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FALL 2013



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Editor's Letter

Dear Readers:

Welcome to the Fall 2013 Edition of Costco: *Healthy Living with Diabetes*. Fall is the time of year for people with diabetes to get their flu shots, which Costco offers at a low cost to its members. Stop by the pharmacy counter on your next Costco outing.

In this issue, our article "Get the Sleep You Need" explains the benefits of good sleep and gives some tips to help you sleep better. If you follow our "10 Tips for Healthy Feet," it may help prevent foot problems and "Exercise: It's Good for Your Diabetes" can help you feel your best, during and after exercise. We also bring you some recipes from celebrity chef Art Smith's "Taking Diabetes to Heart through Healthy Comfort Recipes," including Unfried Chicken with Roasted Brussels Sprouts, Shaved Brussels Sprout Salad with Pine Nuts and Lemon and Lamb Kabobs with Cucumber Raita.

If you have any questions about the articles in this issue, or any other health concerns, please speak with your health care provider or your Costco pharmacist.

Have a great Fall and, as always, thanks for shopping at Costco Pharmacy.

Michael Mastromonica, RPh

Executive Editor

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MAKING BETTER FOOD CHOICES

By Johanna Burani, MS, RD, CDE

You know that eating healthy meals helps you to have a healthy body. That's especially true if you have diabetes or prediabetes. What you eat can help you control your blood glucose, your blood pressure, your cholesterol and your weight.

The best place to start making good food choices is to look at your food plate. Think of it as having four parts that you fill up at every meal.

The two big parts are for your starches or grains, like rice, corn, beans, pasta or bread, and for your vegetables, like carrots, broccoli, spinach, tomatoes and salads.

The two small parts of your plate are for your protein-based foods, like chicken, fish, eggs and cheese, and for your fruit, like apples, peaches, berries and oranges. When all four parts of your plate are filled in this way, you have a well-balanced meal.

You don't have to change everything all at the same time. You can choose one way to improve your diet and work on that until you feel comfortable with it. Then you can go on to another change. For example, you may choose to drink water with all your meals but allow yourself one can of soda per

week. Once that change is part of your diet, you can try something else, like eating more vegetables. Make small changes that feel good to you and, little by little, you will improve your diet. You will find your own easy ways to eat healthy.

4 PARTS TO YOUR PLATE

2 parts of your plate are for your starches or grains and your vegetables.

2 parts of your plate are for your protein-based foods and your fruit.



7 steps to better food choices

- 1** Try to eat the right number of calories. Enjoy your food but eat less of it. If you eat large portions, make them smaller. Burn extra calories with exercise.
- 2** Eat slowly. Pay attention to your food and enjoy it.
- 3** Use a smaller plate to help you eat less.
- 4** If you are in a restaurant, share a meal with someone or bring some of it home to eat at another time.
- 5** Eat vegetables, fruits, whole grains and fat-free or 1% milk and yogurt every day.
- 6** Eat less of these foods: cakes, cookies, ice cream, candies, soda, energy and sports drinks, pizza, soups, frozen meals, ribs, sausages, bacon and hot dogs.
- 7** Try to drink mostly water every day and save your favorite sugary drink for a special treat.



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10 TIPS FOR HEALTHY FEET

By Joy Pape, RN, BSN, CDE, WOCN, CFNC



You may have heard that having diabetes increases your risk for foot problems, including amputations. The good news is that there is a lot you can do to keep this from happening to you. Learn and follow these diabetes foot care tips to help prevent problems with your feet.

30%

Regularly seeing a podiatrist decreases amputations by 30%.

1 MANAGE YOUR DIABETES

Do all that you can to keep your blood glucose, blood pressure and cholesterol (lipids) in their target ranges. This is your first step—and one of the most important ones—toward protecting your feet.

2 NEVER WALK BAREFOOT

Walking barefoot gives you no protection against stepping on something, dropping something on your foot or being stepped on. Wear water shoes at the beach and keep slippers near your bed so you can get to them easily in the middle of the night.

3 PROTECT YOUR FEET FROM HOT OR COLD TEMPERATURES

Cold causes your blood vessels to constrict, which can decrease circulation. On the other hand, heating pads, hot water bottles, electric blankets or putting your feet on radiators, fireplaces or space heaters can cause burns if you are unable to sense the temperature. Use wool blankets or comforters to keep warm instead. Keep your feet warm with wool or cotton socks.

