

Sweet Nothings

Volume II, Issue 4
April 2008

Sweet Success!

Submitted by: Tanya Long, RN, Clay County Health Department

Patient H (a male) presented to our clinic for an unresolved candida infection. He had been to two other providers for this problem but continued to have recurrence. Our Nurse Practitioner evaluated this patient, prescribing the appropriate treatment for the infection, but also ordered lab work and a random fingerstick blood glucose. The result of that fingerstick was 293mg/dl. Further lab values revealed a Hgb A1C of 10.0. and a fasting glucose of 304mg/dl. His total cholesterol was 223.

These results were the first indication this patient had that he had Type 2 Diabetes.

The patient was subsequently placed on oral medications, self-testing of blood glucose levels 4x/daily and began Diabetes Self Management Education with the FNP. Due to family constraints, he required individual education sessions. The patient was compliant with his oral medications and mastered carb counting and nutritional management. He also increased his physical activity. Within one month, his fasting glucose was reduced to 132 mg/dl.

This patient continued with his lifestyle changes under the supervision of our FNP. His initial labwork was done on October 22, 2007. By February 4, 2008, he had reduced this fasting glucose to 106mg/dl, total cholesterol to 153 and his Hgb. A1C to 5.3.

This patient was truly committed to making necessary lifestyle changes and managing his condition with the help of our Family Nurse Practitioner, Deborah Smith. His success in such a short amount of time is truly remarkable, and he is definitely our best success story!

Congratulations!

By Laura Edwards, RN, Program Coordinator

The staff of the NC Diabetes Education Recognition program congratulates Brunswick County Health Department, Clay County Health Department, Robeson County Health Department, Rockingham County Board of Health and Wake County Human Services/Project DIRECT for their successful completion of the 6 month data collection process. It took a lot of hard work, dedication and perseverance to implement the first phase of this project, and we commend you all on a job well done! You have already made a difference in the lives of many North Carolinians, and we look forward to working in partnership with you to further decrease the burden of diabetes in NC.

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Data reports are due the 5th of each month

Did You Know?

A person's risk of developing Type 2 diabetes falls 16 percent with every two pounds of weight loss. And losing just 1 pound is associated with a one-point drop in blood pressure.

Dr. Laura Svetkey, Duke University

JAMA. 2008; 299 (10):1139-1148

Pain in Your Feet? Try These Proven Techniques for Soothing Them

Birgitta Rice, MS, RPh, CHES

One of the more common and early complications of diabetes is nerve pain or peripheral neuropathy. Symptoms are tingling, pain or numbness in the legs and feet, sometimes in arms and hands. The nerve endings seem to be starved for nutrition and tend to deteriorate. The weakened nerves give off false sensations, often as pain or burning.

Over time, peripheral arterial disease (PAD) may develop. This contributes to "claudication" or "rest pain," which develops when you are walking and stops when you are at rest. Unfortunately delayed wound healing, development of gangrene and amputations are also results of PAD. People with diabetes are 20 times more likely than the non-diabetic population to develop these conditions.

Though there is no cure for these conditions, the American Podiatric Medical Association has suggested some exercises that may be beneficial and feel good. When you have been on your feet all day or maybe it is just an ordinary day when your feet hurt, these simple movements can bring some relief. You can do them by yourself. Use any or all of them.

- **Massage Your Feet** - Rub down your feet to release tension, increase circulation and rejuvenate the skin.
- **Soothe Your Soles** - Wash your feet for 3-4 minutes in a container filled with lukewarm water. Pat them dry and apply a cream or lotion to hydrate them.
- **Elevate Your Legs** - Put your legs up above your heart while lying down to help reduce swelling and relax a while.
- **Rotate Your Ankles** - Hold your foot under the back portion of the heel and turn the ankle slowly five times in both directions. This loosens the ankle joint and relaxes your feet.
- **Point Your Toes** - While standing holding on to a chair, do toe raises, toe points and toe curls counting five times for each foot. Repeat up to 10 times. This alleviates toe cramps and strengthens calf muscles.

The benefits of some of these movements have been tested in research and found to be very beneficial. Relaxation is one of them. The natural effect of relaxation allows the peripheral capillary blood vessels in your feet to dilate, letting more blood to flow through to those tissues, providing nutrients and oxygen. That is the reason relaxation feels so good! It may also bring about pain relief and healing.

