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FALL 2012

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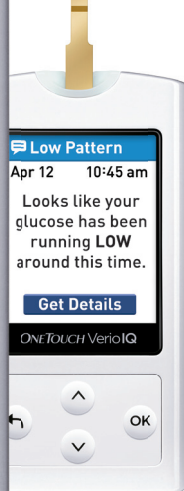
WHY CHECK YOUR
**BLOOD
GLUCOSE?**



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IN A NEW LIGHT



QUEEN OF SOUTHERN CUISINE
PAULA DEEN
A LIGHTER LIFE WITH DIABETES



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Dear Readers:

In the fall issue of *Walgreens Diabetes & You*, our award-winning magazine, we are pleased to bring you our interview with Paula Deen, as well as some of her great, diabetes-friendly recipes. The Queen of Southern Cuisine has written 14 cookbooks that have sold more than 8 million copies. She is also a two-time Emmy winner for her popular show, "Paula's Best Dishes," on The Food Network. Paula learned she has type 2 diabetes in 2008 and is now a spokeswoman for the *Diabetes in a New Light* program, which includes a website featuring lighter versions of her famous recipes. As Paula says, "None of us

wants to go through life craving something and feeling like we are denied, because food is a big part of people's lives." We bring you Paula's Spicy Chicken Phyllo Rolls recipe, featured on the cover, as well as these delicious and light recipes: Vegetarian Gumbo, Southern Baked Beans and Vanilla Pound Cake with Black Cherry Sauce.

This issue also features our usual lineup of easy-to-read articles with practical advice on eating right and living well with your diabetes.

If you are a healthcare provider, we'd be happy to send you complimentary copies for your offices (U.S. addresses only, no P.O. Boxes; one shipment per address). Walgreens customers can contact us at diabetes.magazine@walgreens.com to receive an electronic version of the magazine.

As always, we invite you to share your questions or comments. Our contact information is below:

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Sincerely,

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Health & Wellness Daily Living

For past issues of *Diabetes & You*, or for the Walgreens Diabetes Newsletter, visit walgreens.com and click on health info.

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Paula and Shawn

Managing type 2
diabetes with Victoza®

“Eating right and staying active helped me see diabetes in a new light. So did asking about non-insulin Victoza®.”

Shawn

Like Paula Deen, I'm helping manage my diabetes by taking walks and eating smaller portions. I also asked my doctor about Victoza®. Here's what I learned:

- ✓ **Victoza® starts to lower blood sugar in as soon as two weeks, lowers A1C,* and keeps it down†**
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*Victoza® 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.

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

Individual results may vary.

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® is not a substitute for insulin and has not been studied in combination with prandial (meal-time) 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. Inflammation of the pancreas (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 next page.

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 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® studies contain limited data in people with a history of pancreatitis (inflammation of the pancreas). Therefore, it should be used with care in these patients.
- 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 patients with MEN2.
- 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 clinical trials, there were more cases of pancreatitis in people treated with Victoza® compared to people treated with other diabetes drugs. If pancreatitis is suspected, Victoza® and other potentially suspect drugs should be discontinued. Victoza® should not be restarted if pancreatitis is confirmed. Victoza® should be used with caution in people with a history of pancreatitis.

- 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 healthcare provider 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 doctor for more complete product information, or

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

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what's new at Walgreens

By Jonathan Jarashow

Walgreens Way to Well Tour

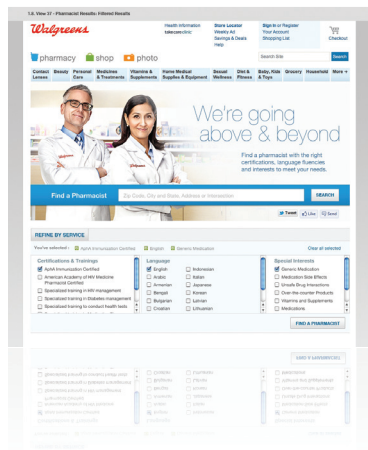
The Walgreens Way to Well Health Tour with AARP is now traveling the country providing free tests, assessment, education and consulting services to people in communities with the highest prevalence for leading diseases, focusing on the uninsured and unemployed. Every time you buy a Walgreens brand health and wellness

product, like those pictured below, a portion of the proceeds goes toward this program, up to \$3 million each year.

To learn more about the program, visit walgreens.com/waytowell.



Find a Pharmacist



A new Walgreens survey shows that clinical training and areas of expertise are important factors when selecting a pharmacist. To help Walgreens customers find a pharmacist with the expertise and background they are looking for, they can try the new Find Your Pharmacist tool online.

To find a pharmacist or to learn more about the pharmacists at the more than 7,800 Walgreens pharmacies, visit walgreens.com/findyourpharmacist.

MAGIC JOHNSON FOUNDATION PARTNERS WITH WALGREENS

For a limited time, Walgreens will carry commemorative charity bracelets (pictured below) at all of its stores with \$2 from each purchase benefitting the Magic Johnson Foundation. The national campaign will help address health, educational and social needs of ethnically diverse urban communities.

The relationship was formed through Walgreens' participation in "The Celebrity Apprentice" on NBC, on which the task for celebrity contestants centered around the award-winning "Walk with Walgreens" program. Says Joe Magnacca, Walgreens president of daily living products and solutions, "We're proud to be working with the Magic Johnson Foundation to help make an impact in many of the same communities that rely on our pharmacy, health and wellness services every day."



new product update

New FreeStyle InsuLinx Blood Glucose Meter and Test Strips

- The first and only touch screen meter that logs insulin doses with a few simple taps of your finger and automatically stores your blood glucose readings. The meter helps you easily capture and share the information you and your doctor need to see trends in your glucose control. The FreeStyle InsuLinx meter uses FreeStyle InsuLinx test strips.




For In Vitro Diagnostic Use

New BD Insulin Syringe with the BD Ultra-Fine™ 6mm Needle

- Studies have shown that over 80% of people with diabetes preferred the new BD Insulin Syringes with the BD Ultra-Fine™ 6mm Needle over their current syringe. It is designed to be more comfortable than



previous insulin syringes and helps reduce the risk of a painful injection into the muscle. The American Association of Diabetes Educators recognizes both the safety and effectiveness of using shorter needles. 

TAKE CHARGE OF YOUR BLOOD SUGAR FOR YOURSELF AND FOR THEM.



You are a partner, a friend and a fighter.

If you have type 2 diabetes you still have a chance to control your blood sugar for yourself and those who depend on you most. Reducing your blood sugar can help reduce the risk of diabetes complications such as blindness, kidney disease, nerve damage and other serious health problems. If pills, diet and exercise aren't enough, insulin is the most effective way to reduce your blood sugar. And today insulin comes in easy-to-use pens.

Important Safety Information About Insulin:

The most common side effect of insulin is low blood sugar. Some people may experience symptoms such as shaking, sweating, fast heartbeat, and blurred vision, while some experience no symptoms at all. That's why it's important to check your blood sugar often.

Talk to your doctor about whether insulin is right for you.

Learn more at UnderstandBloodSugarControl.com or call 1.866.923.0210.

SANOFI DIABETES  *Going beyond together*

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ARE YOU DOING what really matters?

By Martha Funnell, MS, RN, CDE

The number of changes you need to make to care for diabetes can be overwhelming. It's hard to get started and hard to keep at it. Making choices about what changes you will make now, what changes you will or will not make later, as well as where you will start is part of the work of managing diabetes.

There are a lot of reasons people with diabetes choose to make lifestyle changes as part of their diabetes self-management. One idea many people find useful is to think about the values and traits that define who you are and the kind of person you want to be. *Start by looking over the list on the right to see if there are any that ring true for you.*

The next step is to think about each of your values and how it relates to the way you live your life and manage your diabetes.

Understanding what is important to you is the first step in making changes you can stick with over the long term. Start by choosing one thing you will do this week to better manage your diabetes. Next week, choose another step. Keep doing that until you feel you have made the changes you want to make to manage your diabetes. Every change you make will bring you closer to living in a way that reflects your values in every part of your life—including your diabetes. 

Check off the **values or traits** below that apply to you.

