



Diabetes Life Lines

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What Makes Americans Fat?

An article in the June 23, 2011 *New England Journal of Medicine* reported that certain foods increase risk for becoming overweight and others decrease risk.

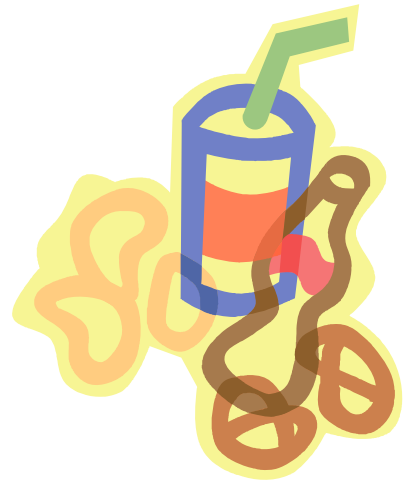
Data was gathered from the first Nurses' Health Study, the Nurses' Health Study II and the Health Professionals Follow-Up Study. Initially, the people studied were normal weight, but over a 20 year period, the average person gained almost 17 pounds. The researchers found that weight gain was linked with increased intakes of potato chips, other types of potatoes like French fries, sugary drinks, red meat and processed meats. Also associated to a lesser degree was increased consumption of butter, juice, sweets, desserts, and refined grains like white flour. Foods found to prevent weight gain were yogurt, nuts, fruits, whole grains, vegetables and milk.

Drinking more alcohol and watching more TV also resulted in weight gain, as did sleeping less than 6 hours per night. If a person quit smoking, they gained about five pounds, but starting to smoke

did not produce weight loss.

As expected, those who became more active gained nearly 2 pounds less over a 4 year period than those who remained inactive.

Researchers are not sure why yogurt, nuts, fruit, whole grains, milk and vegetables were protective. It may be the fiber from the nuts, fruits, whole grains and vegetables, the beneficial bacteria in the yogurt or the feeling of fullness that occurs when we drink milk with our meals. All of these factors may contribute, but it could be that people who eat these foods just have an overall healthier lifestyle.



Tradjenta: A Newly Approved Diabetes Medication

In May of 2011 the Food and Drug Administration approved Tradjenta (linagliptin) to help control blood sugar in adults with type 2 diabetes. Tradjenta is a tablet which can be taken as a 5 milligram dose once a day (at any time of day) with or without food. It can be used alone or in combination with other oral diabetes medicines.

Tradjenta is the third drug in the class of drugs called dipeptidyl peptidase-4 inhibitors. It can reduce A1C levels by 0.6 to 0.9%. Other drugs in this class include Onglyza (saxagliptin) and Januvia (sitagliptin). These drugs lower blood sugar by increasing insulin release and reducing levels of glucagon. (Glucagon is a hormone that increases blood glucose between meals.) Tradjenta has an advantage over Januvia and Onglyza because it does not require a different dose for patients with kidney disease.

In clinical trials, the most common side effects of Tradjenta were runny nose and sore throat. Low blood sugar and weight gain are unlikely when Tradjenta is used alone. However, low blood sugar can occur if Tradjenta is combined with a sulfonylurea, so the sulfonylurea dose may need to be reduced.

Certain medicines can interact with Tradjenta to reduce its effectiveness. Therefore, tell all your doctors about all of your current medicines (including over-the-counter and herbal or natural products). This will help them to identify and manage any possible drug interactions.

Some people may not be the best candidates for therapy with Tradjenta. Tradjenta has not been adequately studied in pregnant women and should be used only if clearly required. No one knows if Tradjenta passes into human milk and nursing mothers may wish to use other drugs for diabetes management. Tradjenta has not been shown to be safe and effective in patients under the age of 18 and it will not work in anyone with type 1 diabetes.

As with other diabetic medicines, continue to follow the dietary and lifestyle recommendations and the glucose monitoring instructions of your doctor while using Tradjenta. Otherwise you may not see all the benefits you expect from this new drug.



Why Eat Fiber?

The 2010 Dietary Guidelines state that diets higher in fiber can reduce risk for heart disease, stroke and some cancers. Fiber may also help with weight control because foods higher in fiber tend to be lower in fat and calories. Foods naturally containing fiber also have more vitamins and minerals that may protect us from disease.



Fiber helps to prevent cardiovascular disease by lowering blood pressure, decreasing cholesterol and triglyceride levels and reducing inflammation in our bodies. Fiber assists with weight control by reducing the energy density of our food, slowing how fast we eat, making us feel full and reducing how many calories we absorb. Fiber may also help to control diabetes by slowing absorption of blood glucose and making us more sensitive to insulin.



