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# Diabetes Life Lines



A newsletter from your County Extension Office  
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## Painful Diabetic Neuropathy

Painful diabetic neuropathy (PDN) is a common complication of diabetes. If you have PDN, you may have:

- a burning sensation
- muscle cramps
- lancinating pain
- pain like walking on marbles
- pain in response to touch that would normally not be painful
- loss of balance
- tingling and numbness.

There is no cure for PDN, but symptoms can be managed. The best treatment is excellent blood glucose control. Your A1C, which shows your average blood glucose over the last three months, should be less than 7%. Many people with poorly controlled

diabetes notice their pain improves once their A1C goes down.

You may be surprised by some medicines used for PDN. People on antidepressants and anticonvulsants for depression and seizures found that they also relieved PDN pain. These drugs do have side effects so you and your doctor will have to decide whether they are right for you.

Topical treatments are also available. Many contain capsaicin, a substance that makes peppers hot. Be careful to use capsaicin creams only on the painful areas, and wash your hands thoroughly after use. Burning and skin irritation may occur, but these creams seem to work as well as antidepressants.

Acupuncture is part of ancient Chinese medicine. In the United States, it is a complimentary or alternative therapy for many diseases and conditions. Several studies have shown acupuncture to relieve PDN pain. Your podiatrist or primary care physician may refer you to a licensed acupuncturist for this treatment.



Magnet therapy is another complimentary or alternative treatment for PDN. In theory, the magnetic field created by magnets helps relieve pain. As with all complimentary and alternative therapies, talk to your doctor before trying this treatment and do not stop any prescribed medications.

supply of diabetes medicine while the American Association of Endocrinologists suggests a 30-day supply of all medicines including those for other health conditions you might have. Also have prescription bottles or numbers so you can replace medicine at a pharmacy if needed.

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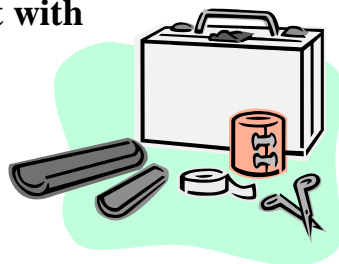
## Preparing Before the Storm

We never think about disasters or storms until we hear the warnings on the TV or radio. However now is the time to prepare for these emergencies while you are not rushed or worried.



The American Association of Clinical Endocrinologists (<http://www.aace.com>) and the American Diabetes Association (<http://diabetes.org/type-2-diabetes/travel/emergency-tips.jsp>) have guidelines on their Web sites to help you get ready.

**Prepare a waterproof, insulated emergency kit with essential diabetes medications and supplies.** The American Diabetes Association recommends a three-day



**If you use insulin, have a cooler with at least four refreezable gel packs for storing insulin.** Also have empty plastic bottles for storing used lancets, needles and syringes. If you use an insulin pump, have extra supplies and batteries. Also be prepared to use syringes if needed.

**Pack blood testing supplies and a glucose meter with two extra batteries.** Include a carbohydrate source for treating low blood glucose reactions and three days of water and 1-2 days of non-perishable food. You may also need a glucagon kit if your doctor recommends it. Also add other first aid supplies like bandages, cotton swabs, dressings and ointments or creams to treat cuts or other wounds.

**Include a list of all your medications and their dosages that you are on now and in the past and a letter from your health care provider detailing your medical treatment.** Also keep a notepad to record your blood glucose readings and to write

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down symptoms of any medical problems. Change the supplies in this kit at least twice a year.

Besides preparing the kit,

- **Wear a medical identification necklace or bracelet** that shows that you have diabetes.
- **Have sturdy shoes** to protect your feet so you will never go barefoot. You may even want some water shoes in your kit in case you must shower away from home or have to wade in water. You will want to check your feet daily for any sign of infection or wounds.
- **Pack 2-3 days of extra clothing.**
- **Have your immunizations up to date**, especially your tetanus shot.
- **Keep your cell phone charged** with extra batteries on hand and make sure every family member has one.
- **Decide on a place where your family members will meet** if you get separated.

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## Weight Loss Plans and Cardiovascular Risk

A study in the *Journal of the American Dietetic Association* looked at the most popular weight control programs along with the menus recommended in the 2005 Dietary

Guidelines to determine which were more likely to reduce risk for cardiovascular disease. The study measured the dietary quality of these eating plans using the Alternative Healthy Eating Index. This index gives a higher score to a diet based on the:

- Greater number of vegetables and fruits included
- Increased use of soy foods and nuts
- Reduced use of red meat
- High intake of cereals especially whole grains
- Higher fiber content
- Lower trans fat amount
- Higher intake of polyunsaturated fats
- Moderate use of alcohol
- Longer use of multivitamin supplements

The weight control diets evaluated were the Ornish Plan, The New Glucose Revolution, two Weight Watcher plans (the higher carbohydrate and higher protein versions), two Atkins Plans at 45 grams and 100 grams of carbohydrate, Phases 2 and 3 of the South Beach Diet and the Zone Diet.



