



Sweet Nothings

May 2009

Spotlight on Pitt County

Submitted By: Robin High, MPA, RD, LDN & Jackie Sugg, MS, RD, LDN

As the fifth leading cause of death in Pitt County, diabetes has been identified as a priority health issue for the County. The overall burden of diabetes is greater in Eastern North Carolina than in any other area of our state. According to the State Center for Health Statistics, Behavioral Risk Factor Surveillance Survey, the percent of Pitt County adults reporting they have been told they have diabetes has nearly doubled in the past four years (6.0% in 2004 compared to 11.2% in 2007). In addition, about one-third of children in Pitt County are either overweight or at risk for becoming overweight (NC-NPASS, 2007). Physicians are reporting that more and more children are being diagnosed with type II diabetes.

Our community works collaboratively to provide support to those who are living with diabetes. Pitt County Health Department has been very fortunate in participating with the Diabetes Education Self Management Program. Early on we began recruiting clients to participate in the program. Physician packets were made available to physician offices around the County. Each packet consisted of a letter explaining the program, promotional flyers, referral forms, and fax sheets with our Health Department's specific information on it. Since that time, we have had several offices to contact us with questions regarding the program and to express interest in making referrals. We were also able to place the information in the local newspaper. This was very effective in getting the attention of people who were living with diabetes and wanted to learn more about how to manage their diabetes better.



Another exciting part of the program has been the group education classes. Our group classes are taught over the course of two days in 4-hour segments. We typically have 6-8 people in each class. Participants are encouraged to invite support partners, friends, or a family member to provide encouragement to the individual living with diabetes. Our first set of classes only had two people, but it allowed our educators to become comfortable with the

material and provide individual attention to each of the participants. Our second set of classes grew and we are expecting our largest group class in April. We are fortunate to have a Nurse Practitioner, Registered Dietitian, and Registered Nurse to team-teach the classes. Each instructor brings a unique teaching style and expertise to the class and this helps to keep our participants engaged and interactive for the entire four hour class.

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Hooray!
The application for Cohort II recognition was submitted to ADA on 4/14/09.
90 days to wait...

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Remember



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

Data Update

Total Number of Patients Seen: over 500

Foot Exams: 55%

A1Cs: 46% of the patients seen have an A1C of less than 7%.



Spotlight on Pitt County

(Continued from page 1)

Visual aids have really made an impact in educating our patients. One of the best teaching tools thus far has been the “diabetic meal plate”. This tool provides a visual explanation of how much food from each of the food groups are appropriate at each meal. The picture has helped our participants identify exactly how much food they should be eating. We have also found that providing healthy snacks such as Fiber 1 bars, low-fat cheese, and a fruit selection has served as a teaching tool to engage our participants in a discussion about healthy options. To better explain the relationship of medications on blood sugars, our Nurse Practitioner uses bottles of several common over the counter medications such as cough syrup and throat lozenges to assist the participants in identifying those that may contain added sugar. In addition and thanks to several vendors, our participants are given donated samples such as hand creams, healthy cereals, Splenda, educational material, and pedometers to take home.

The Diabetes Education Program has gone well and we expect enrollment to keep growing as more local providers begin to refer patients to the program. We continue to strive towards encouraging healthy lifestyles and helping people who live with diabetes have a better quality of life. By including the community, families, and support networks, we also hope to prevent diabetes through education on nutrition, physical activity, and an overall healthy lifestyle!

Top Ten Spring Resolutions

Submitted by **Laura Edwards, RN, MPA**

Small changes you can make for a healthier spring:

1. Bathing suit countdown begins. Prepare for skimpy clothes by eating light, healthy fare.
2. Start your day with whole grains — it can be as simple as upgrading your toast to multigrain.
3. Time for spring cleaning — purge your pantry of unhealthy foods and restock with good-for-you items.
4. Spring is for salads. Eat a big bowl of leafy greens at the start of a meal for better appetite control.
5. April is asparagus season! Go wild — eight ounces has only 45 calories — but pass on the hollandaise.
6. Include lean protein in all your meals and you'll be less hungry. Protein is not just meat — it can be low-fat dairy, beans, soy or nuts.
7. Treat yourself weekly to wild salmon, rich in healthful Omega-3 fats, when it comes in season this spring.
8. Try a new and unfamiliar fruit or vegetable.
9. For the healthiest snacks, plan them in advance.
10. Splurge on peak-season spring strawberries. One cup of these flavorful berries has only 43 calories and supplies over 100 percent of your daily vitamin C needs.

Source: www.foodnetwork.com

New Web Content for Patients and Public

NKDEP has updated its website pages for patients and the public. The expanded Patients & Public section helps visitors learn about kidney disease, the two tests used to detect kidney disease, and how to keep their kidneys healthy. The section also discusses the importance of getting tested and of talking to family members who may be at risk. View the new Patients & Public section at www.nkdep.nih.gov/patients/index.htm.



