

EXPERT VIEWS, NUTRITION TIPS, GREAT RECIPES & MORE

HOLIDAY 2014/WINTER 2015

diabetes & you[®]

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HEALTHY HOLIDAY RECIPES

FROM CHEF
CHERYL FORBERG OF NBC'S
"THE BIGGEST LOSER"

TURKEY ROULADE
STUFFED WITH
CORNBREAD AND
DRIED FRUIT
DRESSING

GLUCOSE
METER
COMPARISON CHART



AWARD-WINNING ACTRESS, CHOREOGRAPHER & DANCER
DEBBIE ALLEN
ON DANCING AND DIABETES

editor's letter



Magazine Publishers
of America



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Diabetes & You



Dear Readers:

Welcome to the Holiday 2014/
Winter 2015 issue of Walgreens
Diabetes & You, where we feature
expert views on diabetes care, tips
on healthy eating and delicious,
diabetes-friendly recipes.

This season, try our holiday
recipes from award-winning chef

Cheryl Forberg, who is best known as the nutritionist for
NBC's "The Biggest Loser." The Turkey Roulade stuffed
with Cornbread and Dried Fruit Dressing is featured
on the cover. You'll also love the Holiday Rapini Sauté,
which will easily fit into your diabetes meal plan.

Our feature article covers award-winning actress,
choreographer and dancer Debbie Allen. Millions of
people know her as a judge on the hit TV show "So You
Think You Can Dance." Off-camera, Debbie has another
important and meaningful role—as an advocate for
people with diabetes. She is part of T2 Dance Crew,
a national education and wellness program that
encourages people with type 2 diabetes to get more
physically active—especially by dancing—as an
important part of managing their condition.

For more information on diabetes and for previous issues
of *Diabetes & You*, visit www.WalgreensDiabetes.com.

As always, please share your questions or comments with
us at info@WalgreensDiabetes.com.

Sincerely,

Rachel Nadler, PharmD
Category Manager, Advanced Care
Health and Wellness Daily Living

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FOR ADULTS WITH TYPE 2 DIABETES

Januvia® works
when my
blood sugar
is HIGH...

...and works less
when my
blood sugar
is LOW.

Actor portrayal.

JANUVIA works by enhancing your body's own ability to lower blood sugar.

- JANUVIA is a prescription pill you take **once a day**.
- JANUVIA, along with diet and exercise, helps lower blood sugar in adults with type 2 diabetes.
- JANUVIA, by itself, is not likely to cause blood sugar going too low (hypoglycemia), because it works less when blood sugar is low.
- JANUVIA, by itself, is not likely to cause weight gain.

JANUVIA (jah-NEW-vee-ah) should not be used in patients with type 1 diabetes or with diabetic ketoacidosis (increased ketones in the blood or urine). If you have had pancreatitis (inflammation of the pancreas), it is not known if you have a higher chance of getting it while taking JANUVIA.

Selected Risk Information About JANUVIA

Serious side effects can happen in people who take JANUVIA, including pancreatitis, which may be severe and lead to death. Before you start taking JANUVIA, tell your doctor if you've ever had pancreatitis. Stop taking JANUVIA and call your doctor right away if you have pain in your stomach area (abdomen) that is severe and will not go away. The pain may be felt going from your abdomen through to your back. The pain may happen with or without vomiting. These may be symptoms of pancreatitis.

Do not take JANUVIA if you are allergic to any of its ingredients, including sitagliptin. Symptoms of serious allergic reactions to JANUVIA, including rash, hives, and swelling of the face, lips, tongue, and throat that may cause difficulty breathing or swallowing, can occur. If you have any symptoms of a serious allergic reaction, stop taking JANUVIA and call your doctor right away.

Kidney problems, sometimes requiring dialysis, have been reported.

If you take JANUVIA with another medicine that can cause low blood sugar (hypoglycemia), such as a sulfonylurea or insulin, your risk of getting low blood sugar is higher. The dose of your sulfonylurea medicine or insulin may need to be lowered while you use JANUVIA. Signs and symptoms of low blood sugar may include headache, drowsiness, weakness, dizziness, confusion, irritability, hunger, fast heart beat, sweating, and feeling jittery.

Your doctor may do blood tests before and during treatment with JANUVIA to see how well your kidneys are working. Based on these results, your doctor may change your dose of JANUVIA. The most common side effects of JANUVIA are upper respiratory tract infection, stuffy or runny nose and sore throat, and headache.

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.

**Pay as little as \$5
per prescription.***

Visit Januvia.com/savings

*Maximum savings are limited. Not valid for patients with Medicare or other Government Program insurance. Other eligibility restrictions and Terms and Conditions apply.

Talk to your doctor about JANUVIA today.

Please read the Medication Guide on the adjacent page for more detailed information.

Merck Helps™ | Having trouble paying for your Merck medicine?
Merck may be able to help. www.merckhelps.com

Januvia®
(sitagliptin)
25 mg, 50 mg, 100 mg tablets



Medication Guide

JANUVIA® (jah-NEW-vee-ah) (sitagliptin) Tablets

Read this Medication Guide carefully before you start taking JANUVIA and each time you get a refill. There may be new information. This information does not take the place of talking with your doctor about your medical condition or your treatment. If you have any questions about JANUVIA, ask your doctor or pharmacist.

What is the most important information I should know about JANUVIA?

Serious side effects can happen in people taking JANUVIA, including inflammation of the pancreas (pancreatitis) which may be severe and lead to death.

Certain medical problems make you more likely to get pancreatitis.

Before you start taking JANUVIA:

Tell your doctor if you have ever had

- pancreatitis
- stones in your gallbladder (gallstones)
- a history of alcoholism
- high blood triglyceride levels
- kidney problems

Stop taking JANUVIA and call your doctor right away if you have pain in your stomach area (abdomen) that is severe and will not go away. The pain may be felt going from your abdomen through to your back. The pain may happen with or without vomiting. These may be symptoms of pancreatitis.

What is JANUVIA?

- JANUVIA is a prescription medicine used along with diet and exercise to lower blood sugar in adults with type 2 diabetes.
- JANUVIA is not for people with type 1 diabetes.
- JANUVIA is not for people with diabetic ketoacidosis (increased ketones in your blood or urine).
- If you have had pancreatitis (inflammation of the pancreas) in the past, it is not known if you have a higher chance of getting pancreatitis while you take JANUVIA.
- It is not known if JANUVIA is safe and effective when used in children under 18 years of age.

Who should not take JANUVIA?

Do not take JANUVIA if:

- you are allergic to any of the ingredients in JANUVIA. See the end of this Medication Guide for a complete list of ingredients in JANUVIA.

Symptoms of a serious allergic reaction to JANUVIA may include:

- rash
- raised red patches on your skin (hives)
- swelling of the face, lips, tongue, and throat that may cause difficulty in breathing or swallowing

What should I tell my doctor before taking JANUVIA?

Before you take JANUVIA, tell your doctor if you:

- have or have had inflammation of your pancreas (pancreatitis).
- have kidney problems.
- have any other medical conditions.
- are pregnant or plan to become pregnant. It is not known if JANUVIA will harm your unborn baby. If you are pregnant, talk with your doctor about the best way to control your blood sugar while you are pregnant.

Pregnancy Registry: If you take JANUVIA at any time during your pregnancy, talk with your doctor about how you can join the JANUVIA pregnancy registry. The purpose of this registry is to collect information about the health of you and your baby. You can enroll in this registry by calling 1-800-986-8999.

- are breast-feeding or plan to breast-feed. It is not known if JANUVIA will pass into your breast milk. Talk with your doctor about the best way to feed your baby if you are taking JANUVIA.

Tell your doctor about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements.

Know the medicines you take. Keep a list of your medicines and show it to your doctor and pharmacist when you get a new medicine.

How should I take JANUVIA?

- Take JANUVIA 1 time each day exactly as your doctor tells you.
- You can take JANUVIA with or without food.
- Your doctor may do blood tests from time to time to see how well your kidneys are working. Your doctor may change your dose of JANUVIA based on the results of your blood tests.
- Your doctor may tell you to take JANUVIA along with other diabetes medicines. Low blood sugar can happen more often when JANUVIA is taken with certain other diabetes medicines. See “**What are the possible side effects of JANUVIA?**”.
- If you miss a dose, take it as soon as you remember. If you do not remember until it is time for your next dose, skip the missed dose and go back to your regular schedule. Do not take two doses of JANUVIA at the same time.
- If you take too much JANUVIA, call your doctor or local Poison Control Center right away.
- When your body is under some types of stress, such as fever, trauma (such as a car accident), infection or surgery, the amount of diabetes medicine that you need may change. Tell your doctor right away if you have any of these conditions and follow your doctor's instructions.
- Check your blood sugar as your doctor tells you to.

- Stay on your prescribed diet and exercise program while taking JANUVIA.
- Talk to your doctor about how to prevent, recognize and manage low blood sugar (hypoglycemia), high blood sugar (hyperglycemia), and problems you have because of your diabetes.
- Your doctor will check your diabetes with regular blood tests, including your blood sugar levels and your hemoglobin A1C.

What are the possible side effects of JANUVIA?

Serious side effects have happened in people taking JANUVIA.

- See “**What is the most important information I should know about JANUVIA?**”.

- **Low blood sugar (hypoglycemia).** If you take JANUVIA with another medicine that can cause low blood sugar, such as a sulfonylurea or insulin, your risk of getting low blood sugar is higher. The dose of your sulfonylurea medicine or insulin may need to be lowered while you use JANUVIA. Signs and symptoms of low blood sugar may include:

- | | |
|--------------|-------------------|
| • headache | • irritability |
| • drowsiness | • hunger |
| • weakness | • fast heart beat |
| • dizziness | • sweating |
| • confusion | • feeling jittery |

- **Serious allergic reactions.** If you have any symptoms of a serious allergic reaction, stop taking JANUVIA and call your doctor right away. See “**Who should not take JANUVIA?**”. Your doctor may give you a medicine for your allergic reaction and prescribe a different medicine for your diabetes.

- **Kidney problems**, sometimes requiring dialysis

The most common side effects of JANUVIA include:

- upper respiratory infection
- stuffy or runny nose and sore throat
- headache

JANUVIA may have other side effects, including:

- stomach upset and diarrhea
- swelling of the hands or legs, when JANUVIA is used with rosiglitazone (Avandia®). Rosiglitazone is another type of diabetes medicine.

