
Diabetes Life Lines



A newsletter from your County Extension Office
Vol. 19 • No.5 • Fall 2005

Do You Have Low T?

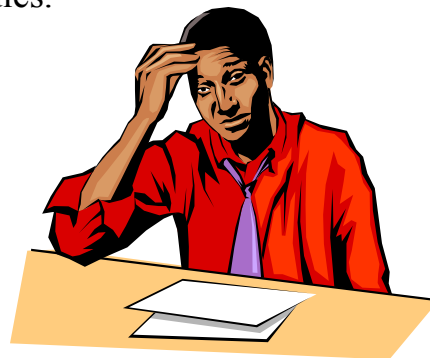
Low testosterone levels in men were once thought to be rare. But this may not be true in men with diabetes as they get older. A simple blood test by your health care provider can check testosterone levels. To see if you might need a testosterone test, answer the following questions:

1. Do you have less interest in sex?
2. Do you seem to have less energy?
3. Do you not feel as strong or have as much endurance?
4. Have you lost height?
5. Do you enjoy life less?
6. Are you often sad or grumpy?

7. Are your erections less strong?
8. Have you noticed that you are less able to play sports?
9. Do you fall asleep after dinner?
10. Is your work performance going down?

If you said yes, to 1 or 7, or yes to three or more of the other questions, you may need your testosterone level checked.

If your level is low, it can be treated with testosterone therapy - usually with a patch or gel that is applied daily. Within a short time, you will feel better and begin to enjoy sexual activity more. You will have a better mood and greater energy. Your bones may also become more dense. Your body will also use insulin better and it may be easier to control your diabetes. Many men also notice that they lose fat and get leaner, especially around their middles.



How to Get Confident In Your Ability to Be Active

People who are confident about their ability to be active, exercise more. This confidence is called *self-efficacy*. Four things promote self-efficacy:

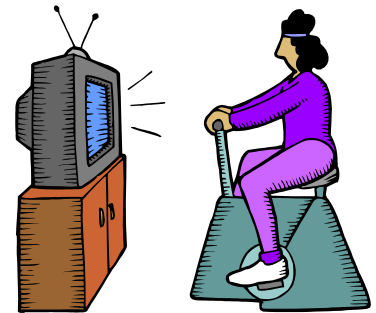
1. Past success at being active;
2. Seeing others like yourself that are physically active;
3. Being convinced that being active will be good for you;
4. Having more positive, and fewer negative, effects from being active.

To promote success, set a modest goal for getting more active. Your medical team may be able to help. Then work on the goal for a few days. You may be more likely to stick to it if you exercise with a partner. Use a pedometer for immediate feedback if you choose to walk. Also keep a written record so you can see progress over time. Often we don't give ourselves credit for our efforts. A written record helps us see improvement more clearly.

Get inspired by others. Everyone knows someone who went from a couch potato to a regular exerciser. Talk to them about how they

got started and kept on going. Everyone who exercises has days when they want to quit. Ask how they keep motivated and try some of their ideas when you want to stop. These friends may be willing to work out with you if you ask them.

Physical activity can improve our blood glucose, help with weight control, lower blood pressure, reduce risk for heart disease, cancer and stroke, improve our mood, and make us look better. We know it, but we need to hear it over and over. In



particular, we need to hear that it is happening to us. Some people get encouragement from a personal trainer, others get it from a spouse, while others get it from a support group or friends. Don't be afraid to ask for that help. That's why even top athletes have coaches.

Make sure the positive effects of being active outweigh the negatives. It's easy to get discouraged by aches and pains when we first get started. You may even dread exercise because all you can recall are past failures.

Before you get started, take some deep breaths. Tense and release

your muscles one at a time to relax. Don't do too much right away and increase your efforts gradually. Just walking up and down the driveway may be enough at first. You may even want to prepare for any discomfort by having ice packs in the freezer, arranging for a massage or just planning for a nice warm bath afterward.

Also discuss with your medical team what to do when you're tempted to stop exercising. You may need rewards as you meet your goals, alternative activities so you don't get bored, or regular contact with the medical team so you have to report to someone. If you don't plan for when you want to quit, you will not be prepared when it happens.

Everyone has self-efficacy about something. All you need to do is to expand this self-confidence to your ability to be more physically active.

Have Diabetes? Plan Your Pregnancy!

