

---

# Diabetes Life Lines



A newsletter from your County Extension Office  
Vol. 19 • No. 1 • Winter 2005

---

## Medications for Erectile Dysfunction

**T**reatment of erectile dysfunction (ED), also called impotence, in men with diabetes has become more convenient with the development of new medications in pill form. Since Viagra (sildenafil) took the market by storm several years ago, several new medications have since become available.

Men with diabetes have a greater risk of developing ED, yet many men are reluctant to discuss it with their doctors, leaving it untreated. For men with diabetes, diabetic neuropathy and decreased blood flow can contribute to the inability to get and maintain an erection.

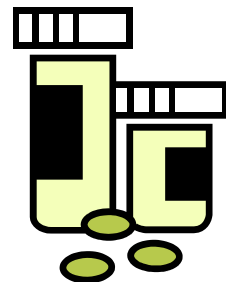
Today, men have a choice of three oral medications for the

treatment of ED. In addition to Viagra, these include Levitra (vardenfil) and Cialis (tadalafil). These drugs work mainly by increasing the amount of blood that can enter the penis. They cause an erection only after sexual stimulation.

The ED drugs have different side effects and different times of action. All three begin to work in about 30 minutes. Cialis offers the advantage of lasting longer, up to 36 hours, which allows for more spontaneity. The others last up to 4 hours. None of these medications should be taken more than once a day. All work best in the absence of alcohol and smoking.

Each of the three medications can cause headache, flushing, upset stomach, visual problems, and prolonged erections. All of these drugs have similar precautions. Be sure you discuss all your medications with your doctor, especially if you take nitrate drugs such as nitroglycerin, because they can have dangerous interactions with ED drugs. Some blood pressure medications (alpha blockers) should not be used with Viagra or Levitra.

It is difficult to know which drug will work best for you. If you have previously used one drug with little response, you may have more response with one of the



---

other drugs. Your doctor can also discuss other non-medication options if needed.

If you're having erectile problems, don't accept them as permanent and don't keep them to yourself. Talk to your doctor about your options.

---

## Water Aerobics for Fitness

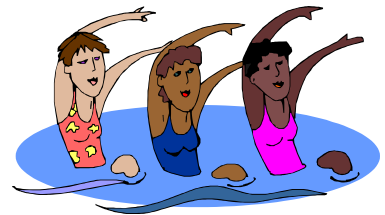
If you're looking for a good way to get fit, but can't quite get motivated to go out and walk in the cold or rainy winter or the heat and humidity of Georgia's summers, water aerobics may be your answer. Less gravity and more resistance gives you as much challenge as you want while being kind to your feet and joints. And, it's fun!

Most people can participate in water aerobics because it is low-impact, meaning that your feet and legs do not support all your body weight while you exercise. If you have neuropathy or decreased sensation to the feet, your doctor may have recommended low-impact exercise. Since water supports most of your weight, you have less stress on your body than with land-based exercise. Moving against the resistance of water allows you to burn more calories walking or jogging in water than on land. This challenging, low-impact

workout results in stronger muscles, more flexibility, better circulation, and improved fitness of your heart and lungs.

If you're just beginning, be sure to tell your water aerobics instructor that you have diabetes, especially if you are at risk for low blood glucose. You'll be less likely to notice some of the symptoms of low blood glucose like sweating, rapid heart rate, or weakness when you're in the water. Be sure to keep some glucose tablets or gel handy and bring a water bottle to stay hydrated. As with any type of exercise, check your blood glucose before and after exercising. A general guideline is to make sure your blood glucose is over 100 before exercising if you take insulin or diabetes medication that can cause low blood glucose.

The only equipment you'll need is a pool and a swimsuit. Check with your local YMCA/YWCA, fitness centers, country clubs, colleges, hospitals, or rehab centers to find an aerobics class in your area. Water shoes (rubber-soled slip-ons) are also recommended to protect your feet from the bottom of the pool, especially if you have neuropathy, and to prevent you from falling on slippery surfaces. Many of the water



---

exercise won't even require you to know how to swim or to get your hair wet. Most of the exercises are performed in water than comes up to your waist or underarm.

Go ahead and take the plunge - enjoy the fun while increasing your fitness.

---

## Is There a “Trick” to Losing Weight?

**T**he post-holiday overweight blues may have inspired you to jump on the fad diet bandwagon. But, despite the popularity of fad diets that severely restrict or eliminate entire food groups, studies show that eating fewer calories and burning more calories is the most effective way of achieving your weight goal. This news is not new, despite those challenging it - Ben Franklin was quoted as saying “To lengthen thy life, lessen thy meals.”

There are many ways of eating fewer calories and burning more calories. The “trick” is finding a way that works for you long-term. Losing 10 pounds now and regaining it a few months later doesn't benefit your health, your wallet, or your self-esteem.

