Diabetes Life Lines

A newsletter from your county Extension office
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**Fast Food Frenzy**

Super burger, double fries, and a “biggie” cola – does this sound too familiar? Fast foods, whether we like it or not, have become a major part of America’s fast-paced lifestyle. Whether they’re eaten at the restaurant, in the car, or at home, fast foods are having an impact on our nation’s health.

The typical fast food fare is high in fat, loaded with sodium, and has little fiber. Does that mean grabbing the quick lunch on the run is totally taboo? Not so, say nutrition experts. You don’t have to totally give up eating fast foods to stay healthy. You can still fit some fast foods into an overall healthy eating plan if you simply put some thought into it. Here are a few suggestions on how to do this.

1. Eat fast food for one meal, but eat lower-fat and higher fiber foods the rest of the day.
2. Eat fruits and vegetables as snacks and other meals during the day to reach the recommended “five a day” for good health.
3. Choose fast foods with less fat like grilled chicken, hamburgers without special sauces, 6-inch turkey subs, and salads with low-fat dressing.
4. Choose smaller portions (skip the super-burgers, giant fries, and the “biggie” drinks) and avoid the all-you-can-eat buffets.

All fast foods are not the same. You can learn which foods are lower in fat and sodium by going to the UGA Extension Web site. Nutrition information, including fat, sodium, and exchanges for 16 fast food restaurants is now available at: www.fcs.uga.edu/pubs/current/FDNS-E-47-CS.html or from your local County Extension Agent.
New Diabetes Pill Approved for Type 2

A new diabetes pill on the market to add to the variety of choices for you and your doctor is called Starlix (nateglinide), marketed by Novartis AG. If you have type 2 diabetes and have trouble keeping your blood glucose from rising so much after you eat a meal, this new pill may help you.

Starlix works a little differently than other pills. It increases the first phase of insulin release by your pancreas after you begin eating a meal. Because the effects are short-acting, it doesn’t hang around to cause low blood glucose (hypoglycemia) as some other drugs do. But, you will need to take the pill right before each meal to get the best effects.

Experts are now realizing that after-meal blood glucose levels are important for people with type 2 diabetes as well as type 1. High blood glucose levels after meals may increase your risk of many of the complications of diabetes, including heart disease. Therefore, you will probably need to check your blood glucose after some of your meals in addition to before meals to see if your blood glucose is staying within the goals set by you and your doctor.

No More Finger-Sticking?

New advances in blood glucose monitoring have made sticking your finger just one of the options in checking your blood glucose levels. You can now use other areas of your body that may be less painful such as your arm, thigh, or back of your hand to get a blood sample. Because there are fewer nerve endings in these areas, it is less painful than using the fingertips.

Right now you have several options in choosing a meter that uses blood samples from areas of the body other than your fingertips. One is these meters is the FreeStyle meter by Therasense which uses a separate lancing device that can be used for the forearm, upper arm, thigh, back of hand, or the finger. It uses the smallest blood sample of any meter on the market today.

The Atlast meter, by Amira Corporation, is a meter and a blood testing device in one. Once you stick your arm or thigh, you simply turn the device around to collect the blood sample.

Lifescan’s recently-released new
meter, One-Touch Ultra, gives you the option of testing on the arm or the fingertip with a very small amount of blood with results in only 5 seconds.

A new meter that will soon be available at pharmacies is the Sof-Tact by Abbott Labs obtains a blood sample from the forearm or upper arm and tests the glucose with a single press of a button.

These are just a few of the meters available that are designed to take blood samples from areas other than the fingertips, and many more will be on the market in the near future. Although some people still prefer the fingertips, you may find another site that is more comfortable for you. And, if it means you’ll check your blood glucose more often, it’s worth it.

Who Controls Your Diabetes?

Who’s in the driver’s seat when it comes to controlling your diabetes? If your answer is “my doctor”, think again.

How is diabetes managed? A balance of the food you eat, physical activity, and diabetes pills and/or insulin if needed. Now, who makes the day-to-day decisions on what and how much you eat? Who decides if you’re going to be a couch potato today or if you’re going to go for that 30-minute walk? Who decides what medication you’re going to take and when? You’re right, you do! You, the person with diabetes, are really the one in the driver’s seat. You are making the day-to-day decisions that affect your diabetes control. Consider your doctor and the rest of your diabetes team the coaches. They advise you, motivate you, and guide you. But, they don’t control your diabetes - you do!

