sauce

Dressing:  
1/4 cup buttermilk, non-fat  
1/4 cup yogurt, plain, non-fat  
1 ½ tablespoons white wine vinegar  
½ teaspoon sugar or half a packet of sugar substitute  
½ teaspoon pepper  
1/4 cup crumbled reduced fat blue or feta cheese

Preheat oven to 375°F.


2. Combine olive oil, paprika, and hot sauce in another bowl. Add the chicken tenderloins. Stir to coat the chicken evenly with the sauce mixture.

3. Place chicken on a baking pan and bake at 375°F until the internal temperature of at least 165°F is reached. Check the temperature of the tenderloins using a calibrated instant-read food thermometer. Baking takes about 12-18 minutes depending on the size of the tenderloins.

4. When the chicken is cooked, serve with the buttermilk - cheese sauce as a dip.

Nutritional Analysis (per serving):

<table>
<thead>
<tr>
<th>Calories: 198 kcal</th>
<th>Carbohydrates: 4 grams</th>
<th>Protein: 31 grams</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fat: 6 grams</td>
<td>Saturated Fat: 2 grams</td>
<td>Cholesterol: 81 milligrams</td>
</tr>
<tr>
<td>Sodium: 164 milligrams</td>
<td>Fiber: 0 grams</td>
<td>Exchange: 4 very lean meats</td>
</tr>
</tbody>
</table>
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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*Diabetes Life Lines: Your current issue is enclosed*

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