We now live in a society that promotes overeating and very sedentary behavior. We have more technology to move less and “save”

ourselves energy. Food is more convenient and readily available than ever. The key is to find ways to offset these negative influences by ignoring the signals and changing our own environment. Here are some changes you can make in your environment that can help you eat less, expend more calories and adopt a healthier lifestyle.

- ***Change the way you shop.*** Plan meals ahead and shop with a list. Buy more fruits and vegetables, whole grains, fish and poultry, and low-fat dairy foods. Skip the high-fat, unhealthy snacks that offer too much of a temptation between meals. These might be chips, cookies, high fat cheese, candy, or ice-cream. Replace them with convenient healthy alternatives such as baby carrots, low-fat, sugar-free yogurt, or apples.
- ***Change how you spend your leisure time.*** Take a walk before or after dinner instead of watching TV or surfing the web. Join a health club or take dance lessons. Plan outings with family or friends that involve physical activity like hiking, walking through a museum, or riding bikes.
- ***Change where you eat.*** Plan ahead where you will eat when you're not dining at home. Choose restaurants that offer some healthy options that you

---

like. Try to eat more often at home and less frequently at pizza and fast-food restaurants. When at home, eat only at the table, not while on the phone, at the computer, or in front of the TV. We often eat unconsciously while doing other tasks, even when we're not hungry.

- ***Change the amount you eat.*** Many of us mindlessly eat and drink until our plate is empty. The cue that we are finished eating is that our food is gone. Studies show that the bigger the plate or glass, the more we'll eat. So, when you're at home, choose smaller plates. Prepare your plate in the kitchen, put the extra food away, and sit at the table to eat. Train yourself to avoid second helpings. Most portions at restaurants are much larger than we need, so take half of your meal home in a doggie bag.
- ***Choose to socialize with supportive friends.*** If you have trouble maintaining healthy eating and lifestyle habits because of the negative influence of others, spend more time with those who are more supportive of a healthy lifestyle. People with similar goals such as members of a diabetes support group, walking club, or

weight loss group, are likely to be more supportive.

Despite the constant messages to overeat and move less, you have choices. Remember that there is no "trick" or easy solution to losing weight. By making some changes in your environment, you can make it easier to make choices that promote a healthy lifestyle.

**"To Lengthen Thy Life,  
Lessen Thy Meals"  
-Ben Franklin**

---

## Diabetes EXPO Atlanta

**T**he annual Diabetes Expo Atlanta will be held at the Cobb Galleria Centre at 2 Galleria Parkway in Atlanta on January 29, 2005 from 9:00 AM to 4:00 PM. It includes lectures and workshops, exercise and cooking demonstrations, health screenings, and the latest products and services on diabetes. For more information, call the American Diabetes Association at 1-888-DIABETES.

## Recipe Corner

### Chicken Chili

1 tablespoon canola oil	1 15 1/2-oz. can pinto beans, rinsed and drained
1 onion, chopped	1 4-oz. can chopped jalapeño peppers, drained (or less as desired)
1 clove garlic, crushed	1 tablespoon chili powder
3 cups finely chopped cooked chicken	1 tablespoon ground cumin
4 cups low-sodium chicken broth	Freshly ground pepper
1 28-ounce can no-salt-added crushed tomatoes	
1 15-oz. can black beans, rinsed and drained	

Over medium-high heat, heat the oil in a large pot. Add onion and cook until limp, about 5 minutes. Add garlic and cook, stirring, 1 minute. Add all remaining ingredients and bring to a boil. Reduce heat and simmer, stirring occasionally, until thickened (approximately 50-60 minutes).

Makes 10 servings

Carbohydrate choices: 1 1/2

Exchanges: 1 starch, 2 lean meat, 1 vegetable

Calories: 236    Carbohydrate: 24 grams    Fat: 4 grams    Sodium: 605 milligrams  
Fiber: 3 grams    Cholesterol: 44 milligrams

Recipe used with permission from The American Diabetes Association's *The Great Chicken Cookbook for People with Diabetes*. 1999.

### Suggested Menu

<u>Menu Item</u>	<u>Exchanges</u>	<u>Carbohydrate</u>
1 serving <i>Chicken Chili</i> (1/10 of recipe)*	1 starch, 2 lean meat, 1 veg	24 grams
6 Saltine crackers with unsalted tops	1 starch	15 grams
Tossed green salad	free	†
1 tablespoon raspberry vinaigrette dressing	1 fat	†
1/2 grapefruit	1 fruit	15 grams

\* This issue's featured recipe                      † insignificant

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

#### Contributors:

Janine Freeman, RD, LD, CDE, Extension Nutrition Specialist, Principle Writer and Editor

#### Editorial Board:

Jenny Grimm, RN, MSN, CDE, Medical College of Georgia

Ian C. Herskowitz, MD, CDE, FACE, Medical College of Georgia

---

**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

---

Official Business

*Diabetes Life Lines*: Your current issue enclosed