These are not all the possible side effects of JANUVIA. For more information, ask your doctor or pharmacist.

Tell your doctor if you have any side effect that bothers you, is unusual or does not go away.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How should I store JANUVIA?

Store JANUVIA at 68°F to 77°F (20°C to 25°C).

Keep JANUVIA and all medicines out of the reach of children.

General information about the use of JANUVIA

Medicines are sometimes prescribed for purposes that are not listed in Medication Guides. Do not use JANUVIA for a condition for which it was not prescribed. Do not give JANUVIA to other people, even if they have the same symptoms you have. It may harm them.

This Medication Guide summarizes the most important information about JANUVIA. If you would like to know more information, talk with your doctor. You can ask your doctor or pharmacist for additional information about JANUVIA that is written for health professionals. For more information, go to www.JANUVIA.com or call 1-800-622-4477.

What are the ingredients in JANUVIA?

Active ingredient: sitagliptin

Inactive ingredients: microcrystalline cellulose, anhydrous dibasic calcium phosphate, croscarmellose sodium, magnesium stearate, and sodium stearyl fumarate. The tablet film coating contains the following inactive ingredients: polyvinyl alcohol, polyethylene glycol, talc, titanium dioxide, red iron oxide, and yellow iron oxide.

What is type 2 diabetes?

Type 2 diabetes is a condition in which your body does not make enough insulin, and the insulin that your body produces does not work as well as it should. Your body can also make too much sugar. When this happens, sugar (glucose) builds up in the blood. This can lead to serious medical problems.

High blood sugar can be lowered by diet and exercise, and by certain medicines when necessary.

This Medication Guide has been approved by the U.S. Food and Drug Administration.

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For patent information: www.merck.com/product/patent/home.html

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Revised: 02/2014

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DIAB-1124301-0013 08/14


(sitagliptin)
25 mg, 50 mg, 100 mg tablets

what's new at Walgreens

DIABETES-RELATED NEWS FOR WALGREENS CUSTOMERS WITH DIABETES

HEALTHCARE CLINICS FOR PEOPLE WITH DIABETES?

If you have a chronic illness like diabetes, heart disease or arthritis, you know that sometimes lifestyle changes are necessary to prevent complications. These can include getting more physical activity, reducing stress, and seeing many different healthcare providers for check-ups.

Harry Leider, MD, chief medical officer at Walgreens, believes that retail clinics, such as the Healthcare Clinic at select Walgreens locations, can help people get the preventive care they need more easily. He says that Walgreens stores with clinics "can be instrumental in providing care, driving patient engagement, and working in coordination with physicians and other primary care providers to support more patients."

Diabetes education at Walgreens

Sometimes, it can be hard to stay on top of what you should be eating, how to take all your medicines, and which

healthcare providers you should see. That's why Healthcare Clinics can be so helpful. The nurse practitioners and pharmacists at Walgreens can:

- Provide education about diabetes care and buying diabetes supplies
- Help you quit smoking
- Offer support as you try to get more exercise and eat healthier
- Teach you how to take your medicines

If you drop in to see a nurse practitioner or pharmacist while you're shopping at Walgreens, you can get fast answers to all your healthcare questions. You can even ask them about your latest test results, to make sure you understand your current state of health.

Know your numbers

One of the best ways to stay on top of your health is to understand what your test results mean. This is why it is so valuable to talk to your local Walgreens pharmacist. Walgreens is committed to diabetes care and pharmacists are available to help people with diabetes

know their numbers, with several in-store health tests including A1C and cholesterol. You can get your results in minutes, plus each test includes a blood pressure check and a pharmacist consultation about your results. Walgreens accepts Medicare for diabetes testing supplies and carries all major brands.

For more information, or to find a healthcare clinic near you, visit www.Walgreens.com/Clinic.

Patient care services provided by Take Care Health Services, an independently owned professional corporation whose licensed healthcare professionals are not employed by or agents of Walgreen Co. or its subsidiaries, including Take Care Health Systems, LLC.



NEW PRODUCTS AT WALGREENS

WALGREENS NEW A1C TEST KIT

- Easy to use with accurate results
- Measures glycemic control
- Use at home
- Two tests per kit
- Helps you stay on track
- Available in the diabetes products department at Walgreens



WALGREENS NO-STICK GLUCOSE TEST

- For health-conscious adults who may be at-risk or who worry about at-risk family members
- Tests glucose levels in urine
- Affordable and accessible
- At-home screening/ easy to use
- Three tests per kit with English and Spanish instructions



TRUE METRIX™ BLOOD GLUCOSE MONITOR AND STRIPS

- Advanced technologies meter and strips work together as part of the TRUE METRIX™ system to produce accurate results
- Large display for easy reading
- Tiny 0.5 microliter sample size
- As fast as 4 seconds
- Stores 500 results
- Event tagging to empower users to

make the connection between lifestyle choices and results (before meal, after meal, exercise)



diabetes & you

Answers
at *Walgreens*



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Millions of people know Debbie Allen as a judge on the hit TV show "So You Think You Can Dance." Off-camera, Debbie has another important and meaningful role: as an advocate for people with diabetes. She is part of T2 Dance Crew, a national education and wellness program that encourages people with type 2 diabetes to get more physically active—especially by dancing—as an important part of managing their condition.



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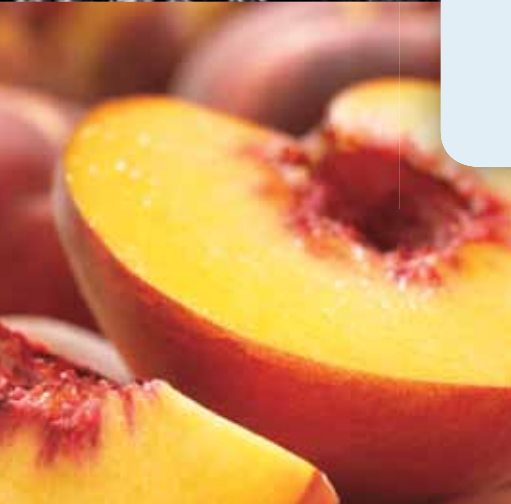
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aspirin, diabetes & heart disease

WHAT YOU SHOULD KNOW ABOUT THE LINK BETWEEN THIS SIMPLE MEDICATION AND THESE SERIOUS CONDITIONS.

By Robert Ehrman, MD

DO YOU, or does someone you know, take an aspirin every day to lower the risk of a heart attack? Heart disease is the No. 1 killer of Americans, and millions of Americans take an aspirin every day.

If you have diabetes, your risk of heart disease is two to four times greater than people without diabetes. Taking an aspirin could be even more important for you than for others.

However, there are some risks in taking aspirin, and not everyone should take it. The American Diabetes Association has provided a set of guidelines to help people know if they should take aspirin.

HOW DOES ASPIRIN LOWER YOUR RISK OF HEART DISEASE?

Heart disease starts when vessels that bring blood to the heart are damaged by unhealthy conditions, such as high blood pressure, high cholesterol and smoking. As the damage continues,

thick, fatty deposits made up of cholesterol and calcium build up inside the blood vessels, called plaque. This narrows the blood vessels and limits the amount of blood that can pass through them.

Sometimes one of these plaques breaks open. When this happens, a blood clot can form in the blood vessel and stop blood from getting back to the heart muscle. Without blood, the heart starts to die—this is a heart attack.

Aspirin can help stop the blood clot from forming. The first thing that happens when a blood clot forms is that cells in your blood, called platelets, stick to the injured area. This happens if the injury is a cut on your finger or if it occurs inside your blood vessels.

Aspirin works by making platelets less sticky so they don't form a blood clot in a potentially dangerous place—such as inside your blood vessels.

CAN TAKING ASPIRIN CAUSE PROBLEMS?

Aspirin can cause some problems, but the risks are very small. Because aspirin makes it harder for your blood to clot, bleeding may occur in your blood vessels as well as other parts of the body. This is because aspirin makes it harder for



your blood to clot, not just in blood vessels but also in other parts of your body.

With any medicine, there is a balance between the benefit and the risk of taking it. With aspirin, the risk of bleeding is very low. You won't bleed to death if you cut your finger while making dinner, but if you're in a bad car accident, it may be harder to stop the bleeding from any injuries that may occur.

Fortunately, serious accidents don't happen too often, but this is still a good reason why you shouldn't take an aspirin without first talking with your healthcare provider.

WHAT DO THE GUIDELINES SAY ABOUT WHO SHOULD TAKE ASPIRIN?

Your healthcare provider will help you understand

3 Risk factors for heart disease

- high risk for bleeding
- taking another blood thinning medicine
- having another condition that slows blood clotting

your heart disease risk, and can decide if you are a low, medium, or high risk based on:

- your age
- your gender (men are at greater risk than women)
- family history of heart disease
- if you smoke
- other medical problems, like high cholesterol, high blood pressure, diabetes and obesity. ■

75–165 mg

The amount of aspirin to be taken daily by men older than 50 or women older than 60 with diabetes who have never had a heart attack or stroke

S. EPATHA MERKERSEN
High Blood Pressure Sufferer &
Coricidin® HBP Spokesperson

"I Have High Blood Pressure and I Only Take Coricidin® HBP to Relieve My Cold Symptoms"

Many cold medicines may raise your blood pressure. Coricidin® HBP won't, because it's specially formulated to relieve cold symptoms without raising blood pressure.

CORICIDIN® HBP. POWERFUL COLD MEDICINE WITH A HEART.



The makers of Coricidin® HBP proudly support the American Heart Association's efforts to improve heart health.

Use as directed.

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slow your eating... and lose weight

IF YOU TEND TO POLISH OFF YOUR MEAL IN A MATTER OF MINUTES,
IT'S WORTH THE EFFORT TO SLOW DOWN.

By Amy Campbell, MS, RD, LDN, CDE

DO YOU STAND OVER THE SINK and wolf down your meal? Do you grab a sandwich to go and chomp it down quickly in your car? Are you a multitasker, eating, working and watching television all at the same time? If so, you're probably eating much too fast and very likely are eating more than you realize.

Many people in the United States eat too fast. It's part of our culture. But there is a price to pay when racing through your meals.

SLOWING IT DOWN

Changing your eating habits can seem hard. But if you tend to polish off your meal in a matter of minutes, it's worthwhile making an effort to slow down. Not only can you shave off calories from your meal, you might feel full sooner and end up eating even less.

