
Diabetes Life Lines



A newsletter from your county Extension office

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High Blood Pressure and Diabetes Go Hand In Hand

You already know the importance of keeping your blood glucose in good control to help prevent the complications of diabetes. But, did you know that high blood pressure can also increase your risk of stroke, heart disease, eye disease (retinopathy), kidney disease (nephropathy) and possibly damage to your nerve endings (neuropathy)?

High blood pressure and diabetes often go hand in hand. The good news is that we now have the results of many studies showing that being more aggressive in treating high blood pressure can reduce your risk of diabetes-related

complications.

This past year new blood pressure goals for people with diabetes were set based on this new evidence. Most people with diabetes should try to keep their blood pressure below 130/80.

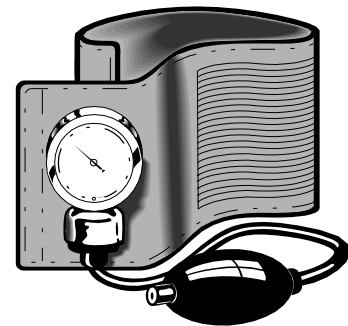
You should have your blood pressure checked at every visit to

Blood Pressure Goal for Diabetes
Less than 130/80

your diabetes health care team. If either the upper number (systolic) or the lower number (diastolic) is above the goal, you should have it rechecked on another day to confirm that you have high blood pressure.

If your blood pressure is higher than 130/80, but less than 140/90, your doctor may recommend that you begin by making changes in what you eat and physical

activity to control your blood pressure. Medication is frequently



needed if your blood pressure is above 140/90. If your blood pressure is above the goal,



there are several things that can be done to lower it.

C Eat less salt. Several studies have shown that eating foods with less sodium and using less added salt can lower blood pressure. One study used a diet called the DASH diet to lower blood pressure. The diet included 8-10 servings of fruits and vegetables every day, low-fat dairy products, and was low in fat and sodium. Keep in mind that even though you may not add salt to food, most of the sodium you get comes from packaged foods and fast foods. Read labels and try to use foods with less than 400 milligrams of sodium per serving or less than 800 milligrams of sodium per entree or convenience meal. For more information on the DASH diet, go to www.nhlbi.nih.gov and select health information, then heart and vascular disease.

C Lose weight if overweight. You don't have to lose 50 pounds to lower your blood pressure. Relatively small amounts of weight loss such as 10 pounds can lower your blood pressure as well as improve your blood glucose and cholesterol.

C Increase physical activity. Moderately-intense physical activity such as brisk walking for 30-45 minutes most days of the week can

lower blood pressure. If you're inactive, start by taking 5-10 minute walks several times a day until you can comfortably walk briskly for 30-45 minutes. Make it a goal to do some kind of physical activity every day.

C Medication. People with diabetes often require three or more types of medication to keep their blood pressure less than 130/80. If you have experienced side effects with one type of medication, don't give up. There are many types of blood pressure medications that your doctor can prescribe for you that you can more easily tolerate.

Remember that you are the one in control of your diabetes. Every day you make choices about how you eat, how active you're going to be, how often you're going to stick your finger, when you take your medication, and many other choices that affect your health. Armed with the knowledge that good blood pressure control as well as good blood glucose control prevent diabetes complications, it's up to you to take the steps that lead to a healthier life.



Generic Form of Glucophage Approved

You will soon be able to buy a generic form of the diabetes medication metformin (Glucophage). Eleven companies were recently approved by the Federal Drug Administration (FDA) to market the generic form of the most-prescribed diabetes medication in the US. Metformin lowers blood glucose in people with type 2 diabetes primarily by reducing production of glucose from the liver.

The generic form of metformin is expected to save you 80% of what you pay for the name brand Glucophage. Two companies plan to release the drug immediately.

Targeting Trans Fats - The Hidden Fats

The latest nutrition recommendations for people with diabetes suggest eating fewer trans fats, also known as trans-fatty acids. That's good advice, apparently, because this type of fat has the same effect as the infamous saturated fats - the ones that raise the level of LDL cholesterol in the blood. High levels of LDL cholesterol are definitely not desirable because they tend to clog arteries and increase the risk of heart disease. In addition, trans fats also reduce

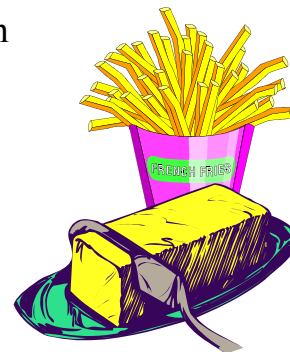
HDL cholesterol, the “good” cholesterol. But, how do you know if you're eating trans fats? Trans fats are currently not listed on food labels.

