

Sweet Nothings

Volume III, Issue 4

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Spotlight on Northampton County

Submitted by: Sharon Long, Health Educator, PIO

Helen Ford, RN

Diabetes was identified as a priority health issue in the 2006 Community Health Assessment for Northampton County; county residents and health professionals recognized diabetes as a major burden both to individuals and to the community. In addition to implementing other outreach activities, the health department decided to participate in the Diabetes Self Management Education program.

The first DSME class began with two clients. Curriculum instruction was provided by Helen Ford, RN, and Sharon Long, Health Educator, and a guest speaker, Cooperative Extension Director, Rose Massey, whose specialty area is nutrition. Incentives including monitors, diabetes handouts, notebooks, glucose gel and tablets, gas vouchers, and gift cards were given to clients.

The clients were also encouraged to use the county wellness facility to be more physically active. Treadmills, elliptical, stationary bikes, free weights, and weight machines are available free to Northampton County residents. In addition, the fitness center includes a blood pressure machine, device which measures the percent of body fat, and scales.

With a little encouragement, our first two students began exercising together at the wellness center. Soon, they also began shopping together and searching the internet for diabetes supplies and prescription medications. One of them was very good at finding help with medicine costs and the other was good at preparing healthy foods and reading labels so they became great support for each other.

We hope as educators that these participants benefited from the DSME program and learned how to better manage their diabetes. They are better informed of resources in the community. The friendship which developed has proven to be a source of strength and courage for both.

Data Update

As of March 5, 2009:

Total Number of Patients: 499

Total Number of New Patients: 66

Pre A1C: 8.0

Post A1C: 7.1

Foot Exams: 55%

Remember



Data reports and PDSAs are due the 5th of each month.

Program Update

Cohort II completed data collection on April 5, 2009. The ADA application for recognition will be filed in mid April. Notification of recognition should occur within 90 days of the date of submission.

Applications for participation in Cohort III are due by April 10, 2009. Selection decisions will be made by the end of May.

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Calendar

Advisory Committee Conference Call—April 7, 2009 (10:00 —11:00)

Advisory Committee Annual Meeting—May 19, 2009 Raleigh (9:00—12:00)

Billing Training for Cohort II (open to Cohort I) - May 19, 2009 Raleigh - (1:00 — 4:00)

Program Staff Meeting/Curriculum Training for cohort III (open to Cohorts I and II) - June 16, 2009 (Raleigh) or June 23, 2009 Macon County Health Department (9:00 —4:00)



Physical Fitness

Submitted by Melinda Rummage, RN, CDE

Physical fitness is improving health through exercise. Physical fitness is the ability to perform regular moderate to vigorous levels of physical activity without excessive fatigue. Many years ago, people had to perform physical labor on a daily basis to survive. However, people today live a different life because of technology and science. Today most adults in our country lead sedentary lifestyles and perform little physical labor or exercise. The increase in sedentary life style has been linked to an increase of obesity, diabetes, and other chronic diseases. More that 108 million Americans are overweight or obese, 65 million have hypertension, 7.2 million suffer a heart attack in any given year, 21 million have diabetes, and approximately 41 million have “prediabetes”.

Decades of research show that physical activity has tremendous health-promoting and disease-preventing benefits. Physical activity is defined as any bodily movement that is produced by the concentration of skeletal muscles and that substantially increases energy expenditure. Exercise is more specific. Exercise is planned, structured, and repetitive bodily movement done to improve or maintain one or more components of physical fitness.

Benefits of regular physical activity has been shown to improve more than 50 different physiological, metabolic, and psychological aspects of our lives. Some of these include:

Brain: reduce stress and improves mood, decreases risk of depression, decreases anxiety, improves concentration, increases oxygen and nutrients to the brain.

Breast: decreases risk of breast cancer in women.

Lungs: improves respiratory capacity, improves ability to extract oxygen from the air.

Colon: decreases risk of colon cancer.

Muscles: increases muscle strength and tone, improves energy production and extraction of oxygen by muscle cells, improves muscle endurance and coordination.