This can help you figure out what is truly important to you in your life and in caring for your diabetes:

<input type="checkbox"/>	A good parent or grandparent
<input type="checkbox"/>	A good community member
<input type="checkbox"/>	A good spouse
<input type="checkbox"/>	Energetic
<input type="checkbox"/>	Disciplined
<input type="checkbox"/>	Intelligent
<input type="checkbox"/>	Responsible
<input type="checkbox"/>	Capable
<input type="checkbox"/>	Spiritual
<input type="checkbox"/>	Honest
<input type="checkbox"/>	Dependable
<input type="checkbox"/>	Realistic
<input type="checkbox"/>	Independent
<input type="checkbox"/>	Loving
<input type="checkbox"/>	In charge
<input type="checkbox"/>	Self-assured
<input type="checkbox"/>	Creative
<input type="checkbox"/>	Strong
<input type="checkbox"/>	Faithful
<input type="checkbox"/>	Positive
<input type="checkbox"/>	Hopeful
<input type="checkbox"/>	Committed

Now, ask yourself these questions:

- 1 What do these values really mean to me?
- 2 Does how I care for my diabetes match my values?
- 3 Are there changes I can make to live in a way that is consistent with my values, including how I care for my diabetes?



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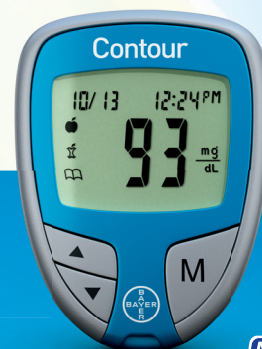
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BLOOD GLUCOSE MONITORING SYSTEM



why check your blood glucose?

By Martha Funnell, MS, RN, CDE



Several recent studies have shown that people taking only pills to manage their diabetes do not get much benefit from checking their blood glucose levels at home. Their A1C levels are about the same as people who do not monitor very often or at all.

That may seem surprising, but it makes sense. After all, you would not expect people who weigh themselves every day to lose more weight than people who did not weigh themselves if they did not use what they learned to make changes in their eating or exercise habits. Knowing how much you weigh doesn't change the results.

The same is true for checking your blood glucose. If you are monitoring just to show to your doctor or because you were told to, then it may not be worth the effort. But, if you are using the information to make choices about your food or exercise as you go through the day, then you may find that it is very worthwhile.

So the answer to the question about whether monitoring is worth the pain, cost and hassle, depends on how you use your readings.

What can you learn from checking your blood glucose levels?

One of the keys to managing diabetes is keeping everything in balance—your food, your activity, your medicines and your stress levels. Monitoring helps you and your healthcare provider decide when you need a change in medicine. It also helps you see how all of your hard work is paying off, which can help to keep you motivated.


Many people who check their blood glucose levels start by checking a fasting level before breakfast. If your blood glucose level is high when you first get up, you may decide to eat fewer carbs at breakfast or go for a walk during the morning to bring it back into the target range. If your blood glucose level is high in the mornings most days of the week, try checking before you go to bed and then again when you get up. Your bedtime and fasting glucose levels should be about the same. If not, you may need a change in your medicines.

Other times to check your blood glucose are before lunch and dinner, two hours after you start your meals and at bedtime. Checking your blood glucose before and after a meal helps you understand how your body and your medicines handled the carbohydrates you ate. Checking your blood glucose before bedtime also gives you the peace of mind of knowing that you won't have a low blood glucose reaction during the night.

How important is keeping track of your blood glucose levels?

A recent study showed that checking blood glucose levels was helpful for people taking pills for their diabetes who had high A1C levels. In that study, people only checked their blood glucose levels five times a day for the three days before their provider

visits. They wrote their results in a log book and also made a graph so they could see when their blood glucose level was in their target ranges. They also rated their energy level so they could see how their blood glucose levels affected how they felt.

The people in the study then took this information with them to their visit and talked about it with their provider. They were able to bring down their A1C levels significantly when they and their providers had that information. 

be *i*nformed

Your blood glucose readings are not judgments. They are just information you can use to your benefit. And that can make it worthwhile.



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*Based on clinical studies, vs ordinary, non-antibacterial toothpaste.

†Colgate Total® toothpaste is approved through the New Drug Application process to help prevent gingivitis. Not approved for the prevention or treatment of serious gum disease or other diseases. The ADA Council on Scientific Affairs' acceptance of Colgate Total® Gum Defense toothpaste is based on its finding that the product is effective in helping to prevent and reduce tooth decay, gingivitis and plaque above the gumline, and bad breath, and to whiten teeth by removing surface stains, when used as directed.



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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. 

be *i*nformed

4 PARTS TO YOUR PLATE

- 2** big parts of your plate are for your starches or grains and your vegetables.
- 2** small 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. They are high in sugar, salt, fat and calories.
- 7** Try to drink mostly water every day and save your favorite sugary drink for a special treat.

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TABLETS, USP 500 mg, 850 mg
and 1000 mg**

Rx only

Important Safety Information

Metformin hydrochloride tablets are used to control blood sugar levels in people with type-2 (non-insulin-dependent) diabetes.

A small number of people who have taken metformin hydrochloride tablets have developed a serious condition called lactic acidosis. Lactic acidosis is caused by a buildup of lactic acid in the blood. This buildup can cause serious damage.

Lactic acidosis happens more often in people with kidney problems. Most people with kidney problems should not take metformin hydrochloride tablets.

It is also important for your liver to be working normally when you take metformin hydrochloride tablets. Your liver helps remove lactic acid from your blood.

Make sure you tell your doctor before you use metformin hydrochloride tablets if you have kidney or liver problems.

You should stop using metformin hydrochloride tablets and call your doctor right away if you have signs of lactic acidosis. Lactic acidosis is a medical emergency that must be treated in a hospital.

Signs of lactic acidosis are:

- feeling very weak, tired, or uncomfortable
- unusual muscle pain
- trouble breathing
- unusual or unexpected stomach discomfort
- feeling cold
- feeling dizzy or lightheaded
- suddenly developing a slow or irregular heartbeat

Other Side Effects: Common side effects of metformin hydrochloride tablets include diarrhea, nausea, and upset stomach.

You are encouraged to report side effects of prescription drugs to the FDA.

Visit <http://www.fda.gov/medwatch>, or call 1-800-FDA-1088.



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Reference: 1. Pelletier AL, Butler AM, Gillies RA, May JR. Metformin stinks, literally. *Ann Intern Med.* 2010;1524:267-268.

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PATIENT INFORMATION

Read this information carefully before you start taking this medicine and each time you refill your prescription. There may be new information. This information does not take the place of your doctor's advice. Ask your doctor or pharmacist if you do not understand some of this information or if you want to know more about this medicine.

What are metformin hydrochloride tablets?

Metformin hydrochloride tablets are used to treat type 2 diabetes. This is also known as non-insulin-dependent diabetes mellitus. People with type 2 diabetes are not able to make enough insulin or respond normally to the insulin their bodies make. When this happens, sugar (glucose) builds up in the blood. This can lead to serious medical problems including kidney damage, amputations, and blindness. Diabetes is also closely linked to heart disease. The main goal of treating diabetes is to lower your blood sugar to a normal level.

High blood sugar can be lowered by diet and exercise, by a number of medicines taken by mouth, and by insulin shots. Before you take metformin hydrochloride tablets, try to control your diabetes by exercise and weight loss. While you take your diabetes medicine, continue to exercise and follow the diet advised for your diabetes. No matter what your recommended diabetes management plan is, studies have shown that maintaining good blood sugar control can prevent or delay complications of diabetes, such as blindness.

Metformin hydrochloride tablets help control your blood sugar in a number of ways. These include helping your body respond better to the insulin it makes naturally, decreasing the amount of sugar your liver makes, and decreasing the amount of sugar your intestines absorb. Metformin hydrochloride tablets do not cause your body to make more insulin. Because of this, when taken alone, they rarely cause hypoglycemia (low blood sugar), and usually do not cause weight gain. However, when they are taken with a sulfonylurea or with insulin, hypoglycemia is more likely to occur, as is weight gain.

WARNING: A small number of people who have taken metformin hydrochloride tablets have developed a serious condition called lactic acidosis. Lactic acidosis is caused by a buildup of lactic acid in the blood. This happens more often in people with kidney problems. Most people with kidney problems should not take metformin hydrochloride tablets. (See "What are the side effects of metformin hydrochloride tablets?")

Who should not take metformin hydrochloride tablets?

Some conditions increase your chance of getting lactic acidosis, or cause other problems if you take either of these medicines. Most of the conditions listed below can increase your chance of getting lactic acidosis.

Do not take metformin hydrochloride tablets if you:

- have kidney problems
- have liver problems
- have heart failure that is treated with medicines, such as Lanoxin®* (digoxin) or Lasix®** (furosemide)
- drink a lot of alcohol. This means you binge drink for short periods of time or drink all the time
- are seriously dehydrated (have lost a lot of water from your body)
- are going to have an x-ray procedure with injection of dyes (contrast agents)
- are going to have surgery
- develop a serious condition, such as heart attack, severe infection or a stroke
- are 80 years or older and you have NOT had your kidney function tested

Tell your doctor if you are pregnant or plan to become pregnant. Metformin hydrochloride tablets may not be right for you.