4 WEAR SHOES THAT PROTECT YOUR FEET

High heels put pressure on the balls of your feet, which can cause blisters, open sores, calluses and bunions, among other problems. Also, sandals and flip-flops provide almost no protection for your feet.

5 BE A FOOT DETECTIVE

Look at your bare feet every day. Look at the tops, bottoms and in between your toes for redness, bruises, blisters, cuts, swelling, a shift in the color or temperature of your skin and other changes. By looking at your feet daily, you will notice changes right away. Report any changes to your health-care provider immediately.

6 IF YOU SMOKE, TRY TO STOP

Smoking causes your blood vessels to become narrow. Diabetes increases your risk for blood vessel disease. The two together can decrease the blood flow that carries oxygen to your legs and feet. A lack of oxygen makes it much harder for wounds to heal. Get help by asking your healthcare provider to refer you to a program that can help you stop smoking.

7 KEEP YOUR FEET CLEAN AND DRY

You don't need to do more than take your usual shower. Do not soak your feet unless your healthcare provider directs you to do. Dry your feet well—especially between your toes. Use lotion if your skin is dry to keep it soft and protect against drying and cracking. Putting socks on immediately after you put on the lotion helps lock in the moisture.

8 TRIM YOUR TOENAILS TO FOLLOW THE CURVE OF YOUR TOE

Use an emery board to file the edges. If you cannot reach your toes or your nails are thick, have your toenails cut by a podiatrist.

9 SEE A PODIATRIST

Besides trimming your toenails, podiatrists provide the foot care and education you need. Don't practice podiatry yourself, which means don't use anything sharp on your feet, and don't use any over-the-counter medicines on your feet, such as wart, corn or callus removers. See your podiatrist for those treatments.

10 GET HELP RIGHT AWAY

If you have any changes in your feet, contact your healthcare provider immediately. Don't put it off. Getting care early can mean getting and keeping your feet safe. Putting it off can lead to the problems you want to avoid.

IF YOU HAVE **DIABETES**
WHAT YOU PUT HERE
CAN IMPACT YOUR GUM HEALTH



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GET THE SLEEP YOU NEED

By Johanna Burani, MS, RD, CDE

We all know what it is like to go through the day feeling tired. We do our work throughout the day and can't wait for the day to end. If we get a good night of sleep, we wake up rested and are ready to start all over again. We have the energy we need all day long. But what if we don't get enough sleep? What if we have many nights when we are very tired, fall asleep for a short time then wake up and cannot fall back to sleep?

More than 70 million Americans suffer from chronic sleep loss. Women have more of a problem falling asleep and staying asleep than men. More than 2 million children have sleep disorders and even more just don't get enough sleep on many nights. Most adults need between 7–9 hours of sleep every night. When we don't get enough sleep night after night, we build up a large sleep debt that is hard to pay back. Then we are tired all the time and don't have enough energy.

WHY WE NEED TO SLEEP

First, the body needs some "time off" to rest and take care of itself. Sleep gives the body a chance to slow down its workload and rest different parts, such as the brain, heart, muscles and the organs

that digest our food all day long. The body doesn't shut off when we sleep, it just slows down. This allows our body parts to relax for seven, eight or nine hours. A tired body doesn't work as well as a rested one, and chronic lack of sleep can cause health problems.

SLEEP AND DIABETES

It is very important to get enough sleep if you have diabetes or prediabetes. If you are tired, your body tries to get energy by eating more, which can raise the glucose level in the blood. Gaining weight makes it harder to have good diabetes control. The body needs insulin to keep its glucose level from getting too high. If your pancreas is unable to make enough insulin, your glucose level will climb higher. Lack of sleep also makes the muscle cells less likely to take in glucose from the bloodstream.

Good diabetes control will help you sleep better. You will not need to go to the bathroom many times during the night if your blood glucose numbers are in a healthy range. You will sleep better and feel more rested in the morning.

12
benefits
of sleep

More energy

Better general health

Healthier heart

Weight control

Improved immunity

Longer life

Improved memory

Improved mood

Lower stress

Improved ability to learn

Improved ability to focus on work

Accident avoidance



8

Sleep experts believe these tips may help you sleep better:

- 1 Do** try to go to bed at the same time every night.
- 2 Don't** exercise 2–4 hours before bedtime.
- 3 Do** leave the bedroom for a short time when you can't sleep.
- 4 Don't** eat heavy, spicy or greasy foods 4–6 hours before bedtime.
- 5 Do** try to make the bedroom quiet, dark and comfortable.
- 6 Don't** drink caffeine or alcohol 4–6 hours before bedtime.
- 7 Do** drink warm milk or take a hot shower or bath one hour before bedtime.
- 8 Don't** nap during the day.