After the analysis, the Ornish Plan had the highest score indicating that it was the most likely to promote cardiovascular health. Next was the Weight Watcher Plan with the higher carbohydrate content. Then followed the New Glucose Revolution, South Beach/Phase 2, the 2005 Dietary Guidelines (MyPyramid), Weight Watchers high protein plan, the Atkins Plan at 100 grams of carbohydrate, the South Beach Phase 3 and finally the Atkins Plan with 45 grams of carbohydrate.

This study did assume that a person would perfectly adhere to each meal plan and only seven days of menus were analyzed. But these scores are interesting since many people with diabetes need to lose weight and cardiovascular disease is one of the main complications of diabetes. Of course, before you try any of these diets, you should consult with a registered dietitian and your doctor to make sure it is right for you.

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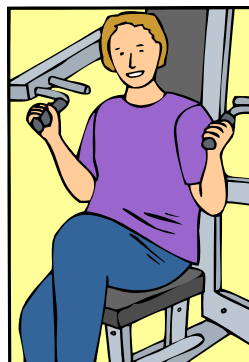
## Winter Time is Still Exercise Time

Many of us hibernate during the winter months. Even if we are active the rest of the year, those shorter days seem to turn us into

couch potatoes. Here in the South, we really have no excuse for “retreating into our caves.” Very few days are that cold and often we have sunny, pleasant afternoons even if the mornings are chilly.

Of course some of us may leave home for work before the sun rises or return after it sets. That makes it hard to exercise, but if you want to stay fit, think about how you can safely be active now.

First, do something whenever you can during the day. Many people walk for 15-20 minutes during each work break. If you walk briskly, you can do a mile in that amount of time. Do that three times a day and you’ll have walked three miles! If the weather is bad, walk up and down the stairs a few times or march in place.



You may want to wear a pedometer to count your steps. About 2,000 steps equal one mile. You will be surprised how quickly the steps add up if you get up and move around more.

Stretching and resistance training are weather-proof. You can do them anywhere, anytime. Buy a set of free weights with a special stand that can

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be hidden under your desk or set next to your easy chair. Each time you make a phone call, check your email or watch a commercial, do a few lifts. Also there are special rubber bands you can purchase for resistance training that you can store anywhere.

Aerobic training can be a little more challenging. Of course you can join a gym, use exercise equipment at home or walk at a mall. For aerobic activity outside, however, dress one layer lighter than you would if you were outside without being active. If it is cold, wear gloves or mittens on your hands. Definitely wear a hat because you lose 40% of your body heat through your head and neck. Don't forget to drink water! Even though it is cooler weather, you may still be sweating while you work out.



If you are traveling, walk around the airport, train or bus station whenever you are waiting. If you drive, plan stops at public parks, rest areas and even the parking lots of restaurants and shopping centers so you can get at least a 10 minute walk every two hours.

Unfortunately, winter is when many of us get ill. If you are very sick for several days, ask your doctor about when you should get active again. Check your blood glucose more often for awhile and do less than usual until you feel back to normal.

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**Contributors:**

Connie Crawley, MS, RD, LD, Extension Nutrition and Health Specialist, Writer and Editor

Sarah Patterson, UGA Dietetic Intern

**Editorial Board:**

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

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

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## Recipe Corner

### **Peking Beans and Carrots** (Adapted from [www.birdseye.com](http://www.birdseye.com))

1 tablespoon olive oil                      1 ½ teaspoons rice wine vinegar  
1 tablespoon granulated                  1 cup frozen green beans  
sugar substitute                              1 cup frozen carrots  
1/4 teaspoon celery seed  
Salt and pepper to taste

1. In the saucepan, combine the oil, artificial sweetener, celery seed and other seasonings as desired. Heat on low for about 1 minute stirring constantly. Remove from heat and stir in vinegar. Put in small storage container and refrigerate one hour to blend flavors.
2. In clean saucepan, cook the vegetables according to package directions. Pour sauce over vegetables and mix well.
3. Transfer to serving dish.

#### **4 servings**

Calories: 73    Carbohydrate: 5 grams    Fat: 5 grams    Protein: 1 gram  
Sodium (with no added salt): 154 milligrams    Fiber: 1 gram  
Cholesterol: 0 milligrams

Exchanges: 1 vegetable, 1 fat

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The University of Georgia

## Cooperative Extension

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

Connie Crawley, Principal Writer

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Scott Angle, Dean and Director

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and Environmental Sciences  
Athens, GA 30602

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*Diabetes Life Lines*: Your current issue enclosed