It takes about 20 minutes from the time you start eating for your brain to get the signal that you've had enough to eat. Insulin, leptin, ghrelin and cortisol are hormones



that are involved in invoking a sense of fullness by sending messages to the brain. If you gulp your food down before 20 minutes is up, you won't get the signal that you're actually full. And in the meantime, you may end up eating more. Give your hormones a chance to do their jobs.

You might even find

that slowing down your eating rate can help you better manage your blood glucose levels, allowing your diabetes medicine to work better with the digestion of your food.

Take the time to enjoy your food and take pleasure in eating. In turn, you'll feel better and may just lose a few pounds in the process. ■

4 consequences of poor eating habits

Bloating and discomfort. When you eat too quickly, you swallow more air. This can leave you feeling bloated, gassy and uncomfortable.

Acid reflux. Also known as gastroesophageal reflux or heartburn, acid reflux can lead to more serious health problems. A recent study showed that people who ate too quickly were more likely to have acid reflux than people who ate more slowly.

Diabetes risk. Eating too fast may also raise the risk of type 2 diabetes. Researchers found that people who ate quickly were two and a half times more likely to develop diabetes than slower eaters. This may be linked to the fact that fast eaters are more likely to be overweight which, in turn, increases diabetes risk.

Weight gain. In one study, 30 average-weight young women were given a lunch of pasta and tomato sauce on two separate occasions. The first time, they were told to eat until they were full, but to eat as quickly as possible. The second time, they were asked to eat slowly and put their fork down between bites. When they ate quickly, the women consumed 646 calories in nine minutes; when they ate slowly, they consumed 579 calories in 29 minutes. The women also reported that they were less satisfied and felt hungry when they ate quickly compared with when they ate slowly. In another study, researchers discovered that people who reported eating quickly until they were full were three times as likely to be overweight than slower eaters who stopped eating before they were full.

I need to get my A1C number headed in a different direction.

If you have **type 2 diabetes**, your A1C number may be going in the wrong direction. To help change it, ask your doctor if adding TRADJENTA may be right for you.

Prescription TRADJENTA is a once-a-day pill that, along with diet and exercise, may help lower blood sugar. Managing your blood sugar is important as it may mean a lower A1C number.

Talk to your doctor to see if TRADJENTA could help you get your A1C number headed in a different direction. To learn more, go to **Tradjenta.com/dy**.

Tradjenta®
(linagliptin) tablets 5mg

What is TRADJENTA?

TRADJENTA is a prescription medicine that is used along with diet and exercise to lower blood sugar in adults with type 2 diabetes.

TRADJENTA is not for people with type 1 diabetes or for people with diabetic ketoacidosis (increased ketones in the blood or urine).

If you have had inflammation of the pancreas (pancreatitis) in the past, it is not known if you have a higher chance of getting pancreatitis while you take TRADJENTA.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about TRADJENTA?

Serious side effects can happen to people taking TRADJENTA, including inflammation of the pancreas (pancreatitis), which may be severe and lead to death. Before you start taking TRADJENTA, tell your doctor if you have ever had pancreatitis, gallstones, a history of alcoholism, or high triglyceride levels.

Stop taking TRADJENTA and call your doctor right away if you have pain in your stomach area (abdomen) that is severe and will not go away. The pain may be felt going from your abdomen through to your back. The pain may happen with or without vomiting. These may be symptoms of pancreatitis.

Who should not take TRADJENTA?

Do not take TRADJENTA if you are allergic to linagliptin or any of the ingredients in TRADJENTA.

Symptoms of a serious allergic reaction to TRADJENTA may include rash, itching, flaking or peeling; raised red patches on your skin (hives); swelling of your face, lips, tongue and throat that may cause difficulty breathing or swallowing. If you have any symptoms of a serious allergic reaction, stop taking TRADJENTA and call your doctor or go to the emergency room right away.

What should I tell my doctor before using TRADJENTA?

Tell your doctor about all your medical conditions, including if you have or have had inflammation of your pancreas (pancreatitis).

Tell your doctor about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements. TRADJENTA may affect the way other medicines work, and other medicines may affect how TRADJENTA works. Especially tell your doctor if you take

- other medicines that can lower your blood sugar. If you take TRADJENTA with another medicine that can cause low blood sugar, such as sulfonylurea or insulin, your risk of getting low blood sugar is higher. The dose of your sulfonylurea or insulin may need to be lowered while you take TRADJENTA.
- rifampin (Rifadin®, Rimactane®, Rifater®, Rifamate®)*, an antibiotic that is used to treat tuberculosis.

Tell your doctor if you are pregnant or planning to become pregnant or are breastfeeding or plan to breastfeed.

What are the possible side effects of TRADJENTA?

TRADJENTA may cause serious side effects, including

- Inflammation of the pancreas (pancreatitis).
- Low blood sugar (hypoglycemia), especially if you take TRADJENTA with another medicine that can cause low blood sugar. Signs and symptoms of low blood sugar may include headache, drowsiness, weakness, dizziness, confusion, irritability, hunger, fast heartbeat, sweating, or feeling jittery.
- Allergic (hypersensitivity) reactions can happen after your first dose or up to 3 months after starting TRADJENTA. Symptoms may include swelling of your face, lips, throat, and other areas on your skin; difficulty with swallowing or breathing; raised, red areas on your skin (hives); skin rash, itching, flaking, or peeling.

The most common side effects of TRADJENTA include stuffy or runny nose, sore throat, cough and diarrhea.

These are not all the possible side effects of TRADJENTA. For more information, ask your doctor or pharmacist. **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.**

See next page for additional information about TRADJENTA.

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MEDICATION GUIDE

TRADJENTA® (TRAD gen ta) (linagliptin) Tablets

Read this Medication Guide carefully before you start taking TRADJENTA and each time you get a refill. There may be new information. This information does not take the place of talking to your doctor about your medical condition or your treatment. If you have any questions about TRADJENTA, ask your doctor or pharmacist.

What is the most important information I should know about TRADJENTA?

Serious side effects can happen to people taking TRADJENTA, including inflammation of the pancreas (pancreatitis) which may be severe and lead to death.

Certain medical problems make you more likely to get pancreatitis.

Before you start taking TRADJENTA:

Tell your doctor if you have ever had:

- inflammation of your pancreas (pancreatitis)
- stones in your gallbladder (gallstones)
- a history of alcoholism
- high blood triglyceride levels

Stop taking TRADJENTA and call your doctor right away if you have pain in your stomach area (abdomen) that is severe and will not go away. The pain may be felt going from your abdomen through to your back. The pain may happen with or without vomiting. These may be symptoms of pancreatitis.

What is TRADJENTA?

- TRADJENTA is a prescription medicine used along with diet and exercise to lower blood sugar in adults with type 2 diabetes.
- TRADJENTA is not for people with type 1 diabetes.
- TRADJENTA is not for people with diabetic ketoacidosis (increased ketones in the blood or urine).
- If you have had pancreatitis in the past, it is not known if you have a higher chance of getting pancreatitis while you take TRADJENTA.

It is not known if TRADJENTA is safe and effective in children under 18 years of age.

Who should not take TRADJENTA?

Do not take TRADJENTA if you:

- are allergic to linagliptin or any of the ingredients in TRADJENTA. See the end of this Medication Guide for a complete list of ingredients in TRADJENTA.

Symptoms of a serious allergic reaction to TRADJENTA may include:

- skin rash, itching, flaking or peeling
- raised red patches on your skin (hives)
- swelling of your face, lips, tongue and throat that may cause difficulty in breathing or swallowing
- difficulty with swallowing or breathing

If you have any of these symptoms, stop taking TRADJENTA and contact your doctor or go to the nearest hospital emergency room right away.

What should I tell my doctor before using TRADJENTA?

Before you take TRADJENTA, tell your doctor if you:

- have or have had inflammation of your pancreas (pancreatitis).
- have any other medical conditions
- are pregnant or plan to become pregnant. It is not known if TRADJENTA will harm your unborn baby. If you are pregnant, talk with your doctor about the best way to control your blood sugar while you are pregnant.

- are breastfeeding or plan to breastfeed. It is not known if TRADJENTA passes into your breast milk. Talk with your doctor about the best way to feed your baby if you take TRADJENTA.

Tell your doctor about all the medicines you take, including prescription and non-prescription medicines, vitamins, and herbal supplements.

TRADJENTA may affect the way other medicines work, and other medicines may affect how TRADJENTA works.

Especially tell your doctor if you take

- other medicines that can lower your blood sugar
- rifampin (Rifadin®, Rimactane®, Rifater®, Rifamate®)*, an antibiotic that is used to treat tuberculosis

Ask your doctor or pharmacist for a list of these medicines if you are not sure if your medicine is one that is listed above.

Know the medicines you take. Keep a list of them and show it to your doctor and pharmacist when you get a new medicine.

How should I take TRADJENTA?

- Take 1 tablet 1 time each day with or without food.
- Your doctor will tell you when to take TRADJENTA.
- Talk with your doctor if you do not understand how to take TRADJENTA.
- If you miss a dose, take it as soon as you remember. If you do not remember until it is time for your next dose, skip the missed dose and go back to your regular schedule. Do not take two doses of TRADJENTA at the same time.
- Your doctor may tell you to take TRADJENTA along with other diabetes medicines. Low blood sugar can happen more often when TRADJENTA is taken with certain other diabetes medicines. See **"What are the possible side effects of TRADJENTA?"**
- If you take too much TRADJENTA, call your doctor or Poison Control Center at 1-800-222-1222 or go to the nearest hospital emergency room right away.
- When your body is under some types of stress, such as fever, trauma (such as a car accident), infection, or surgery, the amount of diabetes medicine that you need may change. Tell your doctor right away if you have any of these conditions and follow your doctor's instructions.
- Check your blood sugar as your doctor tells you to.
- Stay on your prescribed diet and exercise program while taking TRADJENTA.
- Your doctor will check your diabetes with regular blood tests, including your blood sugar levels and your hemoglobin A1C.

What are the possible side effects of TRADJENTA?