Talk with your doctor about choices. You should also discuss your choices with your doctor if you are nursing a child.

Can metformin hydrochloride tablets be used in children?

Metformin hydrochloride tablets have been shown to effectively lower glucose levels in children (ages 10 to 16 years) with type 2 diabetes. Metformin hydrochloride tablets have not been studied in children younger than 10 years old. Metformin hydrochloride tablets have not been studied in combination with other oral glucose-control medicines or insulin in children. If you have any questions about the use of metformin hydrochloride tablets in children, talk with your doctor or healthcare provider.

How should I take metformin hydrochloride tablets?

Your doctor will tell you how much medicine to take and when to take it. You will probably start out with a low dose of the medicine. Your doctor may slowly increase your dose until your blood sugar is better controlled. You should take metformin hydrochloride tablets with meals.

Your doctor may have you take other medicines along with metformin hydrochloride tablets to control your blood sugar. These medicines may include insulin shots. Taking metformin hydrochloride tablets with insulin may help you better control your blood sugar while reducing the insulin dose.

Continue your exercise and diet program and test your blood sugar regularly while

taking metformin hydrochloride tablets. Your doctor will monitor your diabetes and may perform blood tests on you from time to time to make sure your kidneys and liver are functioning normally. There is no evidence that metformin hydrochloride tablets causes harm to the liver or kidneys.

Tell your doctor if you:

- have an illness that causes severe vomiting, diarrhea or fever, or if you drink a much lower amount of liquid than normal. These conditions can lead to severe dehydration (loss of water in your body). You may need to stop taking metformin hydrochloride tablets for a short time.
- plan to have surgery or an x-ray procedure with injection of dye (contrast agent). You may need to stop taking metformin hydrochloride tablets for a short time.
- start to take other medicines or change how you take a medicine. Metformin hydrochloride tablets can affect how well other drugs work, and some drugs can affect how well metformin hydrochloride tablets work. Some medicines may cause high blood sugar.

What should I avoid while taking metformin hydrochloride tablets?

Do not drink a lot of alcoholic drinks while taking metformin hydrochloride tablets. This means you should not binge drink for short periods, and you should not drink a lot of alcohol on a regular basis. Alcohol can increase the chance of getting lactic acidosis.

What are the side effects of metformin hydrochloride tablets?

Lactic Acidosis: In rare cases, metformin hydrochloride tablets can cause a serious side effect called lactic acidosis. This is caused by a buildup of lactic acid in your blood. This buildup can cause serious damage. Lactic acidosis caused by metformin hydrochloride tablets is rare and has occurred mostly in people whose kidneys were not working normally. Lactic acidosis has been reported in about one in 33,000 patients taking metformin hydrochloride tablets over the course of a year. Although rare, if lactic acidosis does occur, it can be fatal in up to half the people who develop it.

It is also important for your liver to be working normally when you take metformin hydrochloride tablets. Your liver helps remove lactic acid from your blood.

Make sure you tell your doctor before you use metformin hydrochloride tablets if you have kidney or liver problems. You should also **stop using metformin hydrochloride tablets and call your doctor right away if you have signs of lactic acidosis. Lactic acidosis is a medical emergency that must be treated in a hospital.**

Signs of lactic acidosis are:

- feeling very weak, tired, or uncomfortable
- unusual muscle pain
- trouble breathing
- unusual or unexpected stomach discomfort
- feeling cold
- feeling dizzy or lightheaded
- suddenly developing a slow or irregular heartbeat

If your medical condition suddenly changes, stop taking metformin hydrochloride tablets and call your doctor right away. This may be a sign of lactic acidosis or another serious side effect.

Other Side Effects: Common side effects of metformin hydrochloride tablets include diarrhea, nausea, and upset stomach. These side effects generally go away after you take the medicine for a while. Taking your medicine with meals can help reduce these side effects. Tell your doctor if the side effects bother you a lot, last for more than a few weeks, come back after they've gone away, or start later in therapy. You may need a lower dose or need to stop taking the medicine for a short period or for good.

About 3 out of every 100 people who take metformin hydrochloride tablets have an unpleasant metallic taste when they start taking the medicine. It lasts for a short time.

Metformin hydrochloride tablets rarely cause hypoglycemia (low blood sugar) by themselves. However, hypoglycemia can happen if you do not eat enough, if you drink alcohol, or if you take other medicines to lower blood sugar.

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

General advice about prescription medicines

If you have questions or problems, talk with your doctor or other healthcare provider. You can ask your doctor or pharmacist for the information about metformin hydrochloride tablets that is written for health care professionals. Medicines are sometimes prescribed for purposes other than those listed in a patient information leaflet. Do not use metformin hydrochloride tablets for a condition for which it was not prescribed. Do not share your medicine with other people.

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MX:PL:METB:R1

meat, poultry AND seafood for a healthy heart

By Amy Campbell, MS, RD, CDE

Protein is an important part of your eating plan. Protein-based foods include meat (beef, pork, lamb and veal), poultry and seafood, along with vegetable-based protein foods, such as beans, legumes and tofu. Many people know that eating more beans is good for them, but have questions about how to choose healthy, leaner cuts of meat, poultry and fish.

You may feel confused when you're in the grocery store, as there are so many cuts of meat, poultry and fish. Some are clearly better for you than others. Let's take a look.

Beef

Beef is not only a great source of protein, it contains iron, zinc, selenium and B vitamins. But it can also be high in saturated fat, the kind of fat that may raise your LDL (bad) cholesterol level and your risk for heart disease. So while beef may be "what's for dinner," your best option

is to choose as lean a cut of beef as you can. The USDA defines lean and extra lean cuts of beef as follows:

Lean: less than 10 grams of fat, 4.5 grams of saturated fat or fewer and less than 95 milligrams of cholesterol per 3.5-ounce serving.

Extra lean: less than 5 grams of fat, 2 grams or fewer of saturated fat and less than 95 milligrams of cholesterol per 3.5-ounce serving. A great way to get a lean cut of beef is to choose one of these from your local market:

- eye round
- top round
- round tip
- sirloin
- tenderloin
- top loin

You can also choose beef by its grade, which refers to how much marbling, or streaking of fat, is in the meat. The grades you'll see most often in the meat case are prime, choice and select. The higher the grade, the more tender and fattier the meat. Go for choice or select cuts of beef and save the fattier prime cuts for special events. Keep in mind, though, that leaner cuts of meat can be tough. To make them more tender, try one of these "moist" cooking methods:

Braising: browning the meat in a small amount of oil, then adding liquid, covering and simmering on the stove or cooking in the oven.

Cooking in liquid:

cook meat in liquid in a stew or in a slow-cooker.

If you'd rather broil or grill your beef, first marinate it in an acidic liquid, such as vinegar, lemon juice, wine or yogurt, for at least eight hours or up to 24 hours before cooking. Using a marinade helps make tough cuts more tender.

If you prefer a hamburger over a piece of steak, choose ground beef that's at least 90% lean. Even better, try to look for ground beef that is 93% or 95% lean.

Pork

Often called "the other white meat," pork is loved by many, but some cuts are higher in fat than others. The good news is that today's pork is leaner and contains less saturated fat than the pork of years ago.

In fact, some cuts of pork are even lower in fat than skinless chicken legs and thighs. The leanest cuts of pork include:

- ham
- boneless top loin chop
- pork tenderloin
- boneless top loin roast
- loin chop
- Canadian-style bacon

Limit fatty cuts, such as bacon, ribs, ground pork and cold cuts made with pork. Not only are these high in fat and saturated fat, they may be high in sodium, too.

Poultry

It's no secret that chicken and turkey are part of a heart-healthy diet. Skinless chicken and turkey breast (white meat) are very low in fat and saturated fat, but darker meat is OK to

eat, too, as long as you don't eat the skin. Turkey breast meat is even lower in calories and fat than chicken breast, so think about having turkey more often than just at Thanksgiving.

Many people use ground turkey in place of ground beef to save fat and calories. This can be a good idea, but keep in mind that ground turkey may have just as much fat as ground beef. That's because ground turkey often includes both dark meat and skin. To avoid extra fat, look for the words "ground turkey breast" or "lean ground turkey" on the package.

Seafood

It's hard to go wrong with seafood. Whether you like fish, shrimp, lobster, clams or scallops, seafood can (and should) be part of a heart-healthy eating plan. In fact, experts suggest that we eat at least two servings of seafood every week. These fish are rich in omega-3 fatty acids, so choose them often:

- salmon
- mackerel
- halibut
- herring
- tuna
- sardines

Limit seafood that is fried, breaded or has been cooked with butter, stick margarine or cheese. Healthy ways to cook seafood include:


3

A serving is 3 ounces, or the size of a deck of cards.