Bones: increases bone density, strengthens bones, decreases risk of osteoporosis.

Thyroid: increases rate of metabolism.

Heart: decreases risk of heart disease, strengthens the heart, increases volume of blood pumped to the body, and lowers resting heart rate.

Pancreas: reduces the risk of type 2 diabetes.

Subcutaneous fat tissues: decrease body fat stores.

Joints: increases range of motion, reduces the pain and swelling of arthritis.

Arteries: increases levels of good cholesterol (HDL), decreases resting blood pressure, decreases risk of atherosclerosis, and improves circulation.

Regular physical activity can also increase a persons life span. It is recommended that adults participate in moderate intensity activities for 30 minutes at least 5 days per week. Exercise doesn't have to be done in a gym, but activities such as playing outside with your dog or hiking do count toward our daily physical activity.

Information obtained from Health The Basics, Eighth Edition by Rebecca J. Donatelle Pages 321 – 323.

Carb Counting Quiz

Carbohydrate counting quiz: In February Joanne, Melinda and Laura attended the Janet Reaves Conference. While we were there, we had a breakfast that included a cup of wonderful strawberries, 2 scrambled eggs, ½ cup of hashbrown potatoes, 3 slices of bacon, 8oz container of skim milk and lots of water. How many servings of carbohydrates did we eat?

A: 1

B: 3

C: 5

D: 7



Homemade Tomato Soup



This is a great recipe for tomato season that will fill you up with very few calories or carbohydrates.

Ingredients

- 1 (14-ounce) can chopped tomatoes
- ½ cup extra virgin olive oil
- Salt and freshly ground black pepper
- 1 stalk celery, diced
- 1 small carrot, diced
- 1 yellow onion, diced
- 2 cloves garlic, minced
- 1 cup chicken broth
- 1 bay leaf
- ¼ cup chopped fresh basil leaves
- ½ cup fat free half and half (optional)

Directions

Preheat oven to 450 degrees F.

Strain the chopped canned tomatoes, reserving the juices, and spread onto a baking sheet, season with salt and pepper, to taste, drizzle with ¼ cup of the olive oil and roast until caramelized, about 15 minutes.

Meanwhile, in a saucepan, heat remaining olive oil over medium-low heat. Add the celery, carrot, onion and garlic, cook until softened, about 10 minutes. Add the roasted chopped canned tomatoes, reserved tomato juices, chicken broth, and bay leaf. Simmer until vegetables are very tender, about 15 to 20 minutes. Add basil and half and half. Puree with a hand held immersion blender until smooth.

Melinda's Medication Moment

Submitted by Melinda Rummage, RN, CDE

Many people with diabetes have other health problems such as hypertension and dyslipidemia. If dyslipidemia is diagnosed by the primary care physician, then the patient may be put on a medication to treat this problem.

Nicotinic acid also known as Niaspan (extended release niacin) may be ordered for your patient. The minimum daily dose is 5 – 100 mg daily. The maximum dose is 2000 mg daily.

The main action of Niaspan is that it lowers LDL cholesterol and increases HDL cholesterol and lowers triglycerides. Main considerations include that it should be taken with food. It may cause flushing of the skin. It may increase blood glucose levels. The patient should have blood tests for liver enzyme concentrations. Long-acting forms may be more likely to cause liver malfunction.

Information from: Diabetes Medications Supplement; Working Together to Manage Diabetes. National Diabetes Education Program.



Did You Know?

Cardiovascular diseases, including heart attack and stroke, account for 65 percent of all diabetes-related deaths. People with diabetes are two to four times more likely to have a heart attack than someone without the disease. For a middle-aged person with type 2 diabetes, the risk of a future heart attack is the same as that of someone who's already had a heart attack. Also attention getting: when people with diabetes have heart attacks, they are more serious and more likely to result in death than in adults without diabetes.

www.diabetesincontrol.com

Diabetics Do Not Link their Disease to Heart Disease: Eight percent of people living in the U.S. suffer from the disease, and more than 65% of people with diabetes die from heart disease or stroke, according to the American Diabetes Association. Yet two out of three people with diabetes die of heart disease. By managing diabetes, high blood pressure and cholesterol, doctors say people with diabetes can reduce their risk of suffering from both diseases. One in three Americans, one in two minorities, and more than 4,000 people each day, are diagnosed with diabetes.

www.diabetes.org

People Lose Weight by Eating Fewer Calories

It may be one of the most commonsense observations ever to be validated in a diet study: people lose weight if they eat fewer calories, regardless of where those calories come from. A study by the Harvard School of Public Health found if people can maintain a calorie deficit no matter what type of diet they are on, they're going to lose weight.