TRADJENTA may cause serious side effects, including:

- See **"What is the most important information I should know about TRADJENTA?"**
- **low blood sugar (hypoglycemia).** If you take TRADJENTA with another medicine that can cause low blood sugar, such as a sulfonylurea or insulin, your risk of getting low blood sugar is higher. The dose of your sulfonylurea medicine or insulin may need to be lowered while you take TRADJENTA. Signs and symptoms of low blood sugar may include:

- | | |
|-------------------|-------------------|
| ○ headache | ○ dizziness |
| ○ drowsiness | ○ confusion |
| ○ weakness | ○ irritability |
| ○ hunger | ○ sweating |
| ○ fast heart beat | ○ feeling jittery |

- **Allergic (hypersensitivity) reactions.** Serious allergic reactions can happen after your first dose or up to 3 months after starting TRADJENTA. Symptoms may include:

- swelling of your face, lips, throat, and other areas on your skin
- difficulty with swallowing or breathing
- raised, red areas on your skin (hives)
- skin rash, itching, flaking, or peeling

If you have these symptoms, stop taking TRADJENTA and call your doctor or go to the nearest hospital emergency room right away.

The most common side effects of TRADJENTA include:

- stuffy or runny nose and sore throat
- cough
- diarrhea

These are not all the possible side effects of TRADJENTA. For more information, ask your doctor or pharmacist.

Tell your doctor if you have any side effect that bothers you or that does not go away.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How should I store TRADJENTA?

- Store TRADJENTA between 68°F and 77°F (20°C and 25°C).

Keep TRADJENTA and all medicines out of the reach of children.

General information about the safe and effective use of TRADJENTA.

Medicines are sometimes prescribed for purposes other than those listed in Medication Guides. Do not use TRADJENTA for a condition for which it was not prescribed. Do not give TRADJENTA to other people, even if they have the same symptoms you have. It may harm them.

This Medication Guide summarizes the most important information about TRADJENTA. If you would like more information, talk with your doctor. You can ask your pharmacist or doctor for information about TRADJENTA that is written for health professionals.

For more information, go to www.TRADJENTA.com or call Boehringer Ingelheim Pharmaceuticals, Inc. at 1-800-542-6257, or (TTY) 1-800-459-9906.

What are the ingredients in TRADJENTA?

Active Ingredient: linagliptin

Inactive Ingredients: mannitol, pregelatinized starch, corn starch, copovidone, and magnesium stearate. The film coating contains the following inactive ingredients: hypromellose, titanium dioxide, talc, polyethylene glycol, and red ferric oxide.

This Brief Summary is based on the Medication Guide approved by the U.S. Food and Drug Administration.

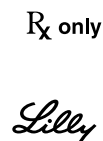
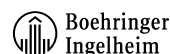
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Revised: May 2014

TJ-CBS-6-14

TJ625023CONS-A



R_x only

HEALTHY RECIPES FROM chef cheryl forberg

OF NBC'S "THE BIGGEST LOSER"

TURKEY ROULADE

Serves 8

- ½ boneless, skinless turkey breast, about 1 ½ pounds
- 1 ½ cups Cornbread and Dried Fruit Dressing (recipe follows)
- Kitchen twine
- ¼ teaspoon smoked paprika
- ¼ teaspoon black pepper
- ¼ teaspoon marjoram
- ¼ teaspoon thyme
- ¼ teaspoon sage
- 1 tablespoon grapeseed or olive oil
- Plastic wrap

1. Preheat oven to 350°F.
2. Place large piece of plastic wrap on countertop. Place turkey breast half on plastic and cover. Cover with additional plastic wrap. Using meat mallet, pound turkey to rectangle about 9 x 6 inches, about ¼-inch thick.
3. Remove plastic wrap from top of turkey and spread dressing evenly lengthwise over surface, almost to edge. Roll turkey lengthwise. With kitchen twine, tie roulade lengthwise once and in several places across turkey. Discard plastic wrap.
4. In small bowl, mix together spices. Rub canola oil over all surfaces of roulade; rub spice blend evenly over roulade.

5. Place roulade in shallow roasting pan, then place in oven. Roast for 45-60 minutes or until internal temperature measured with an instant-read thermometer reads 155°F.

6. Remove roulade from oven and let rest 15 minutes before carefully removing twine and slicing into 16 ½-inch slices.

NUTRITION INFORMATION PER SERVING:

Cal. 140, **Total Fat** 3.5 g, (Sat. <1 g, Trans 0 g), **Cholesterol** 65 mg, **Carbs** 5 g, **Fiber** 0 g, **Sugars** 1 g, **Protein** 22 g, **Sodium** 150 mg

CORNBREAD AND DRIED FRUIT DRESSING

Makes 6 cups
(enough for Turkey Roulade and 8 side dish servings).

- 4 cups cornbread cubes, dried
- 4 ounces lean Italian turkey sausage, casing removed
- 1 tablespoon grapeseed or olive oil
- 1 cup chopped yellow or white onions
- ¼ cup chopped celery
- ¼ cup chopped carrot
- 1 small garlic clove, crushed
- 4 each, dried apricots and pitted dried plums, coarsely chopped
- ½ teaspoon dried thyme
- ¾ teaspoon dried sage
- ¼ teaspoon dried marjoram
- 1 cup fat-free, low-sodium chicken broth
- ¼ cup minced fresh parsley
- ½ teaspoon salt
- ¼ teaspoon ground black pepper
- 1 cooking oil spray
- egg, lightly beaten



1. Preheat oven to 350°F. Place cornbread cubes in large bowl and set aside.

2. In small nonstick skillet, cook sausage over medium-high heat, crumbling and stirring until browned and cooked through. Drain well and set aside.

3. In large nonstick skillet, heat canola oil over medium heat. Stir in onions, celery and carrot; cook 5 minutes, stirring frequently. Add garlic and cook for 1 minute longer, but don't allow garlic to brown. Stir in sausage, apricots, plums, thyme, sage, marjoram and ¼ cup broth. Bring to a boil. Reduce heat and simmer 3 minutes. Remove from heat; pour vegetable mixture over cornbread. Add parsley and stir well. Season with salt and pepper. (Dressing may be prepared to this stage a day ahead and refrigerated, covered).

4. Whisk together egg and remaining ¾ cup broth and pour over cornbread mixture, tossing well. Spray 2-quart baking dish with canola oil cooking spray (use larger baking dish if not reserving dressing for Turkey Roulade) and transfer all but 1 ½ cups of dressing to baking dish. Cover dish with foil and set aside.

5. After Turkey Roulade has been in oven 30 minutes, place covered baking dish of dressing in oven. After 15 minutes (or when internal temperature of roulade, measured with instant-read thermometer, is 155°F), remove roulade from oven and remove foil from baking dish with dressing. Continue baking dressing for about 15 minutes or until top begins to brown.

NUTRITION PER (½ CUP) SERVING:

Cal. 100, **Total Fat** 3.5 g, **Saturated Fat** 1 g, **Cholesterol** 30 mg, **Sodium** 310 mg, **Carbs** 12 g, **Fiber** 1 g, **Sugars** 4 g, **Protein** 3 g

HOLIDAY RAPINI SAUTÉ Serves 8

- 2 tablespoons olive or grapeseed oil
- 3 bunches rapini (broccoli rabe), about 3 ¼ pounds, rinsed, trimmed and cut into 3-inch pieces
- 3 large garlic cloves, minced or crushed
- ½ teaspoon salt
- 1 ½ cups diced roasted red bell pepper, from one 12-ounce jar
- 3 tablespoons slivered almonds, toasted

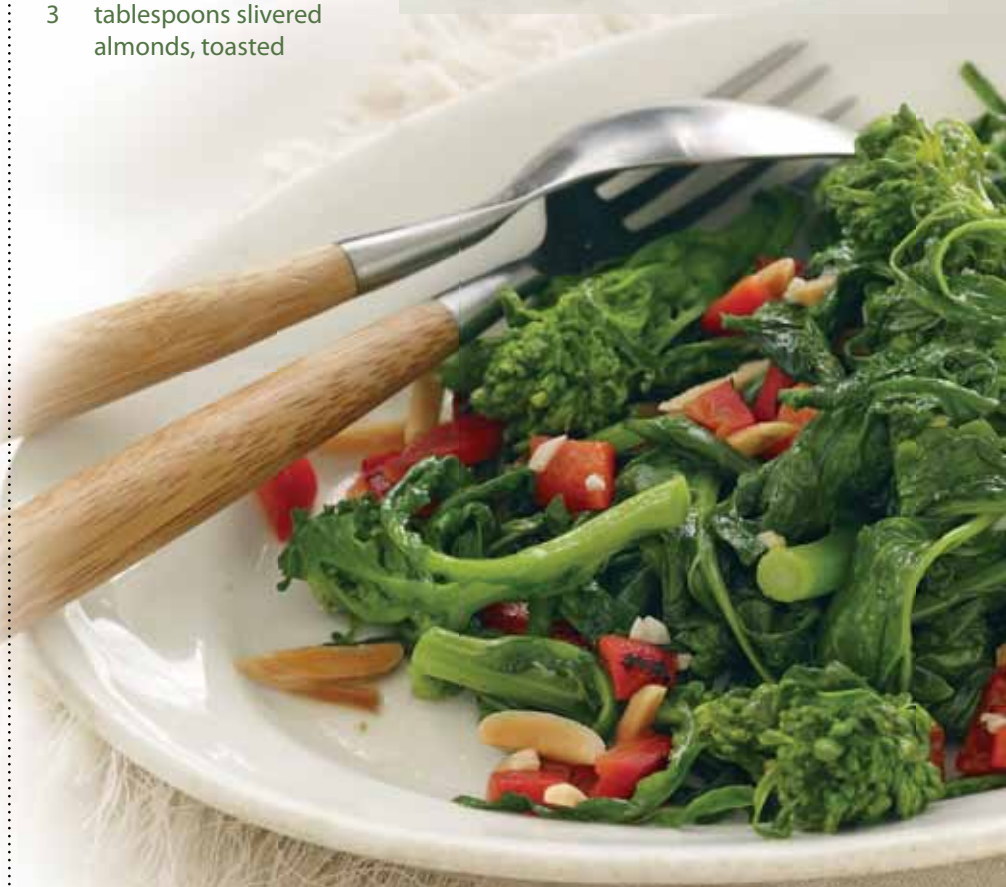
1. Heat very large Dutch oven over medium-high heat. Add canola oil to pan; add rapini, garlic and salt. Toss well, reduce heat to medium-low and cover. Cook for 10 minutes or until rapini are tender, turning a few times while cooking.