Good diabetes control means you’re keeping your HgA1c below 7% and blood glucose before meals usually 80–120. You may also have some blood glucose goals for after meals. Higher blood glucose levels increase your risk of major problems like heart disease, blindness, foot and leg amputations, and kidney disease. Is your control where you want it to be? If your blood glucose levels are not where they need to be to help prevent complications, take action! Make sure you know what to do and how to improve your blood glucose. Set up regular visits with your diabetes team including your doctor, nurse, and registered dietitian. They will ensure that you have the skills you need to make the decisions that affect your diabetes.
control. It’s time to accept the challenge. Make the choices that will enable you to live a healthier life!

**Teens’ Diets Increase Risk of Diabetes**

Your mother was right. If you want to stay healthy, eat healthy. Teens are less likely to eat healthy foods, and vegetables are definitely a rarity. But, the food teens eat can increase his/her risk of diabetes, heart disease, high blood pressure and cancer.

A recent study of California teens showed that one-third of them were overweight or at risk of becoming obese. Of special concern was the fact that 50 percent of the African American teens and 36 percent of the Latino teenagers were likely to be overweight. Nearly half of the teens reported no consumption of vegetables on the day questioned and one-third had eaten fast food at least once during the day.

As weight increases, so does the risk of developing diabetes and other diseases. The increased rate of childhood obesity is an alarming issue for all of us and we must look around to see what factors are affecting this trend. What can we do to help? We know that most teenagers only care about today, with little thought for the future. So, discussing the long-term effects of their foods habits will not likely change their behavior. Setting a good example at home, however, is something you can do. You have more influence on your child’s eating habits than anyone.

Make a special effort to include a minimum of five servings of fruits and vegetables a day for everyone in the family. Simply making healthy foods available will increase the chance of your teen eating healthier foods. Purchase fresh fruits, raw vegetables and low-fat dairy foods for snacks instead of high-fat snack chips and ice-cream. Prepare low-fat meals at home with some lean meat, chicken, or fish, whole grains, and fruits and vegetables. Eat fewer high-fat meals at fast food restaurants.

Eating and exercise habits developed during childhood will set the stage for life-long habits. Help your children make healthy life-style choices today so they will have healthy habits as adults. This will help enable your children to live a long and healthy life.
Recipe Corner

Zucchini Tomato Bake

1 pound eggplant, chopped 2 cloves garlic, minced
2 cups zucchini slices 1 can (14 ½ ounces) no-salt-added whole tomatoes, undrained
2 cups mushrooms, chopped 1 tablespoon no-salt-added tomato paste
2 teaspoons olive oil 2 teaspoons dried basil leaves
½ cup chopped onion 1 teaspoon sugar
½ cup fresh fennel (optional)

1. Preheat oven to 350°F. Arrange eggplant, zucchini and mushrooms in 9-inch square baking dish.
2. Heat oil in small skillet over medium heat. Add onion, fennel, and garlic. Cook and stir 3-4 minutes or until onion is tender. Add tomatoes, tomato paste, basil and sugar. Cook and stir about 4 minutes or until sauce thickens.
3. Pour sauce over eggplant mixture. Cover and bake 30 minutes. Cool slightly before serving.

Makes 6 servings Exchanges: 2 vegetable, ½ fat
Nutrients per serving: Calories 71 Fat 2 grams Carbohydrate 13 grams Cholesterol 0 milligrams Sodium 39 milligrams Fiber 3 grams

Recipe used with permission from Diabetic Cooking, Sept/Oct. 2000.

Suggested Menu

Menu Item Exchanges Carbohydrate
3 ounces baked chicken 3 lean meat
2/3 cup wild and brown rice 2 starch 30 grams
1 serving Zucchini Tomato Bake* 2 vegetable, ½ fat 10 grams
½ cup fresh fruit salad 1 fruit 15 grams

* This month’s featured recipe † Insignificant

Note: Portions may need to be adjusted for your meal plan.

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Dear Friend,

*Diabetes Life Lines* is a bi-monthly publication sent to you by your local county Extension agent.

It is written by Food and Nutrition Specialists at the University of Georgia, College of Family and Consumer Sciences. This newsletter brings you the latest information on diabetes, nutrition, the diabetic exchange system, recipes, and important events.

If you would like more information, please contact your local county Extension office.

Yours truly,

County Extension Agent

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