Two thirds of pregnancies in women with diabetes are unplanned. The greatest risks for birth defects due to high blood glucose levels occur during the first few weeks of pregnancy - when most women don't even know they are pregnant. A woman needs to work with her

medical team to get good diabetes control **before** she conceives. Until she is in good control, she needs reliable birth control.

To begin, she will need a complete check-up including an A1C test, a 24-hour urine test for kidney function and a dilated eye exam. The A1C test will show her blood glucose control over the last 2-3 months. If it is high, she will need to improve her food choices, adjust her medicine and increase her physical activity to lower her glucose levels. The kidney and eye exams are important since pregnancy can worsen diabetic kidney and eye disease.

Women on diabetes pills will need to switch to insulin since these pills are not recommended during pregnancy. Some women on insulin may want to switch to an insulin pump since it can make blood glucose control easier. Early in pregnancy, insulin needs may be very low, but by the end of pregnancy they often double. A pump, or at least frequent insulin injections, will allow for flexible dosing based on blood glucose readings.



A woman will need to check her blood glucose at least four to six times a day during pregnancy.

Checking before and after meals is the only way to really see whether diabetes treatment is working. This is a good habit to begin before becoming pregnant. Pregnancy makes low blood glucose and high ketone levels more likely. Both can harm mom and baby. Checking blood glucose and testing for ketones regularly during pregnancy will find problems early before they become serious.

Blood glucose goals are lower during pregnancy. Each woman's doctor will recommend a range before and after meals that is best for her.

A woman may also want to discuss her plans for pregnancy with a social worker or psychologist. Few women realize how much stress a pregnancy can cause. A few things to consider are:

1. How to handle frequent medical check-ups that may take away time from job and family;
2. What to do if problems occur and she needs to go to the hospital;
3. Where to get the extra money to pay for her care and the needs of the baby;
4. How her relationship with the baby's father and her friends and family will change during and after the pregnancy.

Planning for these things ahead of time can make them easier to handle if they do occur.

Pregnancy is great if one is prepared for it. Diabetes makes planning for a baby even more important. Some help from the medical team before hand, rather than a lot of help after the fact, will help prevent problems no one wants to face.

Questions to Ask Before Taking a Supplement

Nutritional supplements look harmless, but they are not risk free. Before taking a supplement of any kind, ask your health care professional the following questions:

- Is there reliable research to show its benefits?
- Is it safe for me?
- Will it interact with my other medicines?
- How much should I take and how often?
- Are there any side effects?
- Is there any situation where I should stop taking it?
- How will I tell if it is helping?
- Is the cost worth the benefits?

Recipe Corner

Tomato Zucchini Bake

3 medium zucchini, thinly sliced
4 medium ripe tomatoes, peeled
and thinly sliced
 $\frac{3}{4}$ cup grated Parmesan cheese,
1 tablespoons olive oil

2 cloves garlic, minced (useless if desired)
1 teaspoon dried thyme
 $\frac{1}{4}$ teaspoon salt (optional)
 $\frac{1}{4}$ teaspoon pepper, divided

1. Preheat oven to 400° F. In 8-inch square baking dish, arrange half of zucchini slices. Top with half of tomato slices. Sprinkle with $\frac{1}{4}$ cup cheese.
2. Top with remaining zucchini and tomato. Sprinkle garlic, thyme, salt and pepper over tomato; drizzle with olive oil. Sprinkle remaining $\frac{1}{2}$ cup cheese over top. Bake for 20 to 25 minutes. **Makes 6 servings.**

Nutritional analysis:

Calories: 86 Carbohydrates: 5 grams Fat: 6 grams
Sodium: 291 milligrams with added salt; 194 milligrams without added salt
Cholesterol: 8 milligrams Protein: 5 grams
Exchanges: 1 vegetable and 1 medium fat meat

Suggested Menu

<u>Menu Item</u>	<u>Exchanges</u>	<u>Carbohydrate</u>
3 ounces grilled chicken breast	3 very lean meats	0 grams
$\frac{1}{2}$ cup tomato zucchini bake*	1 vegetable and 1 medium fat meat	5 grams
$\frac{1}{3}$ cup brown rice	1 starch	15 grams
1 small Italian roll	1 starch	15 grams
1 pear	1 fruit	15 grams

**This month's featured recipe*

Note: Portions may need to be adjusted to fit your meal plan.

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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

Connie Crawley, Principal Writer

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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.

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