2. Add roasted pepper and toasted almonds, toss and serve.

3. Cook's note: If your rapini is on the bitter side, drizzle a tablespoon or so of balsamic vinegar on top of it.

NUTRITION INFORMATION PER SERVING:

Cal. 110, **Total Fat** 5 g, (Sat. 0 g, Trans 0 g), **Cholesterol** 0 mg, **Carbs** 11 g, **Fiber** <1 g, **Sugars** 3 g, **Protein** 7 g, **Sodium** 55 mg



Recipes adapted with permission from *A Small Guide For Losing Big: From the Nutritionist for NBC's The Biggest Loser*, by Cheryl Forberg, RD. Copyright © 2014 Flavor First LLC.

For more recipes and nutrition tips, please visit www.cherylforberg.com

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saw noticeable
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Diabetes can affect the skin by drying it out, leading to problems associated with skin cracks and discomfort. Fortunately, this can be treated with moisturizing formulas that address the needs of people living with diabetes. With a blend of moisturizers & vitamins, Gold Bond® Ultimate Diabetics' Dry Skin Relief formulas replenish vital moisture and soothe problem skin.

Dermatologist tested among people with diabetes, these formulas are fragrance free, non-greasy, hypoallergenic, and appropriate for daily use. In fact, in a clinical study among diabetic sufferers, 9 out of 10 experienced noticeable skin improvement in just 1 hour after using Diabetics' Dry Skin Relief.*

supplementing your meal plan

YOU MAY NEED TO TAKE SUPPLEMENTS IF YOU DON'T GET YOUR DAILY NUTRITION REQUIREMENTS FROM FOOD.

By Janis Roszler, MS, RD, LD/N, CDE, FAND

OUR BODIES use vitamins and minerals to perform basic functions, such as building bone and muscle. If you eat a variety of healthy foods that include vegetables, fruits, whole grains and low-fat dairy products, you'll be more likely to meet your body's needs for vitamins and minerals.

The American Diabetes Association (ADA) doesn't advise people with diabetes to take specific vitamins or minerals, but you may need to do so if you are unable to get what you need each day from food, or if any of the special needs or concerns in the box to the right apply to you. ■

SMOKING OR DRINKING ALCOHOL REGULARLY?

Smoking increases the body's need for vitamin C and vitamin E.

It may also make it harder for calcium supplements to protect the body's bones.

Alcohol can make it more difficult for your body to absorb and use certain nutrients, such as vitamins A, D and E.



3 KEYS TO KEEP YOUR BODY HEALTHY

1. Know your meds.

Some prescription medicines, if taken on a regular basis, make it harder for your body to absorb or use certain nutrients. The diabetes medicine metformin, for example, can lower your ability to absorb vitamin B12. Many blood pressure and heart disease medications can interact with nutrients, as well. Ask your healthcare provider if any of your medicines affects your nutritional needs and if you should be taking a supplement.

2. Eat a balanced diet to get all the nutrients you need.

Many people with diabetes cut way back on their carbohydrate intake. While eating fewer carbohydrates may make it easier to control blood glucose levels, you may not get enough of the other important nutrients your body needs for good health. Carbohydrate-rich foods provide energy as well as many nutrients, including vitamins, minerals and phytonutrients. It's fine to limit the amount of carbohydrate-rich foods you eat, such as pasta, fruits, starchy vegetables, milk and yogurt, but don't cut them out altogether. A dietitian can help you choose healthy, carbohydrate-rich foods that won't negatively affect your blood glucose control. Vegetarians who don't eat any animal products may need to take zinc, calcium, vitamin B12 and vitamin D supplements.

3. Get enough Vitamin D.

Research shows that people who have low levels of vitamin D are more at risk for heart attacks and heart disease. One way to increase your body's vitamin D level is to spend 10 minutes in the sun, three times a week, without sunscreen. As we age, our skin has a harder time producing vitamin D. If you are older, you may need to take vitamin D supplements.

NEW!

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Try a **FREE** box!

See mail-in rebate instructions below.

*Dispose of in a sharps collector.

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1. Tell your doctor that you are interested in trying the BD AutoShield Duo™ Pen Needle (Prescription is required).
2. Purchase a box of BD AutoShield Duo™ Pen Needles (100-count product only) at the pharmacy. Rebate up to \$75.00.
3. Complete this rebate request and mail along with your valid pharmacy receipt with product name and price circled, and UPC code from bottom of carton.
4. Mail this form to: Try BD AutoShield Duo™ Pen Needles FREE REBATE, P.O. Box 2011Y, Rock Island, IL 61204-2011.

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live healthy lives

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ATHLETE'S FOOT ISN'T JUST FOR ATHLETES

Athlete's foot is a common but treatable fungal infection affecting about 1 in 5 people at some point in their lives. Symptoms of athlete's foot include itchy, cracking, dry feet or feet with flaky skin and small tears (fissures). Although anyone can get athlete's foot, it's more common in people who suffer from diabetes. If you have diabetes, it is especially important to maintain a healthy foot care routine. Here are some simple ways to treat athlete's foot and help prevent it from coming back.

THE DOS AND DON'TS OF TREATING ATHLETE'S FOOT


- DO use your athlete's foot treatment for the duration of time specified on the product package. Consult your doctor if you have recurring athlete's foot or an infection that doesn't respond to antifungal treatment.
- DON'T treat your athlete's foot with a moisturizer. Only an antifungal medication like LamisilAT® can treat athlete's foot.
- DO treat both feet. In 80% of cases, athlete's foot affects both feet at the same time, even if you do not notice the symptoms.
- DON'T stop using the antifungal treatment just because the athlete's foot symptoms are gone.

PREVENTATIVE FOOT CARE

- Wash your feet thoroughly with soap and water daily. Dry them carefully and completely, especially between the toes.
- Inspect your feet every day. If you cannot see the bottoms of your feet, use a mirror or ask someone for help. If you find red spots, cuts, swelling, blisters, sores or some other abnormality, consult your doctor.
- Avoid walking barefoot and wear shoes that fit properly and do not pinch your feet.
- Wear clean cotton socks, and change them during the day if feet become sweaty. Alternate shoes every day to allow them to dry completely.
- See your doctor for an annual foot exam.

If you have diabetes and you are unsure whether you have athlete's foot, consult a doctor before using an OTC antifungal treatment. It is especially important to talk to your doctor if you have neuropathy, vascular disease or foot deformities.

For coupons and additional information, please visit:
www.LamisilAT.com



Use products as directed.

*Based on Source Healthcare Analytics 2013 Data.

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- ☒ BURNING
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Grape Glucose Tablets, 50 ct.

CONSUMER: Present this coupon to the cashier at time of purchase. Limit one coupon per purchase. Cannot be combined with any other offer, including store loyalty programs. **DO NOT DOUBLE.** This offer does not apply to prescription purchases. **RETAILER:** We will reimburse you the face value of this coupon plus 8¢ handling provided you and the consumer have complied with the terms of this offer. Invoice proving purchases of sufficient stock to cover presented coupons must be shown on request. Any other application may constitute fraud. Transaction may not be submitted to Medicare, Medicaid or any private insurer as a claim. Coupon void where prohibited, taxed or restricted. Consumer must pay any sales tax. Cash value .001¢. Reproduction of this coupon is expressly prohibited. No cash back. **Mail to:** Nipro Diagnostics, Inmar Dept. #21292 One Fawcett Drive, Del Rio, TX 78840

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0021292-105534



the dash diet for people with diabetes

THIS MEAL PLAN HAS BEEN RATED NO. 1 FOUR TIMES.
IS IT RIGHT FOR YOU?

By Toby Smithson, RDN, LDN, CDE

HAVE YOU HEARD

of the DASH diet? DASH stands for Dietary Approaches to Stop Hypertension. Hypertension is another word for high blood pressure. Health experts in the *U.S. News and World Report* ranked the DASH diet the best overall diet for the last four years. The DASH diet was compared with 20 to 32 of the most popular diets during those years. The expert panel also ranked the DASH diet as the best diet for diabetes.

WHAT IS THE DASH DIET?

The DASH diet was developed at the National Institutes of Health in an effort to lower high blood



pressure. Researchers of the DASH diet found that eating foods that are high in potassium, calcium

and magnesium and lower in sodium can help lower blood pressure. Better still, the DASH diet helps people who already have high blood pressure.

THE DASH DIET AND DIABETES

Besides lowering blood pressure, the DASH diet can lower cholesterol and even help lower fasting blood glucose and A1C levels in people with type 2 diabetes.

Also, the DASH diet is easily adjusted for weight loss. The main benefit of the DASH diet for people with diabetes, however, is its ability to reduce the risk of heart attack and stroke.

WHAT ELSE DO YOU NEED TO KNOW ABOUT THE DASH DIET?

While whole grains, fruit, milk and yogurt, starchy vegetables and beans are healthy, they also contain carbohydrates. Therefore, it's important to plan your DASH diet with your diabetes menu in mind. Your dietitian can help make sure you get the right amount of carbohydrates while following the DASH eating plan. You can reap the benefits of the best diet for high blood pressure and diabetes at the same time. ■

Two-out-of-three people with diabetes have high blood pressure, or take a blood pressure medicine.

— The American Diabetes Association

2

REASONS PEOPLE WITH DIABETES NEED TO BE AWARE OF BLOOD PRESSURE NUMBERS

1

High blood pressure is two times as common among people with diabetes as it is among people without diabetes.

2

High blood pressure can lead to the same problems that result when diabetes is not controlled: heart attack, stroke and kidney failure. If you have both diabetes and high blood pressure, it's very important to manage both conditions.

FOODS THAT ARE PART OF THE DASH DIET

Food	Servings
whole grains	6–8 daily
fruit and vegetables	4–5 daily
low-fat dairy	2–3 daily
nuts, seeds or beans	4–5 per week
lean meat, poultry or fish	6 ounces per meal
sweets or added sugar	5 or fewer per week

diabetes & your bones

HERE ARE SOME EASY WAYS TO PROTECT
YOUR BONE HEALTH AS YOU AGE.

By Martha Funnell, MS, RN, CDE



YOU ARE PROBABLY aware of possible long-term complications of diabetes: heart disease and eye, kidney and nerve damage. But you may not be aware that diabetes can increase your risk for osteoporosis and fractures—especially as you get older.

Q WHAT IS OSTEOPOROSIS?

Osteoporosis means porous bones. Porous bones are full of pores, or holes. When the bones are more porous, which increases with age, they are less dense and are more likely to break.