- grilling
- broiling
- baking
- poaching
- steaming

If good, fresh fish is hard to find or doesn't fit in to your food budget, try frozen fish or shellfish. Canned fish, such as salmon, tuna, sardines and mackerel, are also great options. Buy canned fish packed in water rather than oil and rinse it under running water to help lower the sodium content.

Seafood is high in protein and low in saturated fat and is a good source of omega-3 fatty acids found in fish oils. Fish oils may help to lower triglycerides (blood fats) and protect against heart disease.

When you plan your next meal, choose a healthy protein: Your heart will thank you. 

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Pregnant and breast feeding women and children under the age of 12 should limit their large-fish intake because of its possible mercury content. But the upside of eating seafood outweighs any risks for most people.

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*Current needle sizes: 12.7mm and 8mm.

†Compared with the 12.7mm x 30G.

References: 1. Schwartz S, Hassman D, Shelmet J, et al. A multicenter, open-label, randomized, two-period crossover trial comparing glycemic control, satisfaction, and preference achieved with a 31 gauge x 6 mm needle versus a 29 gauge x 12.7 mm needle in obese patients with diabetes mellitus. *Clin Ther.* 2004;26(10):1663-1678. 2. Kreugel G, Keers JC, Kerstens MN, Wolffenbuttel BHR. Randomized trial on the influence of the length of two insulin pen needles on glycemic control and patient preference in obese patients with diabetes [published online ahead of print April 10, 2011]. *Diabetes Technol Ther.* 2011;13(7):737-741. doi:10.1089/dia.2011.0010. 3. Hirsch LJ, Gibney MA, Albanese J, et al. Comparative glycemic control, safety and patient ratings for a new 4 mm x 32G insulin pen needle in adults with diabetes. *Curr Med Res Opin.* 2010;26(6):1531-1541. 4. Gibney MA, Arce CH, Byron KJ, Hirsch LJ. Skin and subcutaneous adipose layer thickness in adults with diabetes at sites used for insulin injections: implications for needle length recommendations. *Curr Med Res Opin.* 2010;26(6):1519-1530. 5. Data on file. 6. Frid A, Hirsch L, Gaspar R, et al; Scientific Advisory Board for the Third Injection Technique Workshop. New injection recommendations for patients with diabetes mellitus. *Diabetes Metab.* 2010;36(suppl 2):S9.

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DON'T fall back with fall coming

By Carolé Mensing,
RN, MA, CDE, FADE,
Joslin Diabetes Center,
Boston, MA



As the daylight hours diminish, and the weather changes from warm to cool, most of us begin to think about hibernating in our homes. The temptation is to fall back into cold weather habits of not exercising as much and eating more comfort foods.

As the seasons change, your health can change, too. And just like you might consider winterizing your home, the change in season is the perfect time to review and winterize your diabetes health goals. Make sure your colder weather plan fits with your diabetes self-management plan. Here are a few tips to help keep on track.

FOOD

Meal planning for diabetes is about planning ahead and watching portions. It's easy for the pounds to pile on during the winter months, in part, because of a drop in physical activity and a change in the type and amounts of foods you might be eating. Eating smaller

(CONTINUED ON PAGE 22)

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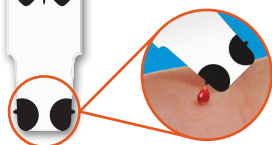
If the great outdoors is calling you, dress for the cold weather. Wear layers and warm walking shoes or boots. Don't forget a hat and gloves. Try an outdoor activity, such as skating, cross country skiing or snowshoeing.



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Diabetes Care

(CONTINUED FROM PAGE 20)

portions (yet more vegetables) can help you stay on track with your diabetes and weight goals. Let your plate be your guide if you need a little help with portion control: $\frac{1}{2}$ plate vegetables, $\frac{1}{4}$ carbs and $\frac{1}{4}$ protein. If you go back for seconds, choose vegetables, which are low in calories and carbohydrates.

Meatloaf, stews and mashed potatoes are typical cold-weather fare. You don't have to stop eating them, but again, watch your portions. Try eating a lower-carb, high-fiber snack shortly before a meal, such as raw vegetables, air-popped popcorn or a small handful of nuts to help limit spikes in your blood glucose after a meal—and help you eat less, overall. Aim for at least 25 to 38 grams of fiber each day. A dietitian can also help you learn how to make your usual comfort foods a little healthier, as well as teach you how to fit them into your eating plan.

BLOOD GLUCOSE MONITORING

Be a detective and keep your blood glucose meter handy to check glucose levels. Consider checking a little more often to make certain there isn't a rise in glucose levels with changes in activity or food. Write down your blood glucose results in a log book, and look for patterns of high and/or low blood glucose. While occasional high and low readings are expected, talk with your healthcare provider if your glucose numbers are not in your target range.

MEDICATIONS

Take your medications routinely and as prescribed. Notice changes in blood glucose levels that may indicate a tuneup is needed for the winter months. Ask your Walgreens pharmacist if you have questions or concerns about any of the medicines you take.


PHYSICAL ACTIVITY

Every little bit of physical activity helps. Research shows that doing even 15 minutes of activity every day lowers your risk of heart disease and increases your lifespan by several years.

You may not be able to do your usual outdoor activities during cold, snowy weather, but don't let that stop you altogether: Even daily routine tasks, done with energy and vigor, help burn off calories. Dusting, vacuuming, washing floors, climbing stairs, emptying the dishwasher and doing laundry boosts heart health and can lower blood glucose levels. For more structured activity, try a few exercise DVDs or follow along with an exercise program on television. Or consider investing in a treadmill, stationary bike or rowing machine.

COPING

Those cold, darker days can be dreary. It is so easy to settle in when the days get darker earlier. And cold, dark days can sometimes bring down your mood, too. Physical activity can help you better manage your mood, as well as your diabetes. Try out some diabetes smartphone applications (apps), and stay connected with others who have diabetes by joining an online support group, diabetes community or forum. Ask your healthcare team for some suggestions. If you find you are feeling sad or blue, ask your provider for a referral to a behavioral health specialist.

While you can't do much about the weather or the seasons, you can be prepared. Just as you might change the batteries in your smoke detector with the change in seasons, think about how you might need to change your diabetes management plan. Planning ahead keeps you from falling back. 

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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

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.



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

identify yourself

WITH A DIABETES MEDICAL ID

By Alison Mitchell, RN, MSN, ACNP-BC,
American Academy of Nurse Practitioners



You have diabetes and your healthcare provider asks you to wear a medical ID, but you are not sure why. You worry it will be a stigma you carry around at your wrist. You don't want diabetes to take over your life. So, why do health professionals suggest people with diabetes wear a medical ID?

If you become hurt and cannot voice your needs, a medical ID can save your life.

What would happen if your blood glucose dropped too low or rose too high and you became confused or passed out? What if you began to act in strange ways and slurred your words? People might think you were drunk and would not go for help. You would not be able to tell them about


your health needs.

A medical ID gives you the peace of mind that if anything happened and you could not ask for help, the medical team would have the right information to treat you correctly.

The American Diabetes Association recommends everyone with diabetes wear medical identification. When you wear a medical ID, it is like putting on

a seat belt. On most days, your seat belt doesn't need to do much, but when an accident happens, it can save your life.

If you don't want to wear your medical ID on your wrist, try an engraved necklace.

It doesn't matter which type you choose. Just keep in mind that an ID tells others about your diabetes when you are unable to do so. 

your medical ID should:

1 be visible and display medical information. Avoid IDs that look too much like jewelry; you don't want anyone to overlook it.

2 show that you have diabetes. If you take insulin, use an insulin pump or use any other medicines, put these on the ID also.

3 provide emergency contacts, if possible. If not, keep a card in your wallet or purse with your name and emergency information. Then you can refer to this card on your medical ID.

beyond sugar

**AGAVE NECTAR,
PALM SUGAR
AND FRUCTOSE**

By Amy Campbell, MS, RD, CDE

Want to sweeten your morning coffee or whip up a batch of cookies? These days, there are a lot of sweeteners to choose from. Sweeteners fall into two groups:

1 Calorie-free sweeteners

These are sometimes called substitutes or artificial sweeteners because they don't contain calories or carbohydrates. Examples include aspartame, sucralose, acesulfame-K, saccharin and stevia. They are often found in diet soft drinks and sugar-free foods and can be used as a tabletop sweetener. Some—but not all—are fine for baking and cooking.

2 Caloric sweeteners

These contain calories, have carbohydrates and may have healthy nutrients—sugar, brown sugar, high-fructose corn syrup, honey, molasses, maple syrup and sugar alcohols, such as sorbitol, mannitol and xylitol. Sugar alcohols have about half the calories and carbohydrates of sugar.

