



Diabetes Life Lines

Sticking to Your New Year’s Resolutions

The New Year is a great time to set goals for yourself. Many people’s resolutions involve improving their health through eating healthier or exercising more. However, sticking to your New Year’s resolution is sometimes hard. In fact, by now, most people have quit their New Year’s resolutions. With the right mindset and planning, you can make them stick!

Healthy Eating

Post-holiday eating habits can be tough to break at first, but there are ways to make it easier. The Centers for Disease Control and Prevention (CDC) suggests you use a **reflect, replace, and reinforce** method. First, **reflect** on your eating habits. Write down what you eat and when. Then, decide which habits you want to change. Second, think about what may trigger you to engage in these behaviors. Avoiding or choosing a healthier response to triggers can help you **replace** the old habit with a new one. Lastly, **reinforce** your new, healthy habits by using healthy rewards like buying yourself new workout socks or reading a book. If you become discouraged, remind yourself of all the benefits you will receive!

Exercise

Exercise is important for everyone, especially for people with diabetes. Think about the reasons you may not exercise as much as you should. The chart below (adapted from the CDC) lists common reasons for not exercising and ideas to address them.

“Exercising is hard.”	Exercising doesn’t have to be difficult to be effective! If you’re not currently active, start by simply walking!
“I don’t have time.”	Planning ahead is key! Look at your schedule and find a few timeslots a week for exercise. Write them down to keep yourself accountable. Also, be active at work or home by taking the stairs, parking further from your building, or sweeping or vacuuming faster than you typically do.
“I don’t enjoy exercising.”	Switch it up! Try new activities or exercises with a friend or just play with your kids, grandkids, or pet.

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“I don’t know anyone who will exercise with me.”	Try joining a club or group. Surround yourself with positive people who enjoy the same activities as you.
“I’m not sure I am capable of being more physically active.”	Consult your doctor. They will tell you which activities are safe and which to avoid. Almost everyone can do some kind of exercise.

Reminders

Here are a couple reminders for when you need a pick-me-up:

- Don’t beat yourself up. A single mistake isn’t the end. Get back on track and keep moving!
- If you’re feeling overwhelmed, pick one new habit to focus on. Once you’ve mastered that, add another.
- Don’t be afraid to ask for support. Talk with a family member or friend about your goals.
- If you feel discouraged after a few weeks, look back at where you started. Think about all the progress you’ve already made.
- Be patient. If you feel like the results are taking too long, remember the immediate benefits you can’t see with your eyes, like better sleep, better mood, and a happier heart!

New Physical Activity Guidelines for Americans, 2018

The Physical Activity Guidelines for Americans tell us the kinds and amounts of exercise we should do. They also provide specific information for certain groups of people, like children, older adults, and those with chronic diseases. In 2018, new Physical Activity Guidelines were updated to include the most recent scientific research on exercise and health.

Key Guidelines for Adults

- Sit less! Some physical activity is always better than none, so get up and move throughout the day.
- Most adults should do at least 150 minutes of moderate-intensity or 75 minutes of vigorous-intensity aerobic (cardio) activity a week. This reduces the risk of chronic conditions, like type 2 diabetes and heart disease.
- For weight loss, do 300 minutes of moderate-intensity or 150 minutes of vigorous-intensity aerobic activity a week. This also lowers your risk for several types of cancer.
- Do at least 2 days of muscle strengthening exercises each week.

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What's New?

- Any exercise is good! Move more and sit less
- exercise reduces risk of at least 8 types of cancer
- exercise reduces risk of falls in older adults
- exercise helps you sleep better and improve mood
- reduces risk of Alzheimer's disease and other dementias
- reduces progression for Type 2

Aerobic activities are often called endurance or cardio. Common examples are running, biking, swimming, and dancing. The “Talk Test” is a quick way to figure out your intensity level. Try to talk while exercising. If you can talk, but cannot sing, you are exercising at moderate-intensity. If you cannot get out more than a few words before pausing for a breath, you are exercising at vigorous intensity. The guidelines encourage spreading your cardio throughout the week. Preferably, over at least 3 days.

What's the Same?

- Amount of exercise recommended
- Include different kinds of exercises (aerobic, muscle strengthening, etc.)
- Exercise helps prevent diseases including heart disease, type 2 diabetes, some cancers, and more

Muscle strengthening activities are important for strong healthy bones and muscles. Strength training will help make everyday tasks easier like standing up from a chair or lifting objects or children. Some examples of strength training are weight lifting, pushups, sit ups, and lunges. When doing these exercises, go until you feel it would be hard to do another repetition. Great resources for exercise can be found at <https://go4life.nia.nih.gov>.

Exercising With Type 2 Diabetes

Exercise reduces the risk of heart disease, the leading cause of death for people with diabetes. It also improves insulin sensitivity, blood sugar control, A1C, blood pressure, blood cholesterol, and BMI! Both cardio (aerobic) and strength training are good for diabetes.

When exercising with diabetes, remember to monitor your blood sugar. Talk with your doctor and make a plan for high or low blood sugar before, during, or after exercise. Your doctor may have other suggestions depending on your condition.