GET ENOUGH SLEEP

No matter what the age is, the body tells us when it needs sleep. We are cranky and lack energy. We have a hard time doing work. And we may start to gain weight if we don't sleep enough.

If you need an alarm clock to wake up each morning, you may not be getting enough sleep.

SLEEP AND WEIGHT GAIN

Some studies show that we gain weight more easily when we don't sleep enough. That's because sleep affects some important hormones in the body.

Lack of sleep affects the part of the brain that controls hunger. It is affected by two hormones, called ghrelin and leptin. Ghrelin (the "gimme more" hormone) tells the brain when we are hungry. When ghrelin levels in the stomach are high, the brain triggers us to eat more food. Leptin (the "leave me alone" hormone) tells the brain that we feel full. When leptin levels, which come out of fat cells, are high, the brain senses that the body is full and doesn't need more food, so we don't want to eat.

When we don't sleep enough, our ghrelin levels go up and our leptin levels go down. This means that when we eat after a poor night of sleep, we don't feel full and keep on eating. We aren't hungry, but our tired body tells our brain that we are. If we lack sleep night after night and eat more while awake, we can gain weight over time.

Another hormone that changes with too little sleep is growth hormone. That hormone helps control how much fat we burn and how fast we increase our muscle mass. Growth hormone is released while we sleep. The less we sleep, the less growth hormone there is in the body. That leads to weight gain because we burn less fat. Finally, the lack of sleep will affect another hormone, cortisol. Cortisol encourages the body to store fat, especially in the belly area.

These hormones send unhealthy messages to the brain that lead us to eat more food when we are tired. This is a big problem because the fast-paced American lifestyle seems to promote less sleep and those who are hungry can usually find food to eat at any hour.

WHEN TO SEE YOUR DOCTOR

If you are worried about your poor sleeping habits or think you sleep enough but are always tired, speak to your doctor. With the right care, you may feel much better and also find that the weight you have been trying to lose is finally coming off—in your sleep.

TAKE CHARGE WITH THE EASY-TO-USE PEN.



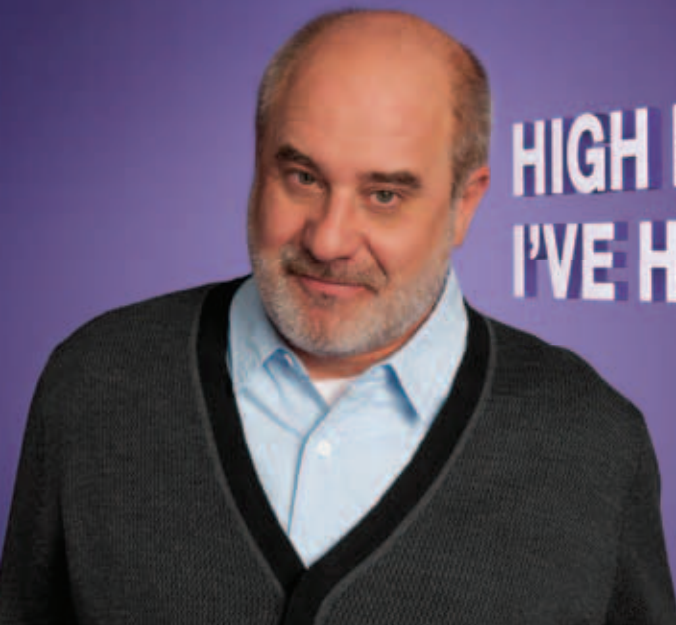
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Please see Important Safety Information and brief summary of prescribing information on adjacent pages.



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Lantus® in the easy-to-use SoloSTAR® pen is the most prescribed* once-daily insulin available, and can help provide 24-hour blood sugar control with just one dose a day. If you have type 2 diabetes, and pills, diet and exercise aren't enough, you have options. Insulin is an effective way to help control blood sugar. Talk to your doctor to see if Lantus® SoloSTAR® is right for you. Call 1.877.561.4612 or go to LantusTakesItOn.com.

Important Safety Information for Lantus® (insulin glargine [rDNA origin] injection)

Do not take Lantus® if you are allergic to insulin or any of the inactive ingredients in Lantus®.