Fiber is normally found in whole grains, vegetables, fruits and nuts. Surprisingly these foods typically only contain about 2-3 grams of fiber per serving.

However cooked dried beans and peas have 4-9 grams per ½ cup serving. Some cereals also are higher in fiber because extra fiber has been added to them.

Many processed foods naturally low in fiber now have fiber added to them. These fibers called functional or isolated fibers may be purified from a plant or be totally man-made. These processed foods may not be as nutritious as foods naturally containing fiber. The fiber may be added just to make you think they are healthier.

We need about 14 grams of fiber per 1000 calories we consume. For the average woman that is about 25 grams of fiber per

day and for a man it is about 38 grams per day. Most people in the United States only get about 15 grams of fiber each day. Believe it or not, most of our fiber comes from white flour and white potatoes. Not because white flour and white potatoes are really high in fiber, but because we eat so much of them.

Some fibers also feed beneficial bacteria in our intestines. These fibers are called prebiotics. Prebiotics help us to be regular, feel more satisfied with our meals and improve our glucose control and insulin sensitivity. When a prebiotic is added to a food, it may need less fat and sugar for moistness and have less of an aftertaste from any artificial sweetener.

The Dietary Guidelines recommend that we get our fiber from food rather than from supplements. So you should get at least half your breads and cereals from whole grains and eat at least 2 ½ cups of vegetables and 2 cups of fruit each day. Dr. James Anderson, an expert on fiber and diabetes, recommends that we eat beans and peas every day if possible. If you enjoy nuts as a fiber source, have a small amount several days a week, but don't go overboard. Nuts have much more fat in them than they have fiber.



MyPlate Catches Up With Diabetes Nutrition Recommendations

For years, diabetes educators have used the Idaho Plate Method to show people how to choose foods to control portions and carbohydrates. The most popular pattern fills half the plate with non-starchy vegetables, a fourth with starch and final fourth with a protein food. On the side are fruit and a cup of non-fat or low fat milk or yogurt.

Similarly the new U.S.D.A. MyPlate icon fills one-fourth of the plate with a protein food and places the dairy food on the side. What differs is that half the plate has vegetables and fruits and a new section is called “Grains.”

The Plate Method groups starchy vegetables like potatoes and corn with the grains since both have similar amounts of carbohydrate. In contrast, MyPlate combines starchy vegetables with non-starchy vegetables and separates the grains because they contain different vitamins and minerals. Carbohydrate is less important.

Both Plates recommend we fill up on vegetables to promote good health, but encourage other food groups for balance. The key is portion control.

The following health messages with MyPlate also fit nicely with the diabetes nutrition guidelines:

Balancing Calories

- Enjoy your food, but eat less.
- Avoid oversized portions.

Foods to Increase

- Make half your plate fruits and vegetables.
- Make at least half your grains whole grains.
- Switch to fat-free or low-fat (1%) milk.

Foods to Reduce

- Compare sodium in foods like soup, bread and frozen meals – and choose foods with the lower numbers.
- Drink water instead of sugar drinks.



Idaho Plate Method



Recipe Corner

Black Bean Burgers

1 -15 ounce can unsalted black beans or regular canned black beans, rinsed and drained
¼ cup low cholesterol egg substitute
¼ cup whole wheat bread crumbs
1/3 cup red onion, finely chopped
¼ cup green or yellow bell pepper, finely chopped
1 tablespoon canned green chili pepper, chopped
Lettuce and tomato to garnish

1 teaspoon ground cumin
1 tablespoon toasted sesame seeds
1 tablespoon toasted unsalted sunflower seeds
Pepper to taste
2 tablespoons olive oil
4 slices, low sodium reduced fat Swiss cheese
4 whole wheat hamburger buns

1. In a medium size mixing bowl, lightly mash the drained beans with a fork until you get a coarse texture.
2. Add the egg substitute and bread crumbs. Mix well. Then add the onion, bell pepper, cumin, sesame seed and sunflower seeds. Season with pepper.
3. Make four patties. Heat oil in non-stick skillet over medium heat. Add the patties and cook on one side until brown. Then flip with spatula. Top each patty with a Swiss cheese slice.
4. When the second side is brown and cheese slightly melted, remove each patty from the pan and place on one side of the whole wheat bun. Top the other side of the bun with the lettuce and tomato.

Adapted from a recipe from www.swbeans.com

Nutrition Analysis:

Calories: 490 Carbohydrate: 60 grams
Fat: 19 grams Saturated Fat: 5 grams
Sodium: 720 milligrams

Protein: 26 grams
Cholesterol: 20 milligrams
Fiber: 16 grams

Made with unsalted black beans:

Sodium: 552 milligrams

Exchanges: 3 starches, 3 lean meats, 1 fat

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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 systems, 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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