
Diabetes Life Lines



A newsletter from your County Extension Office
Vol. 18 • No. 3 • Spring 2004

Successful Weight Losers - How Do They Do It?

A good way to increase your chance of success is to emulate someone who has been successful. Wouldn't it be great if people who have been successful at losing weight and keeping it off would give you their secrets? Well, now they have - in the National Weight Control Registry.

Researchers have set up a registry of people who have lost at least 30 pounds and have kept it off for more than one year. To date, there are more than 3,000 people in the registry and the average amount of weight lost is 60 pounds, kept off for over 5 years. Now researchers have the perfect opportunity to study the eating and exercise habits of a large number of successful weight loss maintainers.

From a previous study of people who were successful at losing weight and keeping it off, researchers found several characteristics that predict success in maintaining weight loss. These include:

- **Eating a low-calorie, low-fat diet.** Most successful weight maintainers reported that they eat a reduced calorie, low-fat diet - not a low carbohydrate diet. Women get an average of 1400 calories a day while men consume about 1700 calories with about 56% carbohydrate, 19% protein, and 24% fat.
- **Eating 3 meals per day, including breakfast.** Some people find that eating in the morning helps them eat less later in the day.
- **Exercising regularly.** The majority of people surveyed reported that they exercised for at least 30 minutes 5 times per week and walking was the main type of exercise.
- **Keeping a food diary.** Many people find that keeping a log of their food intake and activity, perhaps less frequently than they did during weight loss,



helps them identify problem areas and keeps them from straying too far off course.

- ***Weighing in regularly.***

Weighing at the same time of day about once a week will help you realize when the weight is creeping upward. If you notice that you've gained a couple of pounds, it's easier to lose two than five or ten.

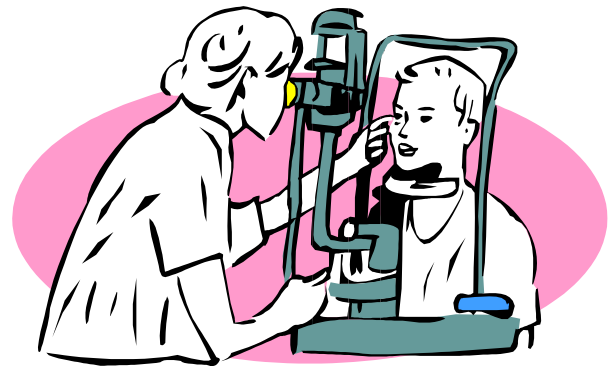
A recent study surveyed over 1400 registrants about whether they are consistent in what they eat on weekdays and weekends or if take a break from their usual daily food intake on weekends or holidays. Those who responded that they "let loose" on weekends and holidays were less likely to maintain their weight loss. Those who were more consistent fared better over time.

It makes sense that the eating and exercise habits that help you lose weight will also help you maintain your weight loss. That doesn't mean you can't "splurge" occasionally on weekends or special occasions. However, if you "let loose" for the entire weekend, you undoubtedly will undo the calorie savings from your careful eating and exercising the previous week.

If you'd like more information on the National Weight Registry, do a web search or go to the web site: www.lifespan.org/services/bmed/wt_loss/nwcr.

May is Healthy Vision Month - Have You Had Your Eye Exam?

Diabetes is the leading cause of new cases of blindness in adults. Diabetic retinopathy, cataracts, and glaucoma are the three major eye problems that cause people with diabetes to lose their vision. You can



reduce the risk of vision loss if these problems are diagnosed early.

Diabetic retinopathy is a disease of the retina, or background of the eye, and is the major cause of vision loss in diabetes. There are few if any symptoms of retinopathy until vision loss occurs. Therefore, it is very important that it is diagnosed early.

A dilated eye exam is necessary to look at the back of the eye to identify any changes in the retina or optic nerve. You should have a dilated eye exam yearly if you are an adult with type 2 diabetes or you have had type 1 for at least 3-5 years. Your eye doctor may ask you to get an eye exam more or less frequently based on the results of your exam.

If you are diagnosed with retinopathy, the American Diabetes Association recommends that you be referred to an ophthalmologist who is experienced in the management and treatment of diabetic retinopathy. Fortunately, laser treatment can slow the progression of retinopathy and reduce vision loss.

Results of several large studies have shown that better blood glucose control reduces your risk of retinopathy. The lower your A1C, the less likely you are to experience vision loss from diabetic retinopathy.

During Healthy Vision Month, reduce your chances of losing your vision. Contact your eye doctor to get your yearly dilated eye exam if you have not already done so. Review your recent A1Cs. Make a concerted effort to improve your A1C to a goal of less than 6.5-7.0%.

Working with Your Doctor to Stay Healthy

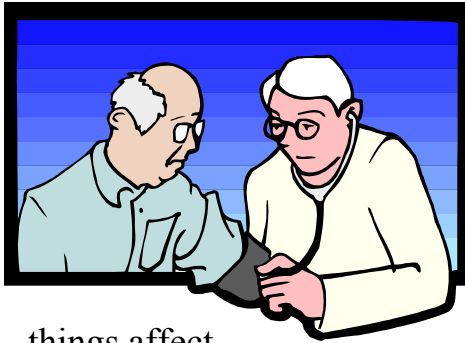
If you have been to the doctor lately, you know how busy most doctors are. You are lucky if you get to see the doctor for 10 minutes. When a medical team gets busy, it's easy to forget important parts of your diabetes care. You are more likely to get the best care if you know what to ask for.