Many people like to use more natural, less processed sweeteners. Some have a lower glycemic index, which means they are less likely to cause your blood glucose to surge after you consume them. Turn the page for some sweeteners that may be new to you. They are sold in many supermarkets and health food stores.

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15

Coconut palm sugar is a more natural, less processed sweetener with only 15 calories and 4 carbs per tablespoon. It is lower in calories and carbs than regular table sugar.

MORE NATURAL, LESS PROCESSED SWEETENERS

1 agave nectar

Many people with diabetes like to use agave nectar, or syrup. It is found in food products, such as granola, energy bars, drinks and chocolate. Agave nectar comes from several types of agave plants, like blue agave from which tequila is made. It comes in light, amber, dark and raw forms, and works well in place of honey or sugar in recipes.

Agave nectar is made up of two types of sugars: fructose and glucose. Fructose has a lower glycemic index and glycemic load than table sugar, or sucrose. The glycemic index of agave syrup is low. Different types range from 10 to 19. Agave nectar is also 1.4 to 1.6 times as sweet as sugar, so you can use less. One tablespoon contains 60 calories and 16 grams of carbohydrates, a little more than the calories and carbs in

1 tablespoon of table sugar.

While agave nectar is currently popular, as with all sweeteners, you should limit the amount you use. Agave nectar contains a lot of fructose. Fructose, a natural sugar, may increase insulin resistance, which means that the insulin you make or inject won't work as well as it should to control blood glucose levels. If you eat too much agave nectar, it may also raise your triglyceride (blood fat) levels. If you decide to use agave nectar, remember that it does contain calories and carbohydrates, so you need to count it in your eating plan. Check your blood glucose more often to find out how it affects your blood glucose. And if you have high triglycerides, liver disease or insulin resistance, talk with your healthcare provider first before using agave nectar.

2 coconut palm sugar

Coconut palm sugar is a natural sweetener that comes from the flowers of the coconut palm tree. Coconut palm sugar is light brown in color and comes in a block, granules or a liquid. The flavor of coconut palm sugar is like brown sugar, yet it cooks and dissolves like table sugar. Coconut palm sugar has a low glycemic index of 35, but is made mostly of sucrose, rather than fructose. One tablespoon of coconut palm sugar contains 15 calories and 4 grams of carbs and is lower in calories and carbs than regular

table sugar. Also, coconut palm sugar contains small amounts of other nutrients, such as potassium, calcium, iron and zinc.

Coconut palm sugar can be used in place of table sugar in cooking and baking. There are no special health reasons to use coconut palm sugar, other than the fact that its glycemic index and calorie content are fairly low. But be prepared to pay more for this sweetener: Coconut palm sugar can cost between \$8 and \$10 per pound in the United States.

Sweetener (1 tablespoon)	Calories	Carbs (grams)	Glycemic Index
Sugar	46	12	65
Honey	64	17	61
Agave nectar	60	16	10–19
Coconut palm sugar	15	4	35
Crystalline fructose	46	13	22

3 crystalline fructose

Fructose is a sugar that is found, along with glucose and sucrose, in fruits, vegetables and honey. It's about twice as sweet as table sugar. When you think of fructose, you might think of high fructose corn syrup, a cheap sweetener often used by food companies to sweeten drinks and foods. But crystalline fructose, which is a fine, white powder, is not the same as high fructose corn syrup. Both can be made from corn,

but crystalline fructose is further processed to make it 100% pure fructose (high fructose corn syrup is 55% fructose and 45% glucose).


Crystalline fructose has a low glycemic index of 22 (the glycemic index of high fructose corn syrup is 62). Fructose has been used as a sweetener since the 1850s. Today, more and more food companies use crystalline fructose to sweeten foods such as baked goods, frozen foods, dairy foods, candy,

energy bars, flavored waters and sports drinks. Because it is so sweet, less can be used to sweeten a product, which lowers the calorie content somewhat. One tablespoon of fructose has 46 calories and 13 grams of carbohydrates, the same as table sugar. But crystalline fructose is twice as sweet as table sugar, so you need less to provide the same level of sweetness.

Fructose is popular among people with diabetes because of the way it's handled in the body. Some

people believe that fructose has little effect on blood glucose levels. However, there is some concern about its possible side effects. Fructose may cause an increase in:

- insulin resistance.
- weight gain.
- cholesterol and triglycerides.
- kidney disease.
- heart disease.

If you have any of these issues, check with your healthcare provider or diabetes educator before you use crystalline fructose. 

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SANOFI DIABETES 

protein and fat matter, too

By Nora Saul, MS, RD, CDE, LDN



Pick up any diabetes magazine and you will find plenty of articles on carbohydrates: how many and what type to eat, or the best method of counting them. Sometimes it seems as if carbohydrate-based foods are the only ones that matter. But that isn't true. Its fellow nutrients, protein and fat, play an important role in the diet and in blood glucose management. Understanding the role of these energy sources can help you make better food choices that can improve your glucose control and possibly even enhance your enjoyment of your diet.

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Joslin Diabetes Center recommends that no more than 35% of calories come from fat. For a woman eating about 1,500 calories a day, the most amount of fat she should have in a day is 58 grams.

Carbohydrates, protein and fat give the body energy in the form of calories. Protein supplies the same amount of calories as carbohydrates, while fat has more than double. You can gain weight eating too much fat or protein as easily as eating too many carbohydrates.

Why do we need to eat protein?

Protein is found in every cell in the body and is needed to build muscle and make enzymes and hormones, such as insulin.

Protein is made up of building blocks called amino acids. Because the body can't make all the nine essential amino acids we need and because we can't store protein the way we store fat, we have to eat protein every day. Almost all foods contain some protein, but the main sources are red meats, poultry and fish; dairy foods, such as cheese, milk, yogurt and eggs; dried peas and beans; and nuts and seeds.

How much protein do we need?

The Recommended Dietary Allowance for women 19 and older is 46 grams and for men 19 and older, 56 grams per day. To give you an example of how easy it is to meet this recommendation, a 4-ounce chicken breast provides about 28 grams of protein. Most people eat more protein than they need. Some people need more protein, though, like the elderly, those who are ill and athletes competing in strength-training events.

While there is no specific guideline for people with diabetes, the Joslin Diabetes Center recommends that overweight people with type 2 diabetes should aim for about 20%–30% of their total daily calories from protein. So a 70-inch tall, 250-pound man following an 1,800-calorie weight-reduction diet would need between 112 and 135 grams of protein per day.

How does protein affect blood glucose?

Although insulin is required to digest protein, it doesn't cause a rise in blood glucose when consumed. Eating lower-fat protein-based foods, such as egg whites, low-fat cottage cheese and white meat fish or poultry with carbohydrates at meals allows you to eat more food without any great effect on your blood glucose.

Carbohydrate-based foods—especially those that have a high glycemic index (high glycemic index carbohydrates are easily digested)—often cause quick increases in blood glucose. Protein-based foods take longer to digest than carbohydrates and may help slow the rise in blood glucose after eating.

Can eating protein help people with type 2 diabetes lose weight?

Yes. The combination of more protein and fewer carbohydrates can help the body keep lean muscle mass (which burns more calories) and reduce appetite.

What are the best sources of protein?

Both plant and animal proteins can be part of a healthy diet. Animal proteins are high in B vitamins, iron and zinc and, in the case of dairy foods, calcium. Plant-based proteins, such as beans, contain iron, magnesium and potassium, while fresh soybeans provide vitamins A and E. Proteins that are low in saturated fat are the best options. Those include skinless chicken or turkey, seafood, lean red meat, nonfat or low-fat milk, beans, tofu and seitan.

What is fat?

Fat has many useful roles in the body. It supplies essential fatty acids and helps us absorb the fat-soluble vitamins A, D, E and K. Fat also helps keep us warm.

Unlike protein, the body is able to store a large amount of fat. Unused calories from carbohydrates and protein are stored as fat in order to provide a ready supply of fuel when energy needs are increased, such as during exercise.

How much fat do we need?

Because the body can store excess carbohydrates and protein as fat, we need to eat only a very small amount. However, since

fat provides flavor to our foods, diets that are very low in fat (less than 20% of calories) tend to be hard to follow long term because they can lack richness. Along with the essential fatty acid, animal fats contain saturated fat and cholesterol. People with diabetes should aim for less than 7% of their calories from saturated fat and less than 200 mg of cholesterol per day.

How does fat affect blood glucose?

Unlike carbohydrates, fat can't be converted into glucose, so it doesn't directly raise blood glucose levels in the same way carbohydrates do. However, eating large amounts of fat can make it harder for your own insulin, injected insulin or even your diabetes pills to do their job. Take the example of two meals that have the same carbohydrate content: One meal contains 12 grams of fat and the second meal has 50 grams. Even though those meals have the same carbohydrate load, the second meal is likely to require more insulin, whether that insulin comes from your beta cells or from an injection.