Your bones grow throughout your life as some bone cells die off and new cells grow to replace them. You replace most of your bone matter every 10 years. If you have osteoporosis, you lose bone cells faster than you can replace them. Over time, your bones become more brittle from the loss in density.

Q HOW CAN I FIND OUT IF I HAVE OSTEOPOROSIS?

Osteoporosis is diagnosed with a dual-energy X-ray absorptiometry (DEXA) scan. Although it sounds scary, this test is painless and quick to perform. You lie on an X-ray table, and a machine measures the density of the bones in your hip, spine and arm. The usual recommendation is that women 65 and older and men 70 and older have a DEXA scan. However, if you have diabetes and are a postmenopausal woman or man over 50, ask your provider if you need to be screened for osteoporosis.

Q WHAT CAN I DO TO LOWER MY RISK FOR OSTEOPOROSIS?

If you have diabetes, keeping your blood

4 WAYS TO PREVENT OSTEOPOROSIS AND MANAGE YOUR DIABETES

1 Weight-bearing activities, such as walking, dancing or aerobics, can help build or maintain your bones. This is especially important if you are trying to lose weight, because losing weight may actually lower bone density.

2 Strength-training exercises can help build strong bones and muscles. Strength-training includes the use of hand weights, resistance bands, kettle bells and weight machines at the gym.

3 Calcium and vitamin D are both needed for healthy bones. Dairy products are high in calcium. Low-fat and fat-free milk have the same amount of calcium as the higher fat products. Broccoli, tofu and calcium-fortified orange juice also provide calcium.

4 Smoking cessation. Talk with your healthcare provider about ways to cut down or stop smoking.

glucose and A1C in the target range can help to lower your risk for bone loss. If you are at risk for osteoporosis, you can also ask your healthcare provider the following questions:

- Do I need a DEXA scan?
- Do I need to have my vitamin D level checked?
- Would taking a calcium supplement and/or vitamin D be a good idea for me?
- Should I take medicine for osteoporosis, and if so, which one is the best for me to take?

8

RISKS FOR OSTEOPOROSIS

- aging
- low estrogen
- family history of osteoporosis
- taking steroid medicines
- low calcium and vitamin D intake
- not getting enough physical activity
- smoking
- drinking too much alcohol

Q WHAT'S THE LINK BETWEEN DIABETES AND BONE HEALTH?

- Blood glucose levels can affect your bone health.
- Higher levels of glucose can weaken bone structure.
- Diabetes medications called TZDs (Avandia and Actos) increase the risk for fractures.
- Peripheral arterial disease, nerve damage and hypoglycemia (low blood glucose) also may increase the risk for fractures.

Q WHY DO PEOPLE WITH DIABETES HAVE A HIGHER RISK FOR FRACTURES?

People with type 1 diabetes don't make insulin, which is needed for the body to build strong bones. Children with

type 1 diabetes sometimes have low bone growth, which can result in osteoporosis and a high risk for fractures as they grow up.

Some people with type 2 diabetes have higher than average bone density scores, but are still prone to fractures. This may be due to the fact that bone density measures are less accurate among people who are overweight, and many people with diabetes are overweight.

Q HOW IS OSTEOPOROSIS TREATED?

If you are diagnosed with osteoporosis, one of the most important things you can do is to talk with your healthcare provider about the medicines that can stop bone loss and build up new bones. ■

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dominique wilkins

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The publisher is not responsible for the content of the health information provided.*

BUFFALO-STYLE CHICKEN BITES

Makes 10 servings

½ cup light mayonnaise	3 tablespoons reduced-sodium bottled hot pepper sauce
¼ cup reduced-fat sour cream	
¼ cup reduced-fat blue cheese crumbles	2 tablespoons plain dry whole wheat bread crumbs
1 tablespoon lemon juice	1 shallot, minced
¼ teaspoon black pepper	1 garlic clove, minced
1 pound ground chicken breast	½ teaspoon salt
1 small red bell pepper, minced	2 ½ cups celery sticks
	2 ½ cups carrot sticks

1. Preheat the oven to 425°F. Spray a large baking pan with cooking spray.
2. To make the dressing, combine mayonnaise, sour cream, blue cheese, lemon juice and pepper in a small bowl.
3. Cover and refrigerate to allow the flavors to blend, about 15 minutes.
4. Meanwhile, combine ground chicken, bell pepper, 2 tablespoons hot pepper sauce, bread crumbs, shallot, garlic, and salt in a large bowl until well mixed. With lightly moistened hands, form the mixture into 30 (1 ¼-inch) balls. Place on the baking sheet. Bake until meatballs are lightly browned and cooked through, 12-15 minutes.
5. Transfer meatballs to a large bowl. Add the remaining 1 tablespoon hot pepper sauce and gently toss until coated. Serve with the dressing, celery and carrot sticks.

NUTRITION INFORMATION PER SERVING (3 MEATBALLS WITH SCANT 2 TABLESPOONS DRESSING, ½ CUP CELERY STICKS, ½ CUP CARROT STICKS):

Cal. 180, **Total Fat** 12 g, (Sat. 1.5 g, Trans 0 g), **Cholesterol** 40 mg, **Sodium** 310 mg, **Carbs** 9 g, **Fiber** 2 g, **Protein** 10 g



SLOW BERRY COBLER

Makes 6 servings

Filling:		1 ¼ cup all-purpose flour
1 package (10-ounce) unsweetened frozen, sliced or 1 ½ cups fresh strawberries (10-ounce)	1	1 tablespoon fresh lemon juice
Topping:		¾ cup reduced-fat baking mix, such as Bisquick Heart Healthy
1 package unsweetened frozen or 1 ½ cups fresh blueberries (10-ounce)	3	3 tablespoons skim milk
1 package unsweetened frozen or 1 ½ cups fresh raspberries	2 ½	2 ½ tablespoons sugar, divided
1 ¼ cup sugar	1	1 tablespoon unsalted butter, melted
	1	1 teaspoon cinnamon

1. Spray the insert of a slow cooker with nonstick cooking spray.
2. In a large mixing bowl, toss together strawberries, blueberries, raspberries, sugar, flour and lemon juice. Transfer to a 4-quart slow cooker. Cook on high until nearly heated through, 1 ½ hours.
3. Meanwhile, in a medium bowl, use a fork to blend the baking mix, milk, 1 ½ tablespoons sugar, and melted butter to form a crumbly dough. Combine remaining tablespoon of sugar and cinnamon in a small bowl and set aside.
4. Stir the berry mixture in the slow cooker. Drop bits of dough on top of the fruit in the slow cooker and sprinkle the reserved cinnamon sugar on top. Continue to cook on high for 2 to 2 ½ more hours until the topping has puffed and the fruit is bubbling. *Note: the topping will not be browned.*

NUTRITION INFORMATION PER SERVING (2/3 CUP):

Cal. 210, **Total Fat** 3.5 g, (Sat. 1 g, Trans 0 g), **Cholesterol** 5 mg, **Carbs** 43 g, **Fiber** 4 g, **Protein** 3 g, **Sodium** 170 mg



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why, oh why, is my blood glucose high?

LET'S TAKE A LOOK AT THREE COMMON REASONS
YOUR LEVELS MIGHT BE HIGHER THAN NORMAL.

By Gretchen L. Edstrom, MSN, RN, CDE,
Joslin Diabetes Center Affiliate at Lawrence & Memorial



DESPITE YOUR BEST EFFORTS, your blood glucose levels can get too high, and you may not know why. Usually, the culprit is one of three things:

- carbohydrates
- stress (*mental or physical*)
- medications

Experts from the Joslin Diabetes Center look at these high blood glucose triggers, and what you can do to get your levels back under control.

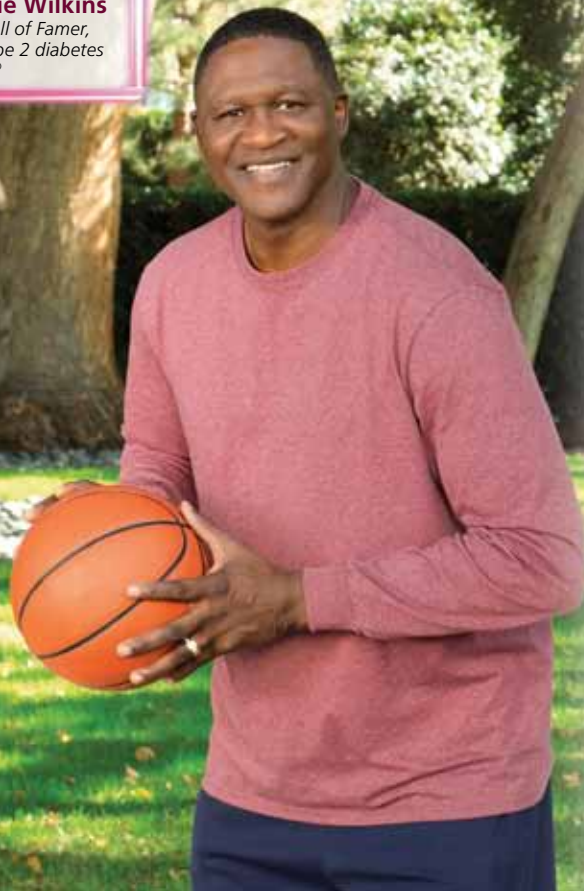
carbs

You probably know that not all foods contain carbohydrates, but did you know that not all foods that contain carbohydrates are equal? Some foods pack a lot of carbohydrates into a small portion.

(CONTINUED ON PAGE 31)

Dominique Wilkins

Basketball Hall of Famer,
managing type 2 diabetes
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“When my diabetes pill didn’t get me to goal, I asked my doctor about non-insulin Victoza®.”

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Victoza® is different than pills because it works like a hormone—GLP-1—to help control blood sugar.

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^aVictoza® 1.8 mg, taken alone or in combination with diabetes pills, lowered A1C by 1.0 to 1.5 points, on average, as shown in medical studies.

^bVictoza® has been shown to keep A1C down in a 2-year medical study.

Individual results may vary.

Pay no more than \$25 on your Victoza® prescriptions.^c Find out more at victoza.com

Indications and Usage

Victoza® (liraglutide [rDNA origin] injection) is an injectable prescription medicine that may improve blood sugar (glucose) in adults with type 2 diabetes when used along with diet and exercise.

