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**Spotlight on Flexibility and Balance**

Flexibility and balance are two types of exercise that aren’t talked about much. Still, they are very important. Aerobic exercise and strength training are very popular because they can help prevent and manage chronic diseases. Flexibility and balance are important because they improve your quality of life and can help keep you independent as you get older.

Being flexible means that you are able to move your joints around easily without pain. You might think that only athletes need to be flexible, but this is not true. You use flexibility all the time, like when you reach over your head to get something from a high shelf or bend over to put shoes on. It’s very important to stay flexible as you age. Unfortunately, people with diabetes can lose flexibility faster. Preventing stiffness and pain is easier than trying to get rid of it.

There are many ways you can increase or maintain flexibility. These range from simple stretches to group classes. The key to stretching is to do it regularly and to be gentle with yourself. At the end of this article, there are some resources for more information about flexibility and ideas to get started. Balance is also very important.

Balance is a skill that you need when your body moves in an unexpected way. You need balance when you trip over a bump in the carpet, slip on your way out of the shower, or take a wrong step. Losing your balance can lead to falls, and falls can seriously injure you and make it difficult to care for yourself. Also, if you’re worrying about falling most of the time, you might not live life the way that you want to.

Luckily, doing a few balance exercises every day can help, and can make it less likely that you will get injured if you do fall. There are some links to balance exercises listed at the end of this article. When you start out, it might be a good idea to try balance exercises with a partner or to hold on to a sturdy chair or table for safety.

There are some activities that include balance and flexibility, like yoga and tai chi. Some senior and recreation centers or local parks offer classes that combine balance and flexibility exercises with aerobic or strength training. For example, ballroom dancing can improve your balance as well as your aerobic fitness. Find something you enjoy!

The Physical Activity Guidelines for Americans recommends you do flexibility and balance exercises 2 to 3 times per week. But if you don’t think you have time, something is always better than nothing. Doing a handful of exercises as you find time throughout the day is better than doing nothing. Any flexibility and balance exercise you do today will improve your life tomorrow.

**Flexibility Resources**

- [https://tinyurl.com/aaeayab6](https://tinyurl.com/aaeayab6)
- [https://www.nhs.uk/live-well/exercise/flexibility-exercises/](https://www.nhs.uk/live-well/exercise/flexibility-exercises/)

**Balance Resources:**

- [https://www.silversneakers.com/blog/fit-for-life-exercises-improve-balance/](https://www.silversneakers.com/blog/fit-for-life-exercises-improve-balance/)

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Diabetes Life Lines

Free videos with most fitness types:

- Free PBS Wisconsin videos: https://tinyurl.com/3hy7yrb7
- SilverSneakers YouTube Channel: https://www.youtube.com/channel/UCRp-32Yi0KC2YMgH1g6mTag

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References:


Neuropathy – What is it?

Diabetic neuropathy is nerve damage that can happen to people with diabetes. High blood glucose levels can damage nerves two ways. First, too much glucose can make neurons, the cells that make up your nerves, fail. Second, uncontrolled blood glucose damages the tiny extensions of your veins and arteries, called capillaries that take nutrients to your neurons. When capillaries are damaged, this can keep your nerves from getting the nourishment they need to function.

Half of people with diabetes might develop a neuropathy. There are four main types of neuropathies, and you can have more than one.

1. **Peripheral neuropathy.** This is the most common neuropathy. It happens when the nerves in your arms, legs, hands, and/or feet get damaged. Usually, it happens in your legs first, then your arms. You might start to lose feeling in your feet, feel pins and needles, and have cuts or infections in your feet that don’t heal, or even start having increased sensitivity to touch. Even a simple touch is painful.

2. **Autonomic neuropathy.** This is when the nerves of the autonomic nervous system are damaged. This system controls your eyes, heart, stomach and intestines, and your sex organs. This type of neuropathy can cause gastroparesis, like we discussed earlier. It can also cause other bowel or bladder problems, trouble with your eyes adjusting from light to dark, and even make it hard to tell when your blood sugars are low.

3. **Proximal neuropathy.** This neuropathy affects nerves in your thighs, buttocks, and hips. It can cause severe pain, weakness, and muscle shrinking in these areas. This can make it difficult to stand up from a seated position.

4. **Mononeuropathy.** This neuropathy refers to damage to a specific nerve, which can be in your body (neck-down) or affect your face. For example, you might feel an ache behind one eye, have difficulty focusing on an object, or have double vision. You might also feel numbness or tingling in your fingers, or even paralysis of one side of your face. This means that the muscles of one side of your face don’t work.

Image from https://pixabay.com/photos/texture-back-ground-light-synapses-2945315/

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These symptoms can be scary. Because neuropathy develops over time, it’s important to talk to your doctor as soon as you feel numbness, tingling, burning, or weakness. Other symptoms that are a red flag include injuries on your foot that won’t heal or become infected, getting dizzy or fainting, or having changes in digestion or urination.

To prevent neuropathy, blood sugar control is the most important factor. The risk for neuropathy increases with poor glucose control and with the length of time you have had diabetes. Smoking and kidney disease are other risk factors. Get your A1c checked at least twice a year, and stay on top of tracking your sugars at home. Manage kidney problems with your doctor and quit smoking. Keeping your feet healthy, clean, and dry and checking them daily for cuts or bruises can prevent painful complications like amputation. For more information about taking care of your feet, visit https://www.cdc.gov/diabetes/library/features/healthy-feet.html.