Eating large amounts of fat can also prolong the time blood glucose levels will remain high after a meal. Many

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A registered dietitian can help you make sure you are eating the right amount of high quality, heart-healthy proteins.

people find that their blood glucose is still high in the morning when they eat a high-fat meal for dinner.

On the other hand, eating small amounts of healthy fat can be helpful. When combined with carbohydrates, for example, a tablespoon of peanut butter on whole grain bread, can keep glucose levels from spiking by lowering the glycemic index of carbohydrates, add flavor and also help you feel fuller for a longer period of time.

What are good sources of healthy fats?

Like protein, fat can come from vegetable or animal sources. Aim to eat less from fatty red meats, whole-milk dairy foods and bakery products. Instead, choose most of your fats from the heart-healthy fats: omega-3 fats, found in cold water fish like mackerel, salmon and tuna; and vegetable fats, such as nuts, olives and avocados.

The next time you sit down to dinner, remember to include all three nutrients on your plate. 

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ARE YOU worn out?

By Martha Funnell,
MS, RN, CDE


If your answer is yes, then you are not alone. A recent survey from the Diabetic Research Foundation showed that almost 85 percent of people with diabetes reported that fatigue was one of their leading daily challenges.

Although everyone feels tired now and then, fatigue is different. Many people describe it as just being too tired to do even the simplest things. Being fatigued a lot of the time adds to the stress in your life and can even lead to depression.

FATIGUE AND PEOPLE WITH DIABETES

People with diabetes sometimes feel fatigued when their blood glucose level is very high or very low. You may also feel very tired when your blood glucose is going up and down a lot. The cells in your body need glucose for energy. So it makes sense that when your blood glucose is low, you don't have enough energy for the body, so you feel fatigued. When your blood glucose level is high there is plenty of glucose, but because you have diabetes, it stays in your bloodstream and does not go into the cells where it can be used for energy. Fatigue can also be a sign of depression and is a common side effect of several medicines, such as those for high blood pressure and depression.

PREVENT FATIGUE

The first step in solving a problem is to figure out the cause. Some people make a note in their blood glucose logbook when they are feeling extra tired. Figuring out how your energy level is linked to your blood glucose levels is a good first step. The next step is to share the notes about your fatigue with your healthcare provider, who may be able to help you figure out a cause and a way to care for it. 

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Feeling tired all the time is a challenge that can have a big effect on your quality of life. Once you figure out the cause, you can take steps toward feeling like yourself again.

HOW CAN I KEEP FROM FEELING fatigued?

① Keep your blood glucose in your target range.

As you might expect, the first thing you can do is to keep your blood glucose as close to normal as is safe for you. This will give your cells the glucose they need for energy.

② Eat small meals throughout the day.

You may notice that you feel extra tired after a big meal, or you might even fall asleep without really trying or meaning to. Part of the reason is high blood glucose, but the other issue is that meals high in fat take a long time to digest. It can make you feel overly full and sleepy. Or if you go long periods of time without eating, your blood glucose may be too low, which makes you feel tired.

③ Stay active.

Although it doesn't sound like it would help, regular physical activity actually gives you more energy because of the hormones your body makes when you exercise. It also helps you cope with the daily hassles of caring for diabetes and the stress in your life. And you'll sleep better. If you are taking medicine that lowers your blood glucose, exercise can cause you to have a low blood glucose. That can cause you to feel very tired rather than energized. Check your blood glucose if you feel more tired after exercise. If your blood glucose levels are below your target range, talk with your healthcare provider about what you can do to keep your blood glucose on track with exercise.

④ Get a good night's sleep.

A lack of restful sleep can also lead to fatigue. If you have trouble falling asleep easily or wake up a lot at night, you may not be getting the right kind of sleep. To feel rested, you need both deep sleep (delta sleep) and the stage of sleep in which you dream (REM sleep). Many people with diabetes have sleep disorders, such as sleep apnea. If you often wake up tired or you snore heavily, talk with your healthcare provider about having a sleep study to find out if you have a sleep disorder.

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probiotics

the body's friendly bacteria

By Johanna Burani, MS, RD, CDE

Many kinds of bacteria, or very small organisms, live in the human body. They are found all over: on our skin, in our mouths, in our guts and in our blood.

How do we make sure that our bodies have lots of good bacteria? First of all, we want to keep ourselves in good health. That is the best way to help the body stay strong. We can do so by:

- ① eating a well-balanced diet.
- ② getting regular exercise.
- ③ getting enough sleep.

But we can do even more. We can eat probiotics, or good bacteria.

SOURCES OF PROBIOTICS

You may have seen probiotics listed on the labels of some yogurts and fermented milks (buttermilk or kefir, for example) and in cottage cheese. Those dairy foods have the most probiotics. Good bacteria are also present in soy sauce, miso, tempeh and fresh sauerkraut. You will also find them in the juice section, where some cartons of juice will note that probiotics have been added. And if you look at breakfast cereals, energy


or snack bars, infant formulas, bottled waters and even pizza crust, you will find probiotics in some of these foods, too.

It is also possible to add probiotics to the body in the form of tablets, capsules or powders. Ask your Walgreens pharmacist to help you find the type that is best for you.

BAD BACTERIA

Some bacteria can harm the body by causing problems with the skin, mouth, gums, stomach, intestines, lungs and other parts of the body. Those are the bad bacteria, and we should try to keep away from them. This is why, for example, we wash our hands often, don't eat unsafe food and don't eat from unclean dishes.

GOOD BACTERIA

Some bacteria, however, keep our bodies healthy and working well. Those are the good bacteria. They already live inside our bodies, and we want to keep adding to our natural supply because they can do many good things, such as provide our bodies with vitamin K. Good bacteria may help us avoid dental cavities, colds, skin infections, diarrhea, stomach pains and gas, some allergies and asthma. The good bacteria are with us all the time, but we may not know how well they work to keep us in good health until they are attacked by the bad bacteria and are weakened. Then we may not feel well. With diabetes, the body may have other reasons for not feeling well, but adding in more good bacteria can help the body feel better. 

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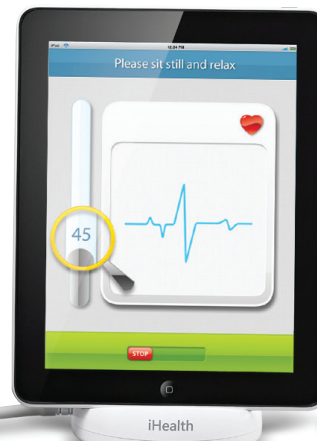
Are probiotics safe? Yes. They are a natural part of a healthy body and a safe way to help the body stay healthy. Why not try a probiotic yogurt or a probiotic drink? Over time, you may be pleased with what they do for you. Some probiotics offer more benefit to the body than others. If you can, speak to a registered dietitian about the probiotics in the foods you have chosen.

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Paula Deen has written more than 14 cookbooks that have sold more than 8 million copies. She is a two-time Emmy winner for her popular show “Paula’s Best Dishes” on The Food Network. Since her diagnosis with type 2 diabetes in 2008, she often travels to the Walgreens near her Savannah home, where she purchases her diabetes care products. Paula has worked closely with her son Bobby on his new show “Not My Mama’s Meals,” on which he takes many of the less-healthy ingredients out of his mother’s dishes—like Pimiento Cheese and Gooney Butter Bake—and recreates them. But Paula, his biggest fan says, “You don’t feel deprived in any way with these lighter recipes, which is wonderful.”

LIGHTENING UP

Paula feels that, in general, “healthier remakes” can still be tasty. That’s why she’s happy about Bobby’s new show, recommending lightened-up recipes and diabetesinaneewlight.com, the website for Novo Nordisk’s *Diabetes in a New Light* which features diabetes-friendly lighter versions of her regular recipes. “We have developed lighter recipes than the originals that still have all that wonderful good flavor, but that are not quite as caloric. We’re so happy to

offer people a nice library of healthy recipes for their kitchens. Hopefully these recipes will not only bring comfort to the belly but also to the soul.” Paula hopes that she can be a positive role model for people with type 2

diabetes, and offers some words of encouragement for people struggling with their diagnosis. “Diabetes is like putting together a puzzle. There’s your age, your lifestyle, genetics and stress. So it’s not just what you eat.”