New England Journal of Medicine. Feb 26, 2009

Diabetes Linked to Pregnancy-Related Depression in Low-Income Women

Among low-income pregnant women, those with diabetes have almost twice the odds of having perinatal depression and are also more likely to have postpartum depression, researchers report. In a Harvard Medical School study, women with diabetes were almost twice as likely as women without diabetes to experience depression during the perinatal period. This relationship remained consistent for different types of diabetes: preexisting or gestational diabetes with or without the use of insulin. Similarly, among women with no prenatal depression, those with diabetes had higher odds of new-onset postpartum depression. In the meantime, "among all women with depression, diabetes, or other mental or physical health conditions that complicate the normal course of pregnancy and postpartum recovery, careful monitoring and appropriate treatment are critical to ensuring the health of the mother and her child."

Pregnant women are usually screened for diabetes between 24 and 28 weeks gestation, and they should be screened for depression during pregnancy and at a 6-week follow-up

JAMA. Feb 25, 2007;301:842-847.

Why Risk for Heart Disease Increases for Those with Diabetes: Diabetes makes you prone to heart disease because of the way it alters your body functions. Diabetes changes how hard your heart works by worsening the composition of fats in the blood, including bad cholesterol (LDL), good cholesterol (HDL), and triglycerides, and causing arteries to become thick and stiff. This hardening of the arteries can happen earlier in people with diabetes. The condition makes the heart work harder, affects blood pressure and circulation, and can lead to heart attack or stroke.

www.diabetesincontrol.com

Obesity and Diabetes Triple Stroke Risk: The record number of midlife strokes among women in the United States is a reflection of the epidemic of obesity and insulin-resistant diabetes, which also bring an increase in cardiac-disease risk.

www.diabetesincontrol.com

Answer to Carb Counting Quiz on Page 2

Answer is B: 3



Learn More About Insulin Pumps

Interested in learning more about pumps?

Try these webcasts! They are \$25 for non-members of AADE and only \$15 for members.

Webcast 1: Insulin Pumps: What are they all about?

Webcast 2: The keys to successful Insulin Pump Initiation: Education and Medical Management

Webcast 3: Initiating Insulin Pump therapy: Where do you start?

Webcast 4: Fine Tuning, Problem solving, and follow up with pump therapy: what every diabetes educator should know.

go to www.diabeteseducator.org/webcasts

Practice Pearls: Easy Tips for Physicians to Successfully Manage Their Type 2 Diabetes Patients' Weight

(This is written for physicians but applies to educators too.)

- Don't be reluctant about discussing the importance of weight loss issues with your patients, but do so in a way that is not blaming, shaming or judgmental.
- Refer your patients to weight loss programs and health care professionals in your area who specialize in nutrition and weight management.
- Provide your patients with basic tools to enable them to make appropriate lifestyle changes.
- Reinforce the importance of setting manageable, achievable goals.
- Encourage your patients to be patient with their own efforts and progress; acknowledge with them that weight management is not easy and occasional setbacks are common.
- In a collaborative and caring manner, remember to ask your patients how they are doing each and every visit.

Source: DiabetesInControl.com

<http://www.diabetesincontrol.com/results.php?storyarticle=6448>

NDEP Promotes Managing Diabetes to Prevent Kidney Disease

The National Diabetes Education Program (NDEP), a joint program of the National Institutes of Health and the Centers for Disease Control and Prevention, and NKDEP partner, promotes the importance of managing diabetes to prevent or delay complications, including kidney disease.