Cardiorespiratory Fitness

Submitted by Melinda Rummage, RN, CDE

Cardiorespiratory fitness is the ability of the heart, lungs, and blood vessels to supply oxygen to skeletal muscles during sustained physical activity. This ability for the body to perform exercise using large-muscle groups at moderate to high intensity for prolonged periods of time is important, because it makes the respiratory and circulatory system more efficient. It causes the heart muscle to enlarge, enabling more blood to be pumped with each stroke and increasing the number of capillaries in the skeletal muscles, which supply blood to the working muscles. This fitness also improves the respiratory system by increasing the amount of oxygen that is inhaled and distributed to body tissues.

A stronger, more efficient heart is more able to meet the demands of life. Blood pressure is the force exerted by blood against the blood vessel walls, generated by the pumping action of the heart. Hypertension is abnormal high blood pressure is a risk factor for cardiovascular disease and stroke. People with consistently high blood pressure are more susceptible to heart disease and die at a younger age than people with normal blood pressure. Studies have shown that exercise can reduce both diastolic and systolic blood pressure by 7 mm Hg.

Lipids and fats circulate in our blood stream and are stored in various parts of the body. Regular exercise has been proven to increase the number of high-density lipoproteins (HDL) in the blood. Higher HDL levels are associated with lower risk for artery disease because they remove some of the low density lipoproteins (LDL) from artery walls and this prevents clogging in the arteries.

There are 3 main dimensions to an exercise program: frequency, intensity, time (duration), and type of activity. It is recommended that people exercise a minimum of 3 times weekly, with a goal to increase to the recommended 5 days per week. The intensity of exercise is easily measured by using the Borg scale. This rating of perceived exertion scale is how hard you feel you are working, based on your heart rate, increased breathing rate, sweating, and muscle fatigue. This scale uses a rating from 6 to 20. The Borg scale can be found in your NC Diabetes Self-Management Curriculum Training in section V, located in Handouts and Resources for Participants. Exercise duration refers to the number of minutes of activity performed during any one session. Rigorous activities should be performed for at least 20 minutes of time, and moderate activities for at least 30 minutes at a time. The types of exercise include aerobic activity (which improves cardiorespiratory endurance), resistance exercises that increase strength, and stretching the joints and muscle joints which improve flexibility.

Cardiorespiratory fitness is accomplished with time and effort. To see the health benefits such as decreased blood pressure may take months to achieve. Don't expect improvements overnight. However, any physical activity will benefit our overall health almost immediately.

Information from: Health The Basics Eighth Edition By Rebecca J. Donatelle, pages 322 – 329.

Exercise is Medicine

Physical inactivity is the most emergent public health problem of our time, apparent through the prevalence of chronic diseases and obesity. Robert Sallis, M.D., FACSM, immediate past-president of ACSM and chair of [Exercise is Medicine™](#), emphasized the powerful effects of physical activity on disease treatment and prevention including treatment and preventative effects on a number of chronic conditions such as some cancers, diabetes and high blood pressure, and a reduction in mortality rates related to these conditions.

"If we had a pill that provided all the benefits of exercise, we would recommend it to every patient," said Sallis. "Physicians must be encouraging patients to take a step toward a healthy lifestyle."

Source: **American College of Sports Medicine**

<http://www.medicalnewstoday.com/articles/143917.php>





Spring is the Season For Strawberries



It is the start of fresh fruits and vegetables from local farm stands all around town! The first thing that comes out in early spring are strawberries. They are sweet, low in calories and low in carbohydrates. Did you know that 1 cup of strawberries is only 15 grams of carbs? In addition to being low in carbs and calories, they are also high in fiber, Vit C, Folate, Potassium and antioxidants.

There are lots of ways that you can use strawberries. You can eat strawberries fresh, frozen or dried. You can make desserts, cakes, muffins, cereals, yogurts or salads. You can even drink the strawberries in smoothies. This spring, try the recipe below for a simple and sweet strawberry dessert.

Easy Strawberry Tart

Prepared with a home-made oil crust and whole strawberries, this is a foolproof strawberry tart that even kids can do. You can substitute the strawberries with any other berries as they come in season.

Ingredients

- 9-inch homemade pie crust (see below)
- 8 oz. low-fat cream cheese, softened
- 1/3 cup sugar
- 2 tablespoons milk
- 1 teaspoon vanilla extract
- 3 cups whole strawberries, washed and hulled

Directions

Bake the piecrust according to the directions below and set it aside to cool.

In a mixing bowl, beat together cream cheese, sugar, milk and vanilla extract until smooth. Spoon the filling into the cooled piecrust, spreading it evenly in the shell. Arrange the strawberries, bottoms up, on top of the filling.

Chill for 1 hour before serving. Serves 8

Bake the piecrust according to the directions below and set it aside to cool.