To remember the basics of a good doctor visit, think of this simple

memory aid – **PLAGUE F**. Sounds like some mystery disease, right? Well, it isn't a disease, but each letter of **PLAGUE F** stands for some part of your diabetes check-up. Let's see what each letter means:

- P** – Stands for **pressure**. Ask what your blood pressure is at each visit. If it is over 130/80, talk to your doctor about changes in medication, diet and physical activity that will help you get it under control.
- L** - Stands for **lipids**, the medical term for cholesterol and triglycerides (blood fats). Again ask what the values are, especially for your LDL-cholesterol (the bad kind). If it is over 100, discuss ways with your medical team to get it down.
- A** - Stands for **aspirin**. Aspirin can help lower your risk for a heart attack. If you are not taking aspirin, ask your doctor whether you should take it. Even if the doctor doesn't think you need it now, keep asking. Your risk for heart disease often changes as you get older.
- G** - Stands for **glucose**. Take your written blood glucose records and your blood glucose meter to your doctor visit. Many doctors now have computer programs to analyze your blood glucose readings using the memory of

your meter. They can actually print out a graph that shows your diabetes control. Your written records can also help you both see how different



things affect your blood glucose. These two records can really help the doctor fit your diabetes care to your needs.

Your doctor should also order an A1C test. This test shows your average blood glucose control for the last 90 days. Some doctor's offices can do the test and get the results right away.

You should also discuss with your doctor any severe low blood glucose reactions (under 60) you have had.

U - Stands for **urine protein**. To detect any kidney disease, most people with diabetes need a yearly urine protein test. Talk to your doctor about whether you need this test.

E - Stands for **eyes**. People with diabetes are more likely to get an eye disease called

retinopathy. Untreated retinopathy can cause blindness. To find this problem early and get it treated, have a dilated eye exam every year. Only an eye doctor (optometrist or ophthalmologist) can properly do this exam.

F - Stands for **feet**. At each doctor visit, take off your shoes and socks. This will remind the doctor to check your feet for any problems with circulation, wounds, or swelling. So don't be *plagued* by poor diabetes care. Remember "PLAGUE F" the next time you visit your health care team to help you stay healthy longer.

Contributors:

Janine Freeman, RD,LD,CDE,
Extension Nutrition Specialist,
Principle Writer and Editor
Connie Crawley, MS, RD,LD,
Extension Nutrition and Health
Specialist

Editorial Board:

Jenny Grimm, RN,MSN,CDE,
Medical College of Georgia
Ian C. Herskowitz,MD,CDE,FACE,
Medical College of Georgia

Recipe Corner

Hearty Rice and Barley Pilaf

This nutritious mixture of barley and brown rice gives this dish a great nutty flavor that blends well with any main dish.

2 cups regular or low-sodium chicken broth	1/2 cup chopped carrots
3/4 cup brown rice	6 ounces fresh, sliced shitake mushrooms
1/4 cup pearl barley	2 teaspoons olive oil
1 clove garlic	Salt and pepper to taste (optional)

1. Heat chicken broth in large saucepan on high just until boiling.
2. Add brown rice, barley, and garlic. Cover and reduce temperature to low - mixture should be barely simmering. Set timer for 45 minutes.
3. Meanwhile, sauté mushrooms in olive oil in large skillet on medium high until lightly browned.
4. After cooking 20 minutes, add carrots and mushrooms to rice/barley mixture and continue simmering for the remaining 25 minutes or until tender.
5. Salt and pepper to taste.

Serves 6 - approximately 1/2 cup per serving

Carbohydrate choices: 1 1/2

Exchanges: 1 1/2 starch, 1/2 fat

Calories: 140 Carbohydrate: 24 grams Fat: 3 grams Sodium: 286 milligrams (90 mg using reduced sodium broth) Fiber: 3 grams Cholesterol: 8 milligrams

Suggested Menu

<u>Menu Item</u>	<u>Exchanges</u>	<u>Carbohydrate</u>
1/2 cup <i>Hearty Rice and Barley Pilaf</i> *	1 1/2 starch, 1/2 fat	24 grams
3 ounces grilled chicken	3 lean meat	0 grams
1/2 cup garlic spinach	1 vegetable	5 grams
Tossed green salad	Free	†
1 tablespoon Italian dressing	1 fat	†
1/2 cup fresh fruit medley	1 fruit	15 grams
1 whole wheat roll	1 starch	15 grams

* This issue's featured recipe † insignificant

Note: Portions may need to be adjusted for your meal plan

The University of Georgia
Cooperative Extension Service

College of Agricultural and Environmental Sciences / Athens, Georgia 30602-4356

Dear Friend,

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

It is written by Food and Nutrition Specialists at the University of Georgia, College of Family and Consumer Sciences. This newsletter brings you the latest information on diabetes, nutrition, the diabetic exchange system, recipes, and important events.

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

Yours truly,

County Extension Agent

Janine Freeman, Principal Writer

The University of Georgia and Ft. Valley State College, the U.S. Department of Agriculture and counties of the state cooperating. The Cooperative Extension Service offers educational programs, assistance and materials to all people without regard to race, color, national origin, sex or disability. An equal opportunity/affirmative action organization committed to a diverse workforce.

Issued in furtherance of Cooperative Extension work, Acts of May 8 and June 30, 1914, The University of Georgia College of Agricultural and Environmental Sciences and the U.S. Department of Agriculture cooperating.

Gale A. Buchanan, Dean and Director

Cooperative Extension Service
U.S. Department of Agriculture
The University of Georgia
College of Agricultural
and Environmental Sciences
Athens, GA 30602

PRE-SORT STANDARD
POSTAGE & FEES PAID
USDA
PERMIT NO G268

Official Business

Diabetes Life Lines: Your current issue enclosed