Victoza® is not recommended as the first medication to treat diabetes. Victoza® has not been studied in patients with history of inflammation of the pancreas (pancreatitis). Victoza® is not a substitute for insulin and has not been studied in combination with prandial (mealtime) insulin. Victoza® is not for people with type 1 diabetes or people with diabetic ketoacidosis. It is not known if Victoza® is safe and effective in children. Victoza® is not recommended for use in children.

Important Safety Information

In animal studies, Victoza® caused thyroid tumors—including thyroid cancer—in some rats and mice. It is not known whether Victoza® causes thyroid tumors or a type of thyroid cancer called medullary thyroid cancer (MTC) in people, which may be fatal if not detected and treated early. Do not use Victoza® if you or any of your family members have a history of MTC or if you have Multiple Endocrine Neoplasia syndrome type 2 (MEN 2). While taking Victoza®, tell your doctor if you get a lump or swelling in your neck, hoarseness, trouble swallowing, or shortness of breath. These may be symptoms of thyroid cancer.

Do not use Victoza® if you are allergic to liraglutide or any of the ingredients in Victoza®. Serious allergic reactions can happen with Victoza®. If symptoms of serious allergic reactions occur, stop taking Victoza® and seek medical attention. Pancreatitis may be severe and lead to death. Before taking Victoza®, tell your doctor if you have had pancreatitis, gallstones, a history of alcoholism, or high blood triglyceride levels since these medical conditions make you more likely to get pancreatitis.

Stop taking Victoza® and call your doctor right away if you have pain in your stomach area that is severe and will not go away, occurs with or without vomiting, or is felt going from your stomach area through to your back. These may be symptoms of pancreatitis.

Before using Victoza®, tell your doctor about all the medicines you take, especially sulfonylurea medicines or insulin, as taking them with Victoza® may affect how each medicine works. If you use Victoza® with insulin, you may give both injections in the same body area (for example, your stomach area), but not right next to each other.

Also tell your doctor if you have severe stomach problems such as slowed emptying of your stomach (gastroparesis) or problems with digesting food; have or have had kidney or liver problems; have any other medical conditions; or are pregnant or plan to become pregnant. Tell your doctor if you are breastfeeding or plan to breastfeed. It is unknown if Victoza® will harm your unborn baby or if Victoza® passes into your breast milk.

Your risk for getting hypoglycemia, or low blood sugar, is higher if you take Victoza® with another medicine that can cause low blood sugar, such as a sulfonylurea or insulin. The dose of your sulfonylurea medicine or insulin may need to be lowered while taking Victoza®.

Victoza® may cause nausea, vomiting, or diarrhea leading to dehydration, which may cause kidney failure. This can happen in people who have never had kidney problems before. Drinking plenty of fluids may reduce your chance of dehydration.

The most common side effects with Victoza® include headache, nausea, and diarrhea. Nausea is most common when first starting Victoza®, but decreases over time in most people. Immune system related reactions, including hives, were more common in people treated with Victoza® compared to people treated with other diabetes drugs in medical studies.

Please see Brief Summary of Important Patient Information on previous page.

^cMaximum savings of \$150 per prescription up to 24 months. Additional restrictions may apply. Novo Nordisk reserves the right to modify or cancel these offerings at any time.

Victoza® is a prescription medication.

If you need assistance with prescription drug costs, help may be available. Visit pparx.org or call 1-888-4PPA-NOW.

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.



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VICTOZA®
liraglutide (rDNA origin) injection

VICTOZA®

liraglutide (rDNA origin) injection

Important Patient Information

This is a BRIEF SUMMARY of important information about Victoza®. This information does not take the place of talking with your doctor about your medical condition or your treatment. If you have any questions about Victoza®, ask your doctor. Only your doctor can determine if Victoza® is right for you.

WARNING

During the drug testing process, the medicine in Victoza® caused rats and mice to develop tumors of the thyroid gland. Some of these tumors were cancers. It is not known if Victoza® will cause thyroid tumors or a type of thyroid cancer called medullary thyroid cancer (MTC) in people. If MTC occurs, it may lead to death if not detected and treated early. Do not take Victoza® if you or any of your family members have MTC, or if you have Multiple Endocrine Neoplasia syndrome type 2 (MEN 2). This is a disease where people have tumors in more than one gland in the body.

What is Victoza® used for?

- Victoza® is a glucagon-like-peptide-1 (GLP-1) receptor agonist used to improve blood sugar (glucose) control in adults with type 2 diabetes mellitus, when used with a diet and exercise program.
- Victoza® should not be used as the first choice of medicine for treating diabetes.
- Victoza® has not been studied in people with a history of pancreatitis (inflammation of the pancreas). Other antidiabetic therapies should be considered in people with a history of pancreatitis.
- Victoza® is not for use in people with type 1 diabetes mellitus or people with diabetic ketoacidosis.
- It is not known if Victoza® is safe and effective when used with mealtime insulin.

Who should not use Victoza®?

- Victoza® should not be used in people with a personal or family history of MTC or in people with MEN 2.
- Victoza® should not be used in people with a severe allergy to Victoza® or any of its ingredients.

What is the most important information I should know about Victoza®?

- In animal studies, Victoza® caused thyroid tumors. People who use Victoza® should be counseled on the risk of MTC and symptoms of thyroid cancer.
- In people treated with Victoza®, there have been cases of pancreatitis, which may be severe and lead to death. If pancreatitis is suspected, Victoza® should be discontinued. Victoza® should not be restarted if pancreatitis is confirmed.

- Serious low blood sugar (hypoglycemia) may occur when Victoza® is used with other diabetes medications such as sulfonylureas and insulin. This risk can be reduced by lowering the dose of the sulfonylurea or insulin.
- If serious allergic reactions (e.g., anaphylactic reactions and swelling) occur, discontinue Victoza® and other suspect medications and promptly seek medical advice.
- Victoza® may cause nausea, vomiting, or diarrhea leading to the loss of fluids (dehydration). Dehydration may cause kidney failure. This can happen in people who may have never had kidney problems before. Drinking plenty of fluids may reduce your chance of dehydration.
- Like all other diabetes medications, Victoza® has not been shown to decrease the risk of large blood vessel disease (i.e., heart attacks and strokes).

What are the side effects of Victoza®?

- Tell your health care professional if you get a lump or swelling in your neck, hoarseness, trouble swallowing, or shortness of breath while taking Victoza®. These may be symptoms of thyroid cancer.
- The most common side effects, reported in at least 5% of people treated with Victoza® and occurring more commonly than people treated with a placebo (a non-active injection used to study drugs in clinical trials) are headache, nausea, and diarrhea.
- Immune system related reactions, including hives, were more common in people treated with Victoza® (0.8%) compared to people treated with other diabetes drugs (0.4%) in clinical trials.
- This listing of side effects is not complete. Your health care professional can discuss with you a more complete list of side effects that may occur when using Victoza®.

What should I know about taking Victoza® with other medications?

- Victoza® slows emptying of your stomach. This may impact how your body absorbs other drugs that are taken by mouth at the same time.

Can Victoza® be used in people with kidney or liver problems?

- Victoza® studies contain limited data in people with kidney or liver problems.

Still have questions?

This is only a summary of important information. Ask your health care professional for more complete product information, or

- Call 1-877-4VICTOZA (1-877-484-2869)
- Visit victoza.com

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Version 6

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(CONTINUED FROM PAGE 28)

For example, an average size bagel has four to five servings (60–75 g) of carbohydrates. However, a slice of toast only has only 1 carbohydrate serving (15 g). Another example is dried fruit. The drying process concentrates the fruit sugar. This means that only 2 tablespoons of raisins, prunes, etc., have as many carbs as one whole fruit serving.

Eating fewer carbohydrates is the best way to control blood glucose levels. Therefore it is important to watch out for hidden carbohydrates. For example, many restaurants add sugar to sauces and drinks, and flour to gravies. And, foods that are labeled “sugar-free” are not always carbohydrate-free. For example, ½ cup of sugar-free ice cream has 14 grams of carbohydrates (1 carb serving) because it’s made with milk.

stress

Both physical and mental stress can trigger a rise in blood glucose levels.

Our instinctive fight or flight response to stressful situations is the cause of that spike. If your blood glucose is low, you may not have enough energy to fight, so the body releases stress hormones in order to raise your blood glucose levels. If you do not have diabetes, your body is able to keep blood glucose from getting out of control. However, for people with

diabetes, glucose levels can rise and stay too high in response to stress.

Sometimes mental stress can last for a long time. The loss of a loved one, work-related stress or holiday planning may contribute to elevated glucose levels in two ways. First, the body may release stress hormones, which has a bad long-term effect on blood glucose levels. Second, people who are under stress tend to not take care of themselves as usual. If you’re feeling stressed, talk with your healthcare provider about whether you need to adjust your diabetes medicines. Take time to do mental health checks: seek spiritual peace, ask for a referral for professional counseling, or find other ways to relax. Remember that you need to take care of yourself so you have good health and energy to care for others—and yourself.

Physical stress may come from illness, injury or hormones. For example, after surgery, it is common for blood glucose levels to rise. This usually goes away as the surgical wound heals. For women, wider-than-usual fluctuations in glucose levels may happen in response to hormones that occur with pregnancy, menopause, or before and during the menstrual cycle.

Occasionally people will notice a rise in blood glucose levels even before they notice other symptoms of common illnesses, such as colds or urinary tract infections. When you have a cold, be aware that not

only the illness, but also the sugar in cough syrup could be the cause for a rise in blood glucose levels.

If your blood glucose levels are too high and you don’t know why, check for other signs of infection or illness. There could also be a more serious cause, like a heart attack or stroke.

medications

Many medications can affect blood glucose control.

Some blood pressure medicines, known as diuretics or water pills, can raise your blood glucose levels. Steroids, commonly used for asthma, COPD, arthritis or with chemotherapy, are also known to raise glucose levels. Estrogen replacement or birth control pills may have a similar effect as

natural female hormones.

Also, watch out for expired or damaged insulin. Insulin can become less effective if it’s overheated or accidentally frozen, such as in your checked luggage on an airplane. Opened vials and pens usually have a shelf life of three to four weeks. Check the expiration dates, note when you open the pen or vial, keep extras in the refrigerator and carry your insulin on the plane when you travel. ■

There are many reasons blood glucose levels may get too high, and everyone will not necessarily have the same responses. However, if this happens to you, think about these situations and see if they fit. Then, contact your healthcare provider to help resolve the issue and bring your glucose back under control.