You must test your blood sugar levels while using insulin, such as Lantus®. Do not make any changes to your dose or type of insulin without talking to your healthcare provider. Any change of insulin should be made cautiously and only under medical supervision.

Do NOT dilute or mix Lantus® with any other insulin or solution. It will not work as intended and you may lose blood sugar control, which could be serious. Lantus® must only be used if the solution is clear and colorless with no particles visible. **Do not share needles, insulin pens or syringes with others.**

The most common side effect of insulin, including Lantus®, is low blood sugar (hypoglycemia), which may be serious.

Some people may experience symptoms such as shaking, sweating, fast heartbeat, and blurred vision. Severe hypoglycemia may be serious and life threatening. It may cause harm to your heart or brain. Other possible side effects may include injection site reactions, including changes in fat tissue at the injection site, and allergic reactions, including itching and rash. In rare cases, some allergic reactions may be life threatening.

Tell your doctor about other medicines and supplements you are taking because they can change the way insulin works. Before starting Lantus®, tell your doctor about all your medical conditions including if you have liver or kidney problems, are pregnant or planning to become pregnant, or are breast-feeding or planning to breast-feed.

Lantus® SoloSTAR® is a disposable prefilled insulin pen. Please talk to your healthcare provider about proper injection technique and follow instructions in the Instruction Leaflet that accompanies the pen.

Indications and Usage for Lantus® (insulin glargine [rDNA origin] injection)

Prescription Lantus® is a long-acting insulin used to treat adults with type 2 diabetes and adults and children (6 years and older) with type 1 diabetes for the control of high blood sugar. It should be taken once a day at the same time each day to lower blood glucose.

Do not use Lantus® to treat diabetic ketoacidosis.

Please see brief summary of prescribing information on the next page.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1.800.FDA.1088.

*IMS National Prescription Audit™, TRxs. November 2012



BRIEF SUMMARY OF PRESCRIBING INFORMATION HIGHLIGHTS OF PRESCRIBING INFORMATION

These highlights do not include all the information needed to use LANTUS safely and effectively. See full prescribing information for LANTUS.

LANTUS® (insulin glargine [rDNA origin] injection) solution for subcutaneous injection

Initial U.S. Approval: 2000

INDICATIONS AND USAGE

LANTUS is a long-acting human insulin analog indicated to improve glycemic control in adults and children with type 1 diabetes mellitus and in adults with type 2 diabetes mellitus. (1)

Important Limitations of Use:

- Not recommended for treating diabetic ketoacidosis. Use intravenous, short-acting insulin instead.

DOSAGE AND ADMINISTRATION

- The starting dose should be individualized based on the type of diabetes and whether the patient is insulin-naïve (2.1, 2.2, 2.3)
- Administer subcutaneously once daily at any time of day, but at the same time every day. (2.1)
- Rotate injection sites within an injection area (abdomen, thigh, or deltoid) to reduce the risk of lipodystrophy. (2.1)
- Converting from other insulin therapies may require adjustment of timing and dose of LANTUS. Closely monitor glucoses especially upon converting to LANTUS and during the initial weeks thereafter. (2.3)

DOSAGE FORMS AND STRENGTHS

Solution for injection 100 units/mL (U-100) in

- 10 mL vials
- 3 mL cartridge system for use in OptiClik (Insulin Delivery Device)
- 3 mL SoloStar disposable insulin device (3)

CONTRAINDICATIONS

Do not use in patients with hypersensitivity to LANTUS or one of its excipients (4)

WARNINGS AND PRECAUTIONS

- Dose adjustment and monitoring: Monitor blood glucose in all patients treated with insulin. Insulin regimens should be modified cautiously and only under medical supervision (5.1)
- Administration: Do not dilute or mix with any other insulin or solution. Do not administer subcutaneously via an insulin pump or intravenously because severe hypoglycemia can occur (5.2)
- Do not share reusable or disposable insulin devices or needles between patients (5.2)
- Hypoglycemia: Most common adverse reaction of insulin therapy and may be life-threatening (5.3, 6.1)
- Allergic reactions: Severe, life-threatening, generalized allergy, including anaphylaxis, can occur (5.4, 6.1)
- Renal or hepatic impairment: May require a reduction in the LANTUS dose (5.5, 5.6)

ADVERSE REACTIONS

Adverse reactions commonly associated with Lantus are:

- Hypoglycemia, allergic reactions, injection site reaction, lipodystrophy, pruritus, and rash. (6.1)

To report SUSPECTED ADVERSE REACTIONS, contact sanofi-aventis at 1-800-633-1610 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

DRUG INTERACTIONS

- Certain drugs may affect glucose metabolism, requiring insulin dose adjustment and close monitoring of blood glucose. (7)
- The signs of hypoglycemia may be reduced or absent in patients taking anti-adrenergic drugs (e.g., beta-blockers, clonidine, guanethidine, and reserpine). (7)

USE IN SPECIFIC POPULATIONS

- Pregnancy category C: Use during pregnancy only if the potential benefit justifies the potential risk to the fetus (8.1)
- Pediatric: Has not been studied in children with type 2 diabetes. Has not been studied in children with type 1 diabetes <6 years of age (8.4)

See Full Prescribing Information for PATIENT COUNSELING INFORMATION and FDA-approved patient labeling

GLA-BCPH-AS-APR10

Revised: 04/2010
Rx Only

CHOOSING A MENTAL HEALTH PROFESSIONAL

By Janis Roszler, MSFT, RD, CDE, LD/N

People with diabetes have about twice the rate of clinical depression as those without diabetes. And depression seems to hit people with diabetes with a double-whammy. They not only feel hopeless and unmotivated, their depression often makes it harder for them to take care of their diabetes needs.

Living with diabetes and its complications increases the risk for depression. Daily diabetes care tasks can become harder to complete and the anger or guilt related to having diabetes can become overwhelming. People with diabetes are more likely to become depressed if they don't express their feelings or learn to cope with them.

If you believe you may be depressed, a good place to begin your search for a mental health professional is to talk

with your diabetes health care team. Ask if they know someone who works with people who have diabetes and understands the issues you face. You also need to check with your health insurance company to see if there are any therapists in your network. You can see a social worker, therapist and/or a psychiatrist.

Social workers talk with people and their families about their emotional or physical needs and help find financial and other support services.

Psychologists are marriage and family therapists, and mental health therapists that can help you deal with your negative feelings and look at your life with diabetes in a more positive way. Many use Cognitive-Behavioral Therapy (CBT), which has been shown to be an effective way to overcome depression.

Psychiatrists are medical doctors who specialize in mental health and mental illness. They offer medication to help

their patients manage their mental illnesses. Some offer counseling, as well.

BEFORE YOU GO

Think about your goals for therapy. Decide what you hope to gain from your visits.

You may find it helpful to interview several mental health specialists before you choose one. In order for them to help you, you need to feel at ease and be able to relate to them and their style.

QUESTIONS TO ASK INCLUDE:

- Are you licensed in this state?
- What insurances do you accept?
- Do you prescribe medicines as part of treatment?
- Do you work with people who have diabetes?
- What should I do to prepare for my first visit?
- What style or method of therapy do you use?

ART SMITH'S

TAKING DIABETES TO HEART THROUGH HEALTHY COMFORT RECIPES

Unfried Chicken

WITH ROASTED BRUSSELS SPROUTS

Makes 4 Servings

For the chicken

- 1 cup buttermilk
- 1 ½ teaspoons onion powder
- 1 tablespoon Louisiana Hot Sauce or another hot sauce
- 1 ½ teaspoons garlic powder
- 1 teaspoon paprika

- 4 skinless and boneless chicken breasts, cut in half

- 1 ½ cups multigrain or whole wheat panko bread crumbs

- 3 tablespoons grated Parmesan cheese

- 2 teaspoons ground black pepper

- 1 teaspoon cayenne

For the brussels sprouts

- 16 brussels sprouts, cut in half

- 1 ½ tablespoons extra-virgin olive oil

Salt and freshly ground black pepper

For the garnish

- 1 lemon, quartered

1. To prepare the chicken: Preheat the oven to 400°F. In a mixing bowl, mix the buttermilk and hot sauce. Submerge the chicken pieces in the buttermilk and soak in the refrigerator for at least 1 hour but no more than 24 hours.

2. In a gallon-size plastic bag, combine the bread crumbs, Parmesan, black pepper, cayenne, onion powder, garlic powder, and paprika. Seal the bag and shake until well mixed. Remove the chicken from the buttermilk and transfer directly to the bag with the bread crumb mixture. Shake the bag until the chicken breasts are evenly coated with the bread crumbs. Remove the chicken breasts from the bag and lay flat on a nonstick baking sheet. Refrigerate, uncovered, for 30 minutes. Bake the chicken for 20 to 25 minutes or until just cooked through.