Trans fats are formed when vegetable oils are processed and made more solid, such as in stick margarines and foods fried in these shortenings (hydrogenated oils). Trans fats are also found in many bakery, prepared and processed foods. In fact, most of the trans fats that Americans eat are “hidden” fats that come from carbohydrate foods that we do not typically associate with fat such as:

- C bakery foods like cakes, doughnuts, cookies, muffins, croissants
- C breads
- C fast foods like french fries, hamburgers, fried chicken and fish
- C snack foods such as crackers, chips, popcorn, granola bars

A smaller amount of the trans fats that we typically eat come from stick margarine and shortening, dairy products, meats, cereals, and candy.

Because nutrition experts have been warning the public about the negative effects of saturated fats, many food manufacturers have shifted away from



using saturated fats like animal fats and tropical oils (coconut oil and palm oil) in foods. Now, many manufacturers are replacing these fats with trans fats.

The best advice to reduce your intake of trans fats is to:

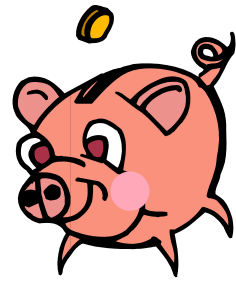
- C eat less total fat
- C choose liquid vegetable oils such as olive or canola oil when possible
- C use liquid or soft margarine instead of stick margarine or butter
- C purchase low-fat bread, bakery goods, and snack foods that contain less than 3 grams of fat per serving
- C limit commercially-prepared fried foods

Medicare Now Covers Nutrition Therapy

Nutrition has long been known to be one of the most important components of diabetes management. Yet, many insurance plans have not covered visits to a registered dietitian, known as medical nutrition therapy, for diabetes except under certain conditions. Now, under a new benefit that went into effect January 1, Medicare recipients with diabetes are eligible for medical nutrition therapy. It is hoped that this move will also be a step toward coverage by private insurance plans.

Traditionally, insurance plans have

covered expensive procedures that resulted from diabetes, but not many of the less costly preventive services such as nutrition therapy. The results of a study by the Institute of Medicine that showed that medical nutrition therapy provided by registered dietitians was cost-effective and improved the quality of life helped convince Congress of the important role of nutrition in diabetes. Congress then passed legislation in December of 2000 that provided coverage for Medicare recipients with diabetes or kidney disease.



Individual visits to a registered dietitian who becomes a provider of Medicare services will be limited to a set number of visits per year, which is still pending. Also pending is how this benefit will mesh with the already existing coverage for diabetes self management training, which includes some medical nutrition therapy.

Whole Grain Angel Biscuits

- 2 cups whole wheat flour
- 2 cups all purpose flour
- 2 tablespoons sugar
- 1 package quick rise yeast
- ½ teaspoon baking powder
- 1/4 teaspoon salt
- 6 tablespoons canola oil
- 3 tablespoons powdered buttermilk
- 1 cup warm water (100-110 degrees)

Preheat oven to 400E.

1. Mix together in a large bowl flour, sugar, yeast, baking powder and salt.
2. Sprinkle oil evenly over dry ingredients. Cut in with pastry blender or two knives until mixture resembles course crumbs.
3. Mix buttermilk powder with water. Stir well. Add to other ingredients and blend well.
4. Move dough to floured surface. Knead 10-15 times. Form into a ball.
5. Roll dough into 3/4 inch thickness. Cut into 2 ½-inch circles. Place on ungreased baking sheet. Cover and let rise in warm, draft-free location until double in size (about 15-20 minutes).
6. Bake at 400 degrees for 15 minutes or until done.
7. Remove from baking sheet and serve warm with reduced-sugar jam.

Makes 12 servings Serving size: 1 biscuit Exchange: 1 ½ starches, 1 fat Calories 166 Fat 7 grams
 Carbohydrate 22 grams Cholesterol 1 milligram Sodium 76 milligrams Fiber 1.6 grams

Suggested Breakfast Menu

<u>Menu Item</u>	<u>Exchanges</u>	<u>Carbohydrate</u>
½ cup mixed oranges, grapefruit, and strawberries	1 fruit	15 grams
1 <i>Whole Grain Angel Biscuit</i> *	1 ½ starch, 1 fat	22 grams
1 Tbs. reduced-sugar jam	½ fruit	7 grams
1 cup skim milk	1 milk	12 grams

* *This month's featured recipe*

Note: Portions may need to be adjusted for 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

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