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AWARD-WINNING ACTRESS,
DANCER AND CHOREOGRAPHER

debbie allen

ON DANCING FOR DIABETES

By Jonathan Jarashow

DEBBIE ALLEN, an award-winning actress, director, dancer, choreographer and author, may be best known for her role as dance teacher Lydia Grant on the '80s TV show "Fame." Millions of people also recognize Debbie as a judge on the current hit TV show "So You Think You Can Dance." Off camera, Debbie has yet another important and meaningful role: as an advocate for people with diabetes. Debbie recently teamed up with Janssen Pharmaceuticals and "So You Think You Can Dance" to promote a new initiative called the T2 Dance Crew. This national education and wellness program encourages people with type 2 diabetes to get more physically active—especially by dancing—as an important part of managing their condition.

Debbie has a very personal connection to type 2 diabetes.



"I lost my father early, when he was only 63, to diabetes complications. A life-long dancer myself, I knew there was an opportunity to help motivate others to be active—and actively manage their type 2 diabetes. It's a growing problem in our country especially among racial and ethnic minorities. But managing the disease can reduce people's risk of serious complications."

She watched as her father lived with the disease, and saw firsthand how challenging it was for him to manage his blood glucose levels. He tried to make some changes to his lifestyle, but his children just couldn't get him to exercise more. This is what inspired her to promote healthy lifestyle habits in people with diabetes.

DANCING AND DIABETES

Debbie believes that dancing can be a great way to have fun while getting active. She is working with "So You Think You Can Dance" fan favorites Fik-Shun and Janette Manrara, who have created an exclusive dance video series showing people with type 2 diabetes how to get started—one step at a time. There are hip-hop and Latin dances everyone can do on T2DanceCrew.com. On the site, there are videos and information about diabetes management in English and Spanish. The T2 Dance Crew program also hosts local events that feature live dance classes taught by Fik-Shun and Janette, health screenings and type 2 diabetes education across the country.

SMALL STEPS

As Debbie says: "We are showing millions of people how taking small steps can make a meaningful difference in managing diabetes. It takes a full program—healthy eating, regular exercise, controlling weight, working with

healthcare providers—to manage this disease."

REDUCING STRESS

If you don't dance, you may be asking yourself why you should start now. As Debbie explains, "Dance is the ultimate power."

She sees it as an excellent way to hone creative and emotional expression, and it's something everyone can participate in. She notes that many people who don't enjoy exercise love to dance. The social combination of fun and

creativity can help a lot of people not only get more physical activity, but reduce stress. These are both very important in managing blood glucose levels. ■

For more information, visit T2DanceCrew.com.



"So You Think You Can Dance" fan favorites Fik-Shun and Janette Manrara

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Bayer HealthCare














CHOOSING YOUR blood glucose meter

Your Walgreens pharmacist, together with the meter comparison chart below, can help you choose the blood glucose meter that is best for you. You can also ask your Walgreens pharmacist how you can get rewarded for healthy choices you make every day, like blood glucose testing. Get points when you log blood glucose readings into your Balance Rewards account. For more information, visit Walgreens.com/healthychoices.*

Meter Box	Meter	Memory	Test Time	Sample Size (µL)*	FEATURES AND COMMENTS
Walgreens TRUE METRIX®					
		500 tests, 7-, 14- & 30-day avg.	As fast as 4 sec.	Very Small 0.5 µL	Featuring Triple Sense Technology™, provide proven accuracy and confidence in results. Advanced performance testing features include no coding, a test strip eject button to eliminate handling of strips and advanced event tags. Uses Walgreens TRUE METRIX™ test strips.
Walgreens TRUEresult®					
		500 tests, 7-, 14- & 30-day avg.	As fast as 4 sec.	Very Small 0.5 µL	No coding, state-of-the-art design. Clinically proven accuracy. Advanced performance features include strip release button that eliminates handling of strips, data uploading capability, alternate site testing and ketone testing reminders. Uses Walgreens TRUEtest™ strips. Lifetime meter warranty.
Walgreens TRUE2go®					
		99 tests	As fast as 4 sec.	Very Small 0.5 µL	Small, no-coding meter attaches to the top of a vial of TRUEtest™ strips for on-the-go testing convenience. Features an easy-to-read display and strip-release button that eliminates handling of strips. Lifetime meter warranty. Available in red, purple or blue.
Accu-Chek Nano					
		500 tests, 7-, 14-, 30- & 90-day avg.	5 sec.	Very Small 0.6 µL	Small, sleek design, no coding, and brilliant backlit display make it easy to use. Includes ACCU-CHEK FastClix lancing device. Uses ACCU-CHEK SmartView test strips.
Accu-Chek Aviva Plus					
		500 tests, 7-, 14-, 30- & 90-day avg.	5 sec.	Very Small 0.6 µL	Easy-to-use meter comes with no coding, a sleek new design, and an easy-to-read display. Includes ACCU-CHEK Softclix lancing device. Uses ACCU-CHEK Aviva Plus test strips.
Bayer CONTOUR®NEXT					
		800 tests, 7-, 14- & 30- & 90-day avg.	5 sec.	Very Small 0.6 µL	Easy, accurate meter for those who want to do more. Easy on-screen messages with plain language. AutoLog, HI/LO settings, and up to 14 language settings. Uses CONTOUR®NEXT test strips.   
Bayer CONTOUR®NEXT EZ					
		480 tests, 7-, 14- & 30-day avg.	5 sec.	Very Small 0.6 µL	For those newly diagnosed with diabetes. Easy to use and teach. Easy-to-read display screen. Uses CONTOUR®NEXT test strips.   
Bayer CONTOUR®NEXT USB					
		2000 tests, 7-, 14-, 30- & 90-day avg.	5 sec.	Very Small 0.6 µL	For those who want better insights. Sleek design, on-screen messages and rechargeable battery. Bright color display, Autolog feature for logging of carbs and insulin dosing. Uses CONTOUR®NEXT test strips.   

* Restrictions apply. For a list of qualifying activities and complete terms and conditions of Balance Rewards, visit Walgreens.com/healthychoices. Information provided to Walgreens online is covered by the terms of our Online Privacy and Security Policy and the terms and conditions of Balance Rewards. Personally identifiable information is not covered under HIPAA or the Walgreens Notice of Privacy Practices.

diabetes care

Meter Box	Meter	Memory	Test Time	Sample Size (µL)*	FEATURES AND COMMENTS
Bayer BREEZE® 2					
		420 tests, 1-, 7-, 14- & 30-day avg.	5 sec.	Small 1 µL	Easy-to-use, with 10-test disc. Eliminates handling individual blood glucose test strips. Both the BREEZE®2 meter and the 10-test disc received the Ease-of-Use Commendation from the Arthritis Foundation®. 
FreeStyle Freedom Lite					
		400 tests, 7-, 14- & 30-day avg.	5 sec.	Very Small 0.3 µL	Easy-to-read, easy-to-hold meter. Large numeric display. No coding. Very small sample size. Use with FreeStyle Lite® blood glucose test strips with ZipWik™ tabs for easy application and fast uptake.
FreeStyle Lite					
		400 tests, 7-, 14- & 30-day avg.	5 sec.	Very Small 0.3 µL	Small, compact meter with backlight display and test strip port light. No coding. Very small sample size. Use with FreeStyle Lite® Blood Glucose test strips with ZipWik™ tabs for easy application and fast uptake.
OneTouch VerioIQ					
		750 tests, 7-, 14-, 30- & 90-day avg.	5 sec.	Very Small 0.4 µL	Easy to use. High resolution color screen and test port light for testing in the dark. Ecofriendly rechargeable battery. No coding needed. Works with OneTouch® Verio® Test Strips.
OneTouch Ultra2					
		500 tests, 7-, 14- & 30-day avg.	5 sec.	Small 1 µL	Two-way scrolling buttons, large screen and a backlight make it easy to read and operate. Meal flags helps you see if your food and portion choices are working so you stay in range. Download ports for data management. Alternate site testing. Uses OneTouch® Ultra® Blue Strips.
OneTouch UltraMini					
		500 tests	5 sec.	Small 1 µL	Easy-to-use meter with a large easy-to-read screen. Two-way scrolling buttons for simple navigation. Available in a variety of colors. Works with OneTouch® Ultra® test strips.

* µL = microliters

what to look for in a blood glucose meter

Accuracy. It's important for you to know that the meter readings are not as accurate as the results of blood tests taken at the lab. Your meter will likely measure your blood glucose within 20 percent of your usual lab test numbers. This is considered the acceptable range.

Cost. Find out what meters and strips your health plan covers. Check the prices of both of these items before you make your purchase. Look for trade-in and rebate offers.

Results upload. Most meters allow you to upload results to your computer and analyze them electronically. This feature can help you and your healthcare provider make sense of your blood glucose numbers.

Alternate site testing. If you want to get blood from a site other than your finger, make sure the meter you buy is approved for alternate site testing.

Portability. If you carry your meter with you, make sure it is small and portable. Most meters come with a carrying case which includes room for your testing supplies.

Ease of use. Take the meter for a "test drive" to make sure you feel comfortable using it. Your Walgreens pharmacist or diabetes educator can help you do this. Some meters are more difficult to handle than others. Also, be sure you can read the results from the meter easily, since some meter screens are larger than others.

Speed. If you check your blood glucose several times a day, you may want a quick test.

Sample size. Meters that need a smaller sample size allow you to use a thinner lancet. This can mean less pain for your fingers.

TAKE THE CO-PAY CHALLENGE.



Ask your pharmacist how much you could save with OneTouch®.

- Lowest co-pay on the most health plans.*
- Always covered by Medicare Part B.†
- #1 pharmacist recommended brand.

Talk with your pharmacist to see if you qualify for a OneTouch® Meter at no charge today.

*Some health plans may have more than one test strip covered at the lowest co-pay.
†Not a guarantee of coverage and payment. Coverage and payment may be subject to co-insurance, deductible, and patient eligibility requirements.
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ONE TOUCH

mg/dL
**TRUE
METRIX**

Introducing the *Walgreens*

**TRUE
METRIX™**
BLOOD GLUCOSE MONITORING SYSTEM

The TRUE METRIX™ portfolio achieves a level of performance driven by science, research and technological advancements. Featuring TRIPLE SENSE TECHNOLOGY™, the system provides proven accuracy and confidence in results.

Featuring



**ACCURACY IS
CONFIDENCE**