3. To prepare the brussels sprouts: Preheat the oven to 400°F. Place brussels sprouts in a medium mixing bowl, toss with the olive oil, and season with salt and pepper. Spread the brussels sprouts in a medium ovenproof baking dish and roast for 20 minutes or until caramelized and tender.

4. Divide the chicken and brussels sprouts among 4 serving plates, and squeeze the lemon over the chicken.

NUTRITION INFORMATION PER SERVING:

Calories 427, Carbohydrate 45g, Sugars 6g, Total Fat 12g, (Sat Fat 3g), Protein 40g, Fiber 9g, Cholesterol 79mg, Sodium 349mg

Adapted from "Art Smith's Healthy Comfort: How America's Favorite Celebrity Chef Got it Together, Lost Weight, and Reclaimed His Health!"

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Photography by Stephen Hamilton. Published by HarperOne.

For additional recipe ideas, visit TakingDiabetesToHeart.com



Shaved Brussels Sprout Salad

WITH PINE NUTS AND LEMON

Makes 4 servings

- 20 medium brussels sprouts, cleaned
- 4 tablespoons extra-virgin olive oil
- 2 tablespoons fresh lemon juice
- ¼ cup pine nuts
- ¼ cup grated pecorino Romano cheese
- Salt and freshly ground black pepper

1. Cut the brussels sprouts in half lengthwise. Thinly slice them until you get to the chunky white core of the brussels sprout (about three-fourths of the way down), then discard the rest of the brussels sprout. Place the sliced brussels sprouts in a medium mixing bowl and add the olive oil, lemon juice, pine nuts, and pecorino Romano cheese. Mix thoroughly. Season with salt and pepper. Cover and let sit for 30 minutes to let the flavors marry before serving.

2. Divide the brussels sprout salad among 4 bowls and top with freshly ground black pepper.

NUTRITION INFORMATION PER SERVING:

Calories 250, Carbohydrate 10g, Sugars 3g, Total Fat 22g, (Sat Fat 4g), Protein 7g, Fiber 4g, Cholesterol 8mg, Sodium 151mg

Lamb Kabobs

WITH CUCUMBER RAITA

Makes 4-6 servings

For the quinoa

- 1 cup quinoa, rinsed
- Salt
- 1 tablespoon fresh lemon juice
- 1 tablespoon extra-virgin olive oil
- 2 tablespoons chopped flat-leaf parsley

For the raita

- 12 ounces nonfat Greek yogurt
- ⅓ cup diced, peeled, and seeded cucumber
- 3 tablespoons chopped fresh mint leaves
- 1½ tablespoons fresh lemon juice
- 1 large garlic clove, minced
- Salt

For the lamb

- 1 lb boneless leg of lamb, trimmed and cut into 1-inch pieces
- 1 tablespoon curry powder
- 2 tablespoons extra-virgin olive oil
- Salt
- 16 grape or cherry tomatoes
- 1 yellow bell pepper, seeded and cut into 1-inch pieces
- 8 10-inch bamboo skewers, soaked in water

1. To prepare the quinoa: Place the quinoa in a medium saucepan. Cover with 2 cups cold water and add a pinch of salt. Cover the pan and bring to a boil. As soon as it begins to boil, reduce the heat to a simmer and set the lid slightly ajar to prevent boiling over. Simmer the quinoa for 15 to 20 minutes or until the liquid has been fully absorbed. You should see a little white ring release from the quinoa germ. Remove from heat, fluff with a fork, and stir in the lemon juice, olive oil, and parsley.

2. To prepare the raita: In a small mixing bowl, combine the yogurt, cucumber, mint, lemon juice, and garlic. Mix with a wooden spoon until fully incorporated. Season with salt. Cover and refrigerate until ready to use.

3. To prepare the lamb: Preheat a grill to moderate heat. In a medium mixing bowl, combine the lamb, curry powder, and 1 tablespoon of the olive oil. Season with salt. In a separate mixing bowl, combine the tomatoes and bell pepper. Toss with the remaining 1 tablespoon extra-virgin olive oil and season with salt. Thread the lamb, bell pepper, and tomatoes alternately onto the skewers. Place the prepared kabobs on the grill and cook for 5 minutes on each side or until cooked.