You Can Use Your Mind to Increase Blood Flow and Foot Temperature

Researchers recently conducted a controlled study in which they taught diabetic patients how to relax and visualize warming their feet. Patients used a standardized relaxation technique with assisted temperature biofeedback to guide them. The patients all suffered from chronic foot ulcers (sores). After 12 weeks, 14 of 16 patients who practiced the relaxation intervention completely healed their chronic ulcers, compared to seven of 16 in the control group without the relaxation. They all had excellent wound care.



The findings have been presented nationally and published in medical journals. Based on this and other clinical work, the WarmFeet® intervention was developed. It has established itself as a new treatment modality - "an educational intervention" - to be used as a complementary therapy to standard medical therapies for foot and wound care.

For more information, contact Health Education for Life, 7412 Park View Drive, St. Paul, MN 55112, or go to www.WarmFeetKit.com.

The Diabetes Educator, Vol.33, No 3, p 442, May - June 2007 "Clinical Benefits of Training Patients to Voluntarily Increase Peripheral Blood Flow: The WarmFeet Intervention" <http://tde.sagepub.com/cgi/content/abstract/33/3/442>

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Foot Care

Submitted by Joanne Rinker, MS, RD, CDE, Education Specialist

Inspect your feet every day, and seek care early if you do get a foot injury. Make sure your health care provider checks your feet at least once a year - more often if you have foot problems. Your health care provider should also give you a list and explain the do's and don'ts of foot care. Most people can prevent any serious foot problem by following some simple steps. So let's begin taking care of your feet today.

Prevention

Your health care provider should perform a complete foot exam at least annually - more often if you have foot problems. Remember to take off your socks and shoes while you wait for your physical examination.

Call or see your health care provider if you have cuts or breaks in the skin, or have an ingrown nail. Also, tell your health care provider if your foot changes color, shape, or just feels different (for example, becomes less sensitive or hurts).

If you have corns or calluses, your health care provider can trim them for you. Your health care provider can also trim your toenails if you cannot do so safely.

Because people with diabetes are more prone to foot problems, a foot care specialist may be on your health care team.

Caring for Your Feet

There are many things you can do to keep your feet healthy.

1. **Take care of your diabetes.** Work with your health care team to keep your blood glucose in your target range.
2. **Check your feet every day.** Look at your bare feet for red spots, cuts, swelling, and blisters. If you cannot see the bottoms of your feet, use a mirror or ask someone for help.
3. **Be more active.** Plan your physical activity program with your health team.
4. **Ask your doctor about Medicare coverage for special shoes.**
5. **Wash your feet every day.** Dry them carefully, especially between the toes.
6. **Keep your skin soft and smooth.** Rub a thin coat of skin lotion over the tops and bottoms of your feet, but not between your toes.
7. **If you can see and reach your toenails, trim them when needed.** Trim your toenails straight across and file the edges with an emery board or nail file.
8. **Wear shoes and socks at all times.** Never walk barefoot. Wear comfortable shoes that fit well and protect your feet. Check inside your shoes before wearing them. Make sure the lining is smooth and there are no objects inside.
9. **Protect your feet from hot and cold.** Wear shoes at the beach or on hot pavement. Don't put your feet into hot water. Test water before putting your feet in it just as you would before bathing a baby. Never use hot water bottles, heating pads, or electric blankets. You can burn your feet without realizing it.
10. **Keep the blood flowing to your feet.** Put your feet up when sitting. Wiggle your toes and move your ankles up and down for 5 minutes, two (2) or three (3) times a day. Don't cross your legs for long periods of time. Don't smoke.
11. **Get started now.** Begin taking good care of your feet today. Set a time every day to check your feet.



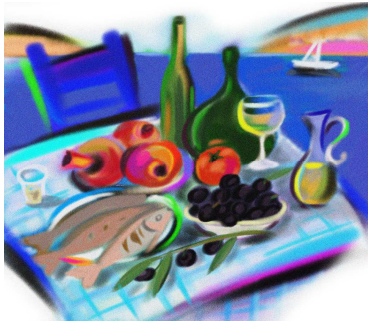
Spring and summer will be here before you know it.

Remember: to avoid foot complications,
never wear open toe or open heel shoes.

Better to be safe than sorry!

Recipe of the Month

Greek Wrap Sandwiches



Want a sandwich but not the high carbs that comes with that hoagie or sub bun?