Pie Crust:

INGREDIENTS:

- 2 3/4 cups sifted all-purpose flour
- 1 teaspoon salt
- 1/2 cup vegetable oil
- 1/2 cup milk

DIRECTIONS:

Mix flour and salt together. Pour milk and oil into one measuring cup, do not stir, and add all at once to flour. Stir until mixed, and shape into 2 flat balls. Wrap in plastic wrap. Refrigerate for 15 minutes or more.

Roll out on lightly floured surface.

Bake for 20 minutes at 350 degrees

Carb Counting Quiz

Yesterday, Joanne ate at Moe's. She had lots of lettuce with 1/2 cup black beans, 3 oz of chicken, 1/3 cup rice, 2 Tbsp cheese, lots of lettuce and 20 chips. How many servings of carbs did she have? A: 2; B: 4; C: 6; D: 8

(Answer is on Page 5)



Did You Know?

Education Saves in Healthcare Costs

- A study released in 2008 by the Centers for Disease Control and Prevention (CDC) shows that, for every \$1 spent on diabetes training and education, \$8.76 is saved on healthcare costs.
<http://www.cdc.gov/nccdphp/publications/factsheets/Prevention/pdf/diabetes.pdf>

American Perceptions of Chronic Illness

- More than half (52 percent) of Americans say the worst thing that could happen to them, from a pre-identified list, is developing a chronic illness compared with amassing considerable financial debt (19 percent), getting divorced or living alone (13 percent), or losing their job (11 percent)
- About half of Americans have *not* talked to their doctor about common chronic illnesses such as heart disease, cancer, diabetes, HIV/AIDS or Alzheimer's
- While nearly all adults can correctly name at least one risk factor for diabetes - more than half of those polled mistakenly cited "eating too much sugar" as a risk factor for diabetes
- Significant numbers of people who report they are extremely or very likely to develop diabetes have engaged in behaviors that they feel will put them at risk for the disease. Majorities acknowledge that they have followed a poor diet (67 percent) or maintained an unhealthy weight (62 percent) yet even larger majorities recognize being overweight or obese (83%) as a risk factor for diabetes.
- Overall, 66 percent of adults say avoiding doctors visits is risky, yet 50 percent admit to this behavior
- Likewise, 70 percent of all adults view maintaining an unhealthy weight as risky, yet 46 percent admit to doing so

Source: American Diabetes Association (www.diabetes.org)

More evidence links diabetes to Alzheimer's risk

- You've heard that diabetes hurts your heart, your eyes, your kidneys. New research indicates a more ominous link: That diabetes increases the risk of getting Alzheimer's disease and may speed dementia once it strikes.
- Doctors long suspected diabetes damaged blood vessels that supply the brain. It now seems even more insidious, that the damage may start before someone is diagnosed with full-blown diabetes, back when the body is gradually losing its ability to regulate blood sugar.
- In fact, the lines are blurring between what specialists call "vascular dementia" and scarier classic Alzheimer's disease. Whatever it's labeled, there's reason enough to safeguard your brain by fighting diabetes and heart-related risks.
- If you have diabetes, closely follow your doctor's advice for controlling it. Try to lower high cholesterol and blood pressure that can harm the brain's blood supply and exacerbate memory problems.

Source: American Diabetes Association (www.diabetes.org)

Bariatric Surgery Causes Most Cases of Type 2 to Remit Long-Term

- In morbidly obese patients with Type 2 diabetes, bariatric surgery leads to resolution or improvement of the disease in close to 90% of cases, with benefits usually maintained for at least two years.
Source: Am J Med March 2009;122:248-256.

Answer to Carb Counting Quiz on Page 4

The answer is 4. 1/2 beans, 1/3 rice and then 10 chips are 15 grams so that was 2 servings of carbs when I ate 20 chips!



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

www.ncdiabetes.org

Calendar

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

Program Staff Meeting/Curriculum Training for Cohort III
(open to Cohorts I and II) - June 15, 2009 (Raleigh) or June 23,
2009 (Asheville) 9:00 a.m.—4:30 p.m.

RESOURCES

ADA National Standards for Diabetes Self Management Educa-
tion, 2009

http://care.diabetesjournals.org/cgi/reprint/32/Supplement_1/S87

Be Sweet To Your Feet If You Have Diabetes

http://www.diabetesincontrol.com/issues/Issue%20463/sweet_feet.pdf

Continuing Education

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

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

Diabetes in Control

<http://www.diabetesincontrol.com/ce.php>

Medscape Continuing Medical Education

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

Centers for Disease Control Training and Continuing Education
Online

<http://www2a.cdc.gov/TCEOnline/>

American Diabetes Association

http://professional.diabetes.org/CE_Library_Search.aspx

Glucose Monitoring: A Case for Improved Outcomes

http://www.rxschool.com/Course/info.cfm/Course_Id/543



"I'll help keep you from even *thinking*
about sweets - it's a piece of cake!"

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www.diabeteshealth.com