4. Spoon some quinoa on each plate, top with two lamb kabobs, and spoon some raita over the lamb. Sprinkle with additional chopped mint, if desired.

NUTRITION INFORMATION PER SERVING:

Calories 478, Carbohydrate 39g, Sugars 7g, Total Fat 9g, (Sat Fat 4g), Protein 38g, Fiber 5g, Cholesterol 73mg, Sodium 133mg



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EXERCISE

IT'S GOOD FOR YOUR DIABETES



By Johanna Burani, MS, RD, CDE

We all live very busy lives, so it can be hard to find time for exercise. We use cars, machines and tools to help us get our work done faster. But those things take away much of our daily movement. So we must plan to keep our bodies moving. Why? Because moving the body is good for it.

EXERCISE AND DIABETES

If you have type 1 diabetes, ask your doctor or diabetes educator how to lower the amount of insulin you take when you exercise. You don't want your blood glucose to drop too low. Always check your blood glucose level before and after exercise. If you work out for a long time, you may need to check during your activity. Never exercise on an empty stomach: Eat a snack before or right after your exercise and drink water while you are exercising. It is also a good habit to carry glucose tablets or gel or some other fast-acting sugar source with you in case you feel weak during your exercise.

If you have type 2 diabetes and take insulin, follow the same rules as for type 1. If you take oral medicines or no drugs at all for your diabetes, it is still good to speak to your doctor or diabetes educator about your exercise plans. Test your blood glucose level before and after exercise to see if you need a snack. That will also show you

to what extent exercise affects your blood glucose level. If you exercise for a long time, be sure to bring along a snack, such as fruit or yogurt. And always have water with you to drink.

EXERCISE GUIDELINES

The American Diabetes Association recommends people with prediabetes and diabetes to be physically active at least 150 minutes every week. That means 30 minutes of exercise five days a week. To do so, you can walk, play softball, mow the lawn, clean the house, take an exercise class or anything else you like to do. You can wear a pedometer on your belt or waistband. That small tool counts how many steps you take each day. A good long-term goal is to reach 10,000 steps every day. It is common sense to start at a comfortable level and increase the time and speed of your exercise over a period of time. To get the most from your exercise, do it most days every week throughout the year.

5 tips for feeling your best during and after exercise:

1 Plan your exercise

Plan your exercise. Think about what you can and want to do. Choose what days, what time, for how long and what you will do. Try to follow your plan.

2 Eat the right meals

Eat a meal that contains carbohydrates one–three hours before you exercise. Examples: a sandwich or breakfast cereal, milk and fruit.

3 Drink water

Drink 8 ounces of water 20 minutes before starting your exercise. Do not drink ice cold water, which may give you stomach cramps. Drink 8 ounces of water every 20–30 minutes during your exercise.

4 Check your blood glucose

Check your blood glucose level before and after you exercise. Also check during a long exercise or if you don't feel right.

And you may need to check your blood glucose level during the night if you have exercised for a long time or did intense or unusual activities. That's to make sure your blood glucose level doesn't drop too low while you are asleep.

5 Speak to your doctor

Always talk with your doctor or diabetes educator before you start an exercise program. Make sure they agree on your exercise plan.

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*Intended as a guide. Lower acquisition costs alone do not necessarily reflect a cost advantage in the outcome of the condition treated because there are other variables that affect relative costs. Formulary status is subject to change.

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EXPECTING TO BE EXPECTING?

By Martha Funnell, MS, RN, CDE

For most women, the idea of starting a family is both exciting and scary. It is exciting to think how you can create a new life and perhaps have a dream come true. It can also be a time of worry as you think about how your life will change. Women who have diabetes may also worry about how diabetes can affect their pregnancy and their future child.

The good news is that more and more women with both type 1 and type 2 diabetes are having safe pregnancies and healthy babies than ever before. As you might expect, it takes more planning and more work, but the results are worth it.

PRE-PREGNANCY

First, visit with your health care provider before you get pregnant. During this visit, you and your provider will talk about your general health, diabetes treatment and current blood glucose levels. You may have your eyes and kidneys checked for signs of damage. If you take insulin, the dose and types of insulin you take may be changed. If you take diabetes pills, you may need to switch the types you take or start insulin during your pregnancy. Think of this as the time to get your body

ready to nurture a new life in the best possible way.