DIABETES DIAGNOSIS

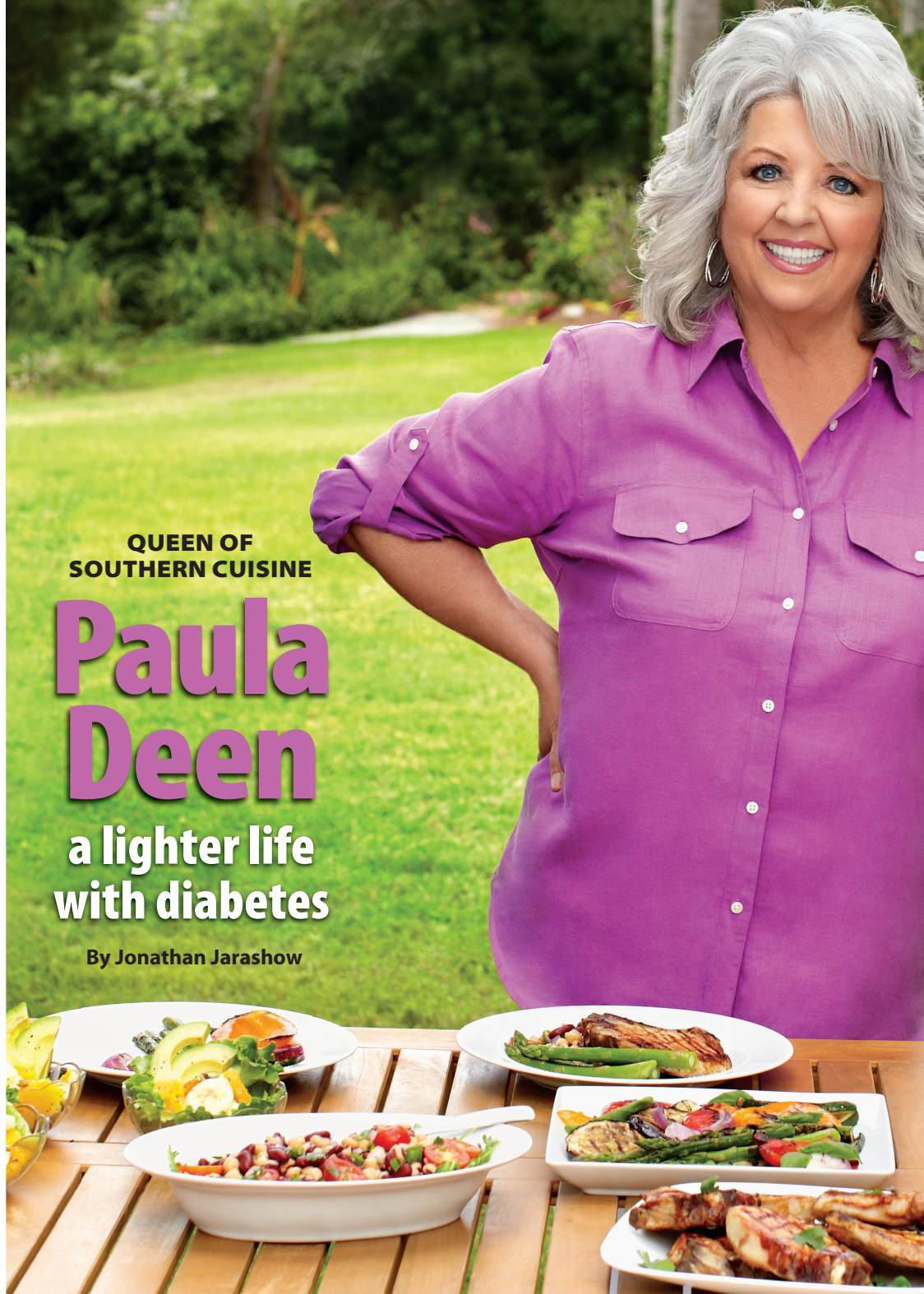
Paula thought her doctor had gotten the test wrong when she was diagnosed with diabetes because she had no symptoms. In addition, no one else in her family had diabetes, other than a great aunt who had

QUEEN OF
SOUTHERN CUISINE

Paula Deen

a lighter life with diabetes

By Jonathan Jarashow





A HEALTHIER FAMILY LIFE

Paula and the rest of her family are now much more conscious of what they eat. But Paula affirms that she never ate regularly what she cooks on her show. “The show is for entertainment, it’s for sharing Southern history and recipes. But I don’t eat fried chicken, biscuits and gravy every day of my life!” She saves her rich, home-cooked meals for Sunday, when she cooks Southern food the way her grandmother taught her. Paula preaches moderation and portion control and points out that no single food causes diabetes.

“None of us wants to go through life craving something and feeling like we are denied, because food is a big part of people’s lives—it’s how we show our love, it’s how we interact socially with other people. You can’t go through life feeling like you will never know that pleasure again. I am a firm believer in not denying yourself of those pleasures; it’s just a matter of how often you do it. I have given myself a free day to eat my traditional Southern foods, and that works for me.”

DAILY ROUTINE

Aside from walking a mile a day on her treadmill at home, Paula has incorporated changes with her daily meals—while still enjoying what she

is eating. Paula believes that in the South, people eat more vegetables than in any other part of the country she has visited. “We all know how good vegetables are for us. People hear the word ‘fried’ so much in relation to Southern food that people think

enough to go to their doctors and have their blood work done and to always just be familiar with their numbers.”

Paula knows that taking her daily medication is an integral part of her diabetes care and is diligent about it. “I am on Victoza, and my numbers have gotten better

‘None of us wants to go through life craving something and feeling like we are denied, because food is a big part of people’s lives.’ — Paula Deen

everything we eat is fried.” Paula is now more aware of what kinds of snacks she keeps in the house. She prefers to have watermelon, berries and nuts on hand, versus potato chips and fatty snacks. She also makes sugar-free ice cream to enjoy with her husband. “There’s nothing like a bowl of ice cream at night. I keep a sugar-free homemade ice cream in my freezer for those nights when we feel like we’ve just got to have something decadent. It’s delicious, and I incorporate my fruits with it.”

YOUR HEALTHCARE TEAM AND YOU

Paula stresses the importance of seeing the doctor regularly. “I can’t encourage people

since I have been taking it. You should go to your doctor, find out what works best for you and then start making small changes. It will help you to feel better about yourself and help you to feel better physically on a day-to-day basis. The first thing is knowledge. With knowledge comes power—and that first step is visiting your doctor.”

Paula wants to use her fame for a good cause. She is a spokeswoman for *Diabetes in a New Light* because she wants to spread hope among people with diabetes: “When I’m out of here and my game is up, I really hope that when people hear my name, the one word that comes to their mind is the word hope—not butter. Hope.” 🍷

type 1 diabetes. But when her diagnosis was confirmed, Paula started on the medication prescribed to her and learned that small changes in her diet and exercise routine can add up to big results.

Paula Deen's recipes

IN A **new light**

Spicy Chicken Phyllo Rolls

Makes: 8 servings

Prep time: 25 minutes

Cook time: 35 minutes

- 1 tablespoon canola oil
- 1½ pounds ground chicken
- 1 Vidalia onion, finely chopped
- 1 (4-oz) can chopped mild green chilies
- 1 (1-oz) package salt-free taco seasoning
- 2 garlic cloves, minced
- 1 cup reduced-fat shredded sharp cheddar cheese
- 2 tablespoons reduced-fat sour cream
- ¼ cup fresh cilantro, chopped
- 4 scallions, finely chopped
- 16 (9x14) sheets frozen phyllo dough, thawed
- 1 cup low-sodium mild green salsa

1. Preheat oven to 375°F. Spray two baking sheets with nonstick spray.

2. Heat oil in a large nonstick skillet over medium-high heat. Add chicken, onion, chilies, taco seasoning and garlic. Cook, stirring occasionally, over medium heat, until the chicken is browned and any liquid has completely evaporated, about 8 minutes. Remove from heat. Stir in cheese, sour cream, cilantro and scallions, mixing with a fork until well blended.

3. Place one sheet of phyllo with the short side facing you on a work surface. (Cover remaining phyllo with plastic wrap to keep from drying out.) Lightly spray the phyllo sheet with nonstick spray, then fold it in half lengthwise. Place about 2 tablespoons of filling in the center of the bottom end of the phyllo. Roll up jelly-roll fashion. Place the roll, seam-side down, on the baking sheet. Lightly spray the roll with nonstick spray.

4. Repeat with remaining phyllo sheets, filling and cooking spray to make a total of 16 rolls.

5. Bake until the filling is hot and the rolls are lightly golden, 20–25 minutes. Let cool 5 minutes, then cut each roll in half. Serve with the salsa.