References:

What causes gastroparesis?

Diabetes is commonly seen with gastroparesis. This is because uncontrolled diabetes can cause nerve damage. The muscles of your stomach and intestines are controlled by the vagus nerve. Vagus nerve damage can cause gastroparesis. Auto-immune and nervous system diseases are also linked to gastroparesis. Some medications, like narcotics, can delay the emptying of your stomach as a side effect. This makes gastroparesis worse.

What is gastroparesis?

Gastroparesis is a condition that slows down the movement of food from your stomach to your intestines. The muscles of your stomach normally churn food and send it to the intestines, where nutrients are absorbed. With gastroparesis, this movement slows down or even stops, which leads to complications.
Can I prevent gastroparesis?
Controlling your blood glucose levels is one of the best things you can do to prevent gastroparesis. Do your best to keep your sugars in the range your health care team set for you. Take your medications as prescribed. Exercise can help, too. It promotes gastric emptying in healthy people and might improve symptoms.

How do I know if I have gastroparesis?
See your health care provider. To diagnose gastroparesis, doctors will do a physical exam. They might do one or more other tests.

- Endoscopy (putting a tube with a camera down your throat) to check if your esophagus or stomach have physical problems.
- Ultrasound to see if you have blockages in your stomach or intestines.
- Tests to measure how quickly your stomach empties. There are many tests for this. Most involve eating a meal and tracking how it is digested.

I have gastroparesis. Now what?
First, if you have any of the following symptoms, you should get medical attention right away. They could be signs that gastroparesis has caused problems that need emergency treatment.

- Severe abdominal pain
- Unpredictable blood sugar levels
- Vomiting lasting more than 1 hour
- Vomit that looks like coffee grounds, or has blood in it
- Weakness or fainting
- Having trouble breathing
- Fever
- Dehydration (having dark urine, fatigue, and/or light-headedness)
- Malnutrition (feeling tired and weak, losing weight without meaning to, and/or light-headedness)

If you do not have any of these signs of emergency, talk to your doctor about any symptoms you do have. Some people struggle with appetite, nausea, vomiting, or weight. Ask your doctor to refer you or contact your local hospital to find a diabetes educator and/or registered dietitian nutritionist. These people have special training to help you manage your symptoms and live a full life.

To treat gastroparesis, your health care provider might recommend eating foods that are easy to digest. This includes foods low in fiber and fat. For example, instead of eating fried eggs and whole wheat toast for breakfast, you might try a puffed cereal with low fat milk. Sometimes chopping, grinding, and cooking fresh fruits and vegetables can also help so your stomach doesn’t have to do as much of the work. Instead of eating a fresh apple, try unsweetened applesauce. Instead of raw baby carrots try cooked carrots. Instead of three big meals, try eating 5 or 6 small meals per day so there isn’t too much food in your stomach at one time. Also, don’t smoke or drink alcohol. These can slow down your digestion and make you feel worse. Limit caffeine, mint, and spicy foods as well. These can all bother your stomach.

Rarely, if gastroparesis gets severe enough, people might need special nutrition support. This means they get nutrition through a tube that puts food in their intestines, skipping the stomach, until their gastroparesis is under better control.

Controlling blood sugars is also very important. This might involve adjusting your medications or insulin regimen, and checking your sugars more often to make sure you get insulin when you need it.

Medications can help control symptoms of gastroparesis. Some medicines speed up your stomach’s muscles to help move food. Pain medications can help control pain. Your doctor might also prescribe an antiemetic, which helps control nausea and vomiting.

Summary
Gastroparesis is one of the things that can happen if you have diabetes. It can make eating uncomfortable and lead to serious health problems. Luckily, one of the best ways to prevent it is something you can work on: your blood sugar. Keep your blood sugars in your target range to keep your stomach moving right. Talk to your doctor, dietitian, or diabetes educator for more help.

References:
Recipe Corner

Louisiana Green Beans

Ingredients:

1 pound fresh green beans or 9-oz. frozen beans
2 cups (1 pound can) tomatoes
½ cup chopped celery
¼ cup chopped green pepper
¼ teaspoon onion salt

Directions:

1. Wash hands and assemble clean equipment.
2. Cook green beans until tender.
3. Combine beans, tomatoes, celery, green pepper, onion salt, and cook over medium heat about 15 minutes or until heated through.

Makes 6 servings

Nutrition Facts:

Calories: 41
Carbohydrates: 8 grams
Protein: 2 grams
Fat: < 1 grams
Cholesterol: 0 milligrams
Fiber: 3 grams
Sodium: 235 milligrams (156 mg. if no salt added tomatoes are used).

Contributors:
Alison C. Berg, PhD, RDN, LD, Associate Professor, Extension Nutrition and Health Specialist, Department of Nutritional Sciences, University of Georgia, Athens, Georgia
Allison Rautmann, MS, Graduate Student, Dietetic Intern, University of Georgia, Athens, Georgia

Editorial Board:
Ian C. Herskowitz, MD FACE, University Health Care System, Augusta, Georgia
Melanie Cassity, RN, MSN, CDE, Piedmont Athens Regional, Athens, Georgia
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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