Working Towards an Active Lifestyle

With more exercise comes more health benefits. But where should you start? That depends on how active you are now. The guidelines say to “start low and go slow.” People who do not exercise should gradually increase activity over several weeks. This gradual increase helps prevent injury. Begin with light activity a few days a week and continue to increase the amount and intensity over time. Even just a couple minutes of exercise is good for you. If you are already meeting the suggested 150 minutes a week, see if you can continue to gradually increase the intensity of your exercise and/or the amount.



Protecting Your Feet

The American Podiatric Medical Association (APMA) estimates that about 60-70 percent of people with diabetes have mild to severe forms of diabetic nerve damage called neuropathy. Neuropathy impairs feeling in the feet and hands, including feelings of pain. Severe nerve damage can lead to amputation of the toes, feet, and legs. Sadly, more than 60 percent of all non-traumatic lower limb amputations are related to diabetes, making it the leading cause of non-traumatic lower limb amputations. After one amputation, the risk of another amputation within 3-5 years is as high as 50 percent.

But, amputations are NOT inevitable. Having regular checkups with a podiatrist can help keep your feet healthy and prevent or treat complications. Make it a point to go at least once a year. Doing so can lower your risk for lower limb amputation by 85 percent and lower your risk for hospitalization by 24 percent.



The APMA offers the following ways to protect your feet:

- 1) **Inspect your feet and toes every day.** Check your feet daily for cuts, bruises, and sores. Also note whether your toenails have gotten thicker or discolored. Pay special attention to open sores or wounds that aren't healing properly. Either one could be a diabetic ulcer (learn about what diabetic ulcers are below). If you cannot do this check yourself, ask someone to help you or use a mirror.
- 2) **Don't go barefoot.** Walking around without shoes, even in your house, increases the risk for cuts and infections.
- 3) **Wear shoes that are properly measured and fitted.** Shoes that fit well are important for people with diabetes. The size and shape of your foot can change over time, so remember to get re-measured when buying new shoes.
- 4) **Wear thick, soft socks.** Avoid socks that have seams because they could rub your feet and cause blisters.

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- 5) **Exercise.** Walking is one of the best exercises to help keep your weight down, control your blood sugars, and improve circulation.
- 6) **Wash your feet every day.** Wash your feet in the morning or before bedtime with a mild soap and lukewarm water. Test the water with your elbow to be sure it is not too hot.
- 7) **Do not remove calluses, corns, or warts at home.** Over the counter products to do so can burn your skin and cause further damage.
- 8) **See a podiatrist at least once a year.** Regular checkups with a podiatrist are an important part of keeping your feet healthy.

What is a diabetic ulcer? It is an open sore or wound that typically occurs on the bottom of the foot and is seen in about 15 percent of people with diabetes. Of people who develop a foot ulcer, 6 percent will be put in the hospital because of infection or other problems related to the ulcer. 12-24 percent will need an amputation. If you notice an ulcer during your daily inspections of your feet and toes, immediately go to a podiatrist. Common symptoms of an ulcer include drainage in your sock or redness and swelling of your feet. Foot ulcers must be treated quickly to reduce the risk of infection and amputation. Quick action will also improve foot function and your quality of life, in addition to cutting health care costs. If you want to learn more, go to www.APMA.org.

References:

https://www.cdc.gov/healthyweight/losing_weight/eating_habits.html

https://www.cdc.gov/healthyweight/healthy_eating/meals.html

<https://www.cdc.gov/features/diabetes-physical-activity/index.html>

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Asparagus and Risotto Casserole (Adapted from www.birdseye.com)

Ingredients

1 tablespoon olive oil
2 green onions, minced (white part only)
½ bell pepper, diced
10 ounces frozen chopped spinach, thawed
1 cup Arborio rice
2 cups reduced sodium chicken broth
1 teaspoon, dill (optional)
1 tablespoon fresh parsley or
1 teaspoon dried
Non-stick vegetable oil spray
10 ounces frozen asparagus spears, thawed and stalks cut in half (or approximately 1 bunch (~2 cups) fresh asparagus, stalks cut in half)
1 cup shredded Romano cheese



1. Preheat oven to 400 degrees F.
2. Heat a large frying pan over medium high heat. When heated, add oil, then green onion and bell pepper. Cook stirring constantly until onion is transparent, but not brown.
3. Add spinach and cook until almost all moisture evaporated.
4. Add rice and stir to coat well with oil. Cook about 2 minutes.
5. Add the broth, parsley and dill if desired. Bring to boil, then turn down to simmer for about 6 minutes.
6. Pour into 9x13 inch baking dish sprayed with non-stick spray. Cover with foil and baked for 20 minutes.
7. Remove from oven and carefully stir in the asparagus pieces.
8. Top with cheese. Bake uncovered for another 15 minutes or until cheese is lightly browned.

6 servings if main dish

10 servings if side dish

Main dish serving:

Calories: 217 Carbohydrate: 28 grams Fat: 7 grams Protein: 11 grams
Sodium: 455 milligrams Fiber: 3 grams Cholesterol: 17 milligrams

Side dish serving:

Calories: 130 Carbohydrate: 17 grams Fat: 4 grams Protein: 7 grams
Sodium: 273 milligrams Fiber: 2 grams Cholesterol: 10 milligrams



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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 an Extension Nutrition and Health Specialist and other health professionals from the University of Georgia. This newsletter brings you the latest information on diabetes self-management, healthy recipes and news about important diabetes-related events.

If you would like more information, please contact your local county Extension Office.

Yours truly,

County Extension Agent

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