NUTRITION INFORMATION

Per serving [2 rolls (4 halves) with 2 tablespoons of salsa]:

390 calories; 17 g total fat (2.5 g saturated fat, 0 g trans fat); 60 mg cholesterol; 390 mg sodium; 31 g total carbohydrate; 3 g dietary fiber; 22 g protein

Dietary exchanges:

2 starch, 1 medium-fat meat, 1 lean meat, 1½ fat, ½ vegetable

(CONTINUED ON PAGE 40)

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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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(CONTINUED FROM PAGE 38)

Vegetarian Gumbo

Makes: 8 servings • Prep time: 25 minutes • Cook time: 30 minutes

- 
- 2 tablespoons canola oil
 - 4 tablespoons all-purpose flour
 - 1 large yellow onion, chopped
 - 1 large green bell pepper, chopped
 - 2 stalks celery, chopped
 - 8 ounces sliced brown mushrooms
 - 3 tablespoons chopped garlic
 - 4 cups low-sodium vegetable broth
 - 1 (14.5-oz) can low-sodium diced tomatoes, with juice
 - 6 ounces vegetarian spicy sausage
 - 1 cup chopped okra, fresh or thawed frozen
 - ½ cup roasted red pepper
 - 1½ teaspoons Cajun seasoning
 - Black pepper, to taste
 - 4 green onions, chopped
 - ¼ cup chopped fresh parsley
 - Hot sauce, for serving

1. Heat oil in a heavy skillet (preferably cast iron) over medium heat. Add flour and cook, stirring frequently, until flour turns golden-brown and smells toasty, about 5 minutes. Add onion, bell pepper, celery, mushrooms and garlic; cook, stirring, until vegetables are softened, about 2 minutes.

2. Add broth, tomatoes, sausage, okra, roasted red peppers, Cajun seasoning and pepper to taste. Bring to a boil. Reduce heat and simmer, stirring occasionally, until gumbo begins to thicken and the flavors are blended, about 20 minutes. Stir in the green onions and parsley. Pass hot sauce at the table.

NUTRITION INFORMATION

Per serving (1 cup):

140 calories; 6 g total fat (0.5 g saturated fat, 0 g trans fat); 0 mg cholesterol; 450 mg sodium; 16 g total carbohydrate; 3 g dietary fiber; 7 g protein

Dietary exchanges:

1 starch, ½ lean meat, ½ fat, 1 vegetable

Vanilla Pound Cake with Black Cherry Sauce

Makes: 16 servings • Prep time: 15 minutes • Cook time: 35 minutes

Cake

- | | | |
|---|---|---|
| Nonstick baking spray with flour | 3 | tablespoons unsalted butter, at room temperature |
| 1½ cups all-purpose flour | | |
| ½ teaspoon baking powder | | |
| ¼ teaspoon baking soda | 2 | tablespoons canola oil |
| ¼ teaspoon salt | 1 | cup sugar |
| 2 large eggs, at room temperature | | |
| 2 large egg whites, at room temperature | 1 | (12-oz) package frozen pitted dark sweet cherries, thawed |
| ½ cup fat-free or low-fat (1%) buttermilk | ½ | cup water |
| 1 (4-oz) jar pear baby food | 2 | tablespoons sugar |
| 1 vanilla bean split lengthwise, seeds | 1 | tablespoon cornstarch |
| | | Grated zest of 1 lime |

Black Cherry Sauce

1. To make the cake, preheat the oven to 325°F. Spray a 10-cup Bundt pan with nonstick baking spray with flour.

2. Whisk the flour, baking powder, baking soda and salt together in a medium bowl. Whisk the eggs and egg whites in another medium bowl until frothy. Whisk in the buttermilk, pear baby food and vanilla until blended.

3. With an electric mixer on medium speed, beat the

Southern Baked Beans

Makes: 6 servings

Prep time: 10 minutes • Cook time: 35 minutes

- 3 slices bacon, chopped
- 1 large onion, finely chopped
- 1 (16-oz) can vegetarian baked beans, drained
- ¼ cup low-sodium ketchup
- 3 tablespoons maple syrup
- 1 tablespoon barbecue sauce
- 1 tablespoon yellow mustard
- 1 teaspoon dry mustard

1. Preheat oven to 350°F. Spray a small baking dish with nonstick spray. Cook the bacon in a medium nonstick skillet over medium-high heat until crisp, 3–4 minutes. Transfer to paper towels to drain.

2. Drain off and discard the fat from the skillet and set over medium-high heat. Add onion and cook, stirring, until softened, about 7 minutes.

Remove from heat. Stir in bacon, beans, ketchup, maple syrup, barbecue sauce, yellow mustard and dry mustard.

3. Spoon the bean mixture into the baking dish. Cover loosely with foil and bake until the edges are bubbly and the filling is hot, about 25 minutes.

NUTRITION INFORMATION

Per serving (½ cup):

150 calories; 2.5 g total fat (0.5 g saturated fat, 0 g trans fat); 5 mg cholesterol; 420 mg sodium; 29 g total carbohydrate; 4 g dietary fiber; 6 g protein

Dietary exchanges:

1½ starch, 1 very lean meat

Recipes adapted with permission of Novo Nordisk Inc. Go to diabetesinnewlight.com for additional recipes.

butter and oil in a large bowl until blended, about 1 minute. Gradually add the sugar and beat until fluffy, about 2 minutes.

4. Reduce the speed to low. Alternately add the flour mixture and the egg mixture, beginning and ending with the flour mixture and beating just until blended.

5. Scrape the batter into the pan; spread evenly. Bake until a toothpick inserted into the center comes out clean, 30–35

minutes. Let cool in the pan on a rack 10 minutes.

6. Remove the cake from the pan and let cool completely on the rack.

7. Meanwhile, to make the cherry sauce, bring the cherries, water, sugar, cornstarch and lime zest to a boil in a medium saucepan. Reduce the heat and simmer, stirring constantly, until the sauce bubbles and thickens, about 1 minute. Transfer the sauce to a bowl (makes 2 cups). Serve with the cake.

NUTRITION INFORMATION

Per serving (1 slice with 2 tablespoons sauce):

170 calories; 4.5 g total fat (1.5 g saturated fat, 0 g trans fat); 35 mg cholesterol; 95 mg sodium; 29 g total carbohydrates; 1 g dietary fiber; 3 g protein

Dietary exchanges:

1 starch, 1 other carbohydrate, 1 fat

THE WHOLE STORY ABOUT whole grains

By Johanna Burani, MS, RD, CDE



What are whole grains?

Whole grains are natural carbohydrates that keep all the parts of the entire grain seed, even after processing. Some examples of whole grains are corn, barley, brown rice, buckwheat, whole oats and 100% whole wheat breads and crackers. When you eat them, your body gets all the good nutrients they contain. That's why whole grains are so good for everyone—with or without diabetes.

be *i*nformed

The USDA 2010 Dietary Guidelines recommend that 50 percent of all the grains you eat in a day should be whole grains. Most adults should eat at least 3 servings (or 3 ounces) of whole-grain foods every day.


What are the three parts of whole grains?

- **Bran:** This is the outer shell that protects the grain from insects, chemicals in the air and strong winds and rain. The bran layer has B vitamins, fiber, minerals and some disease-fighting products called phytochemicals.
- **Endosperm:** This is the inside part of the grain, mostly made up of starch and sugar. It also has some protein and B vitamins.
- **Germ:** This is the innermost part of the grain, which has the seed. It is made up of B vitamins, vitamin E, heart-healthy unsaturated fat and phytochemicals.

The best way to know if a grain is a whole grain is to look at its food label. The first term on the list of ingredients should include the word *whole*. Some examples are *whole oats*, *whole rye* or *whole wheat*. Also, *100% whole grain* on a food label means the food contains a whole grain, but

it doesn't mean the food contains *only* whole grains. Another good clue: A whole grain food product will have at least 3 grams of dietary fiber per serving.

What are the benefits of whole grains for people with diabetes?

- The body gets more vitamins, minerals and fiber from whole grains than from refined or processed grains.
- Whole grains help you feel more full for a longer time between meals. You may eat less food as a result, which may help you control your weight and your diabetes.
- Whole grains help stop blood glucose spikes so you can have better control of your blood glucose levels.
- Whole grains may help you lower your blood cholesterol level and improve heart health.
- The high-fiber content in whole grains helps your body have regular bowel movements. 

How can I add more whole grains to my diet?

- Cook old fashioned or steel-cut oats for breakfast instead of quick, one minute or instant oats products.
- Choose high-fiber, ready-to-eat cold cereals that are not highly processed and that contain whole kernels or seeds.
- Look for heavy, dark breads that have whole grains that you can see in each slice.
- Add barley, corn, quinoa or bulgar to soups, stews and salads or use these whole grains as a side dish.
- Use 100% whole wheat flour or whole cornmeal when you prepare tortillas, pizza crust, bread or some sweets.
- Cook whole wheat pasta and brown rice.



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