It is best to keep your A1C level close to normal before you try to get pregnant. Because a baby's organs are formed very early during pregnancy, birth defects can occur if blood glucose levels are too high. If you get and keep your blood glucose levels in your target range, it will give your baby a good start. The other thing that you can do before you become pregnant is to take folic acid. This can help prevent birth defects. Your health care provider can offer advice about how much to take and when to start. This is also a good time to change health habits that you have been putting off. Do you want to eat better foods, move more, become more active or stop smoking? Now is a great time to start. When you struggle to stick with your plan, picture yourself holding your new baby. What could be more motivating than that?

PREGNANCY

The goal for diabetes care during pregnancy is to keep your blood glucose as close to normal as possible. As your need for insulin rises, your medicines will likely change. If you did not take insulin before pregnancy,

you may need it until you deliver. If you were taking insulin, the types and doses may change. To keep your blood glucose in this very tight range, you will also need to watch your control more closely, pay close attention to your food, activity and stress levels, and see your health care team often.

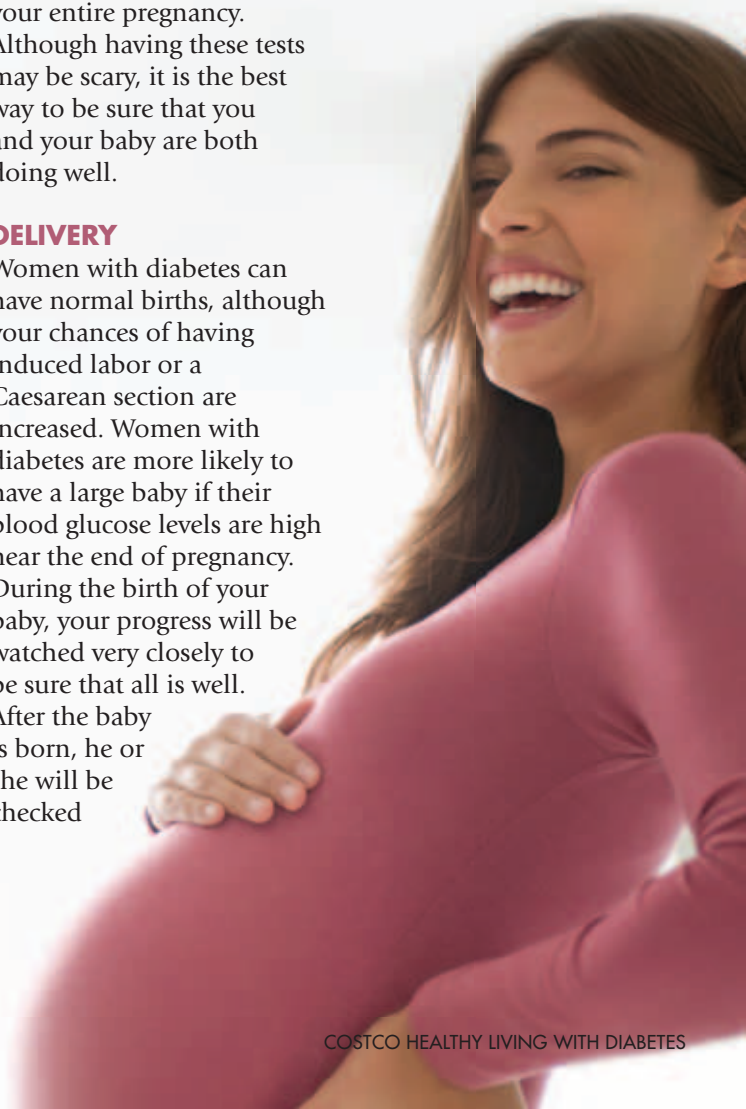
You and your baby will be watched very carefully during your entire pregnancy. Although having these tests may be scary, it is the best way to be sure that you and your baby are both doing well.

DELIVERY

Women with diabetes can have normal births, although your chances of having induced labor or a Caesarean section are increased. Women with diabetes are more likely to have a large baby if their blood glucose levels are high near the end of pregnancy. During the birth of your baby, your progress will be watched very closely to be sure that all is well. After the baby is born, he or she will be checked

often. The baby's blood glucose level will be checked for a low blood glucose level, which is not the same as diabetes. Low blood glucose can occur because the baby has been making extra insulin to be sure that his or her blood glucose stays in the normal range. Once the baby is born, it may take a day or two to adjust.

Finally, your baby is here and you are ready to go home. There is no question that you will work harder than other women during your pregnancy, but there is also no question that a new life is well worth all of your efforts.



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