NDEP offers numerous clinical practice tools and patient education materials distilled from evidence-based national guidelines for diagnosis and care. NDEP's *Guiding Principles for Diabetes Care* helps health care professionals to identify components of comprehensive patient-centered care and to diagnose, treat, and prevent long-term diabetes complications like kidney disease. NDEP's *Control Your Diabetes. For Life.* campaign features an easy-to-read patient education booklet, *4 Steps to Control Your Diabetes. For Life*, which helps health care professionals outline vital self-care principles. Available in English, Spanish, Asian, and Pacific Islander languages, the brochure helps patients manage their diabetes to avoid kidney problems and includes information about getting routine urine and blood tests.

Visit NDEP online at www.YourDiabetesInfo.org to download or order free materials, or call 1-888-693-NDEP (6337); TTY: 1-866-569-1162.

To order these publications or view them online, visit <http://www.kidney.niddk.nih.gov/kudiseases/a-z.asp>.



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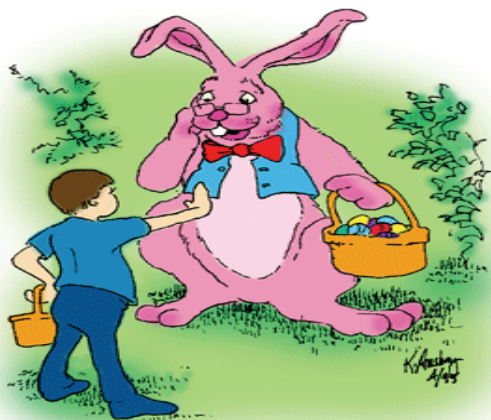
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Providing Quality Comprehensive Diabetes Self-
Management Education to Empower Persons With
Diabetes

www.diabetes.org



Travis finally confronts the Easter Bunny
regarding the lack of sugarless
chocolate-marshmallow eggs he finds every year.

www.diabeteshealth.com

Diabetes Resources

FREE Fiber One Original cereal samples to use with your clients. Re-order at any time through our health professional website at www.bellinstitute.com/fiberone.

In addition to the samples you will also find a variety of fiber nutrition education materials on this page, as well as a variety of nutrition education materials on various topics on the rest of our website.

General Mills Bell Institute of Health and Nutrition

Power to Prevent is a companion piece to the NDEP [Small Steps. Big Rewards. Prevent type 2 Diabetes](#) (2 pages, 1.08 MB) campaign. The key theme of this campaign is that people at risk for type 2 diabetes can reap big rewards – such as the delay or prevention of type 2 diabetes and its complications – by taking small steps to implement healthy lifestyle behaviors. For more information on *Power to Prevent: A Family Lifestyle Approach to Diabetes Prevention*, please contact the CDC National Diabetes Education Program by e-mail (CDCINFO@cdc.gov) or call 800-232-4636. To learn more about diabetes or to access free diabetes resources, visit www.ndep.nih.gov or call 1-888-693-NDEP (6337).

If we could get our patients to test more often we would get better results. But finger sticks hurt so why don't our patients use alternate site testing. This one page handout helps your patients understand how to get rid of the pain.

<http://www.diabetesincontrol.com/results.php?storyarticle=4994>

"Meals Matter" contains hundreds of calcium-rich and lower-fat recipes. It also features individualized tools like a shopping list, personal cookbook and a menu planner. These tools are available on Dairy Council of California's website at <http://www.mealsmatter.org>

Buffet Table Tips for People with Diabetes

Hand out for barbeque season. Barbecues, picnics and family reunions are gatherings to enjoy and treasure. If you have diabetes, these events can pose special challenges. How can you stick with your meal plan, yet join in the celebration and have some fun? [Buffet Table Tips](#) (pdf)

Continuing Education

Taking Care of Your Diabetes

May 2, 2009

Raleigh Convention Center

500 South Salisbury Street

Raleigh, NC 27601

www.tcoyd.org/conferences

Free Continuing Education:

Diabetes in Control - <http://www.diabetesincontrol.com/ce.php>

Medscape - <http://cme.medscape.com/>