Try this Greek wrap with lots of flavors, spice and crunch!

INGREDIENTS:

- 1/4 cup mayonnaise
- 2 tsp. lemon juice
- 1 cup canned chickpeas, drained and rinsed
- 1 cup chopped cooked chicken
- 1/4 cup crumbled feta cheese
- 1/4 tsp. dried oregano leaves
- 1/4 cup chopped green pepper
- 1/4 of a whole jalapeno
- 8 lettuce leaves
- 8 whole wheat wraps

PREPARATION:

In medium bowl, combine mayonnaise, lemon juice, and beans. Mix well, mashing beans slightly with fork. Stir in remaining ingredients except lettuce and wraps.

Place lettuce leaves on wraps, then top with filling.

Nutrition Facts: Calories: 180, Carbs: 19g, Fat: 4g, Protein: 6g, Fiber: 6g

Foot Care and Diabetes Complications

About 60% to 70% of people with diabetes have mild to severe forms of nervous system damage. The results of such damage include impaired sensation or pain in the feet.

Almost 30% of people with diabetes aged 40 years or older have impaired sensation in the feet (i.e., at least one area that lacks feeling).

Severe forms of diabetic nerve disease are a major contributing cause of lower-extremity amputations.

In 2002, about 82,000 nontraumatic lower-limb amputations were performed in people with diabetes.

The rate of amputation for people with diabetes is 10 times higher than for people without diabetes.

Mexican Americans are 1.8 times as likely, non-Hispanic Blacks are 2.7 times as likely, and American Indians are 3 to 4 times as likely to suffer from lower-limb amputations.

Amputation rates are 1.4 to 2.7 times higher in men than women with diabetes.

American Diabetes Association

<http://diabetes.org/diabetes-statistics/complications.jsp>



"I realize you have diabetes, Mr. Carlton. However, I don't think the IRS is going to allow you to deduct the depreciation in the value of pancreas."

www.diabeteshealth.com

RESOURCES

Division of Public Health
Chronic Disease and Injury Section
ADA Program
1915 Mail Service Center
Raleigh, NC 27699-1915

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



www.ncdiabetes.org

ADA Advisory Committee Annual Meeting

June 18, 2008

9:00 a.m.—12:00 Noon

Hickory Room

5505 Six Forks Road

Raleigh, NC



Don't Forget.....

To submit copies of proof of continuing education to
Brenda Brogden

Continuing Education

Title: Diabetes: A Clinical Update
Date: May 2, 2008
Location: UNC at Chapel Hill, NC
<http://www.mahec.net/media/brochures/ne050208.pdf>

Title: 23rd Annual Southern Regional Conference on Diabetes, Obesity, and Cardiovascular Disease
Date: May 22-25, 2008
Location: Buena Vista Palace Hotel & Spa
Lake Buena Vista, Florida
http://professional.diabetes.org/Congress_Display.aspx?TYP=0&SID=50&CID=57956

Title: Understanding Lab Values for Nurses
Date: April 21, 2008
Time: 9:00 a.m.—12:00 p.m.
Location: Wayne Memorial Hospital; 2700 Wayne Memorial Drive
PO Box 8001 Goldsboro, NC 27533-8001
Contact: ruotoloc@ecu.edu
<http://www.waynehealth.org>

Title: Screening, Diagnosing and Treating Depression in Primary Care
Date: April 29, 2008
Time: 12:00 p.m.—1:00 p.m.
Location: Southern Regional Area Health Education Center; 1601 Owen Drive, Fayetteville, NC 28304
Contact: jbborton@nc.rr.com
<http://www.SouthernRegionalAHEC.org>

Title: CDC's Diabetes Conference
Date: May 5 - 8, 2008
Location: Wyndham Orlando Resort Hotel; Orlando, Florida
<http://www.cdc.gov/diabetes/conferences/index.htm#2008>

The National Diabetes Education Program's *Better Diabetes Care* website is focused on **how to improve the way you deliver** diabetes patient care rather than how you clinically treat people with diabetes. CE and CME credits are now available when you tackle this challenge. The program is designed to benefit a range of health care professionals including primary care providers, diabetes educators, specialists, office managers, and managed care organization staff. For a nominal fee of \$10, users of the site will receive a certificate documenting up to ten Category I CE/CME credits per project.

<http://www.betterdiabetescare.nih.gov/CE.htm>