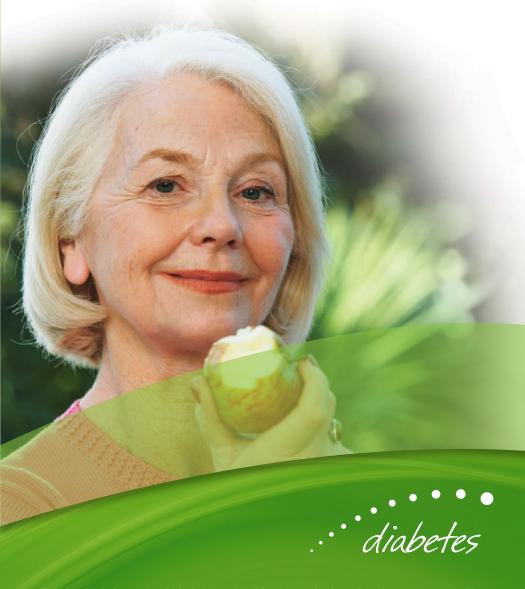
# **About Diabetes**



This health information is being provided for general educational purposes only. Your health care provider is the single best source of information regarding your health. Please consult your health care provider if you have any questions about your health or treatment.

# Getting the Big Picture

Talk to your health care provider about what medications are right for you. Remember, medication is only a part of treating diabetes. Following a meal plan, staying active, regularly checking your blood sugar level, and taking all diabetes medications as prescribed are all important steps.



### Knowing Your **Diabetes Terms**

| QUICK DEFINITIONS             |  |   |
|-------------------------------|--|---|
| Term                          | <b>What It Means</b>   | <b>How It Affects You</b>   |
| A1C<br>(also called<br>HbA1C) | A test your health care provider gives. Shows the sugar level in your blood over the last 2-3 months.  | Lowering your A1C may lessen problems caused by diabetes. Discuss your A1C level with your health care provider.                                      |
| Diabetes                      | A disease that occurs when your body cannot use or produce insulin as it should. It is a chronic illness that requires medical care and self-management. | If not controlled, diabetes may lead to serious health problems. You can take steps to help control blood sugar and lower the risks of complications. |
| Glucose                       | A type of sugar found in your blood that is the body's main source of energy.  | Treating diabetes is based on balancing insulin and glucose levels in the blood.  |
| Insulin                       | A hormone that helps your body use blood sugar for energy.   | Without insulin, glucose cannot go to your cells.   |
| Type 2<br>Diabetes            | The most-common form of diabetes. Formerly called "adult-onset diabetes," but you can get it at any age.   | Being overweight or inactive increases your chances of getting diabetes.  |



# **Understanding Glucose**

#### and Diabetes

When you have diabetes, you have too much sugar (glucose) in your bloodstream. Here is what happens:

- 1. When you eat food, your body changes it into sugar in your bloodstream. That happens with most foods, not just sweets.
- 2. Your body also naturally makes insulin. Insulin helps move the sugar from your blood into your body's cells for energy.
- 3. If your body cannot produce enough insulin or cannot properly use the insulin it has, the sugar (glucose) cannot move from your bloodstream to your cells.
- 4. Your cells don't get the sugar they need for energy, and glucose builds up in your blood. Over time high blood sugar puts you at risk for developing diabetes and related complications.





## **Knowing Your**

#### A1C Number

Your health care provider does a type of blood test—the A1C test—to tell how well the sugar (glucose) in your blood has been controlled. This shows your blood sugar control over the past 2 to 3 months.

You should discuss your A1C goals with your health care provider. Many patients with diabetes have an A1C goal of less than 7%. However, your individual goal may depend more on your age and/or health history. For example, some seniors may have a goal of less than 8% depending on health history. Talk to your health care provider about the right goal for you. If your blood sugar is not controlled, you may be at risk for developing serious complications later. The good news is that your health care provider can recommend a treatment plan of diet and exercise and can add medicine if you need it.

# Managing Your Blood Sugar

Your health care provider will check on your A1C level on a regular basis. However, you also need to check and track your blood sugar level throughout the day. Use a blood glucose meter to measure your blood sugar at home, instantly. These measures will help you track your level and assist your heath care team to set goals, or targets, for your blood sugar.



#### **Using a Daily Diary**

- 1. Check your blood sugar level and record it.
- 2. Write down the foods you ate, exercise you did, and medicines you took.

Over time, you will see what makes your level go up or down. And, remember, always work together with your health care provider to find the right medicine and dose for you.



# Myths and Facts

#### Myths About Type 2 Diabetes and Insulin

It is not always easy to separate myths from facts, especially when it comes to your health. But knowing the truth about diabetes and insulin may help you manage your blood sugar. This information is not intended as a substitute for professional medical care. Only your health care provider can diagnose and treat a medical problem.

#### Myth 1: Insulin will make me gain a lot of weight.

**Fact:** People may put on weight when they start taking insulin because it causes the body to store calories from food. Following a meal and exercise plan may help keep you from gaining a lot of excess weight.

# Myth 2: Taking insulin means I've failed with pills or my diabetes is getting worse.

Fact: Diabetes is a progressive disease. Over time, some people who start on pills may need to add insulin later to help control their blood sugar. Everyone's body is different. Your health care provider can tell you what will work best for you.

# Myth 3: Injecting insulin is very painful and will interfere with my schedule.

Fact: The insulin needle is small and thin. Insulin is injected into the fatty layer just under the skin, where there are fewer nerve endings. Many patients taking insulin say it has become a part of their daily routine.

#### Myth 4: Insulin is addictive.

**Fact:** Insulin is not addictive like narcotics. It replaces a hormone your body once made naturally.

#### Myth 5: Insulin causes low blood sugar (hypoglycemia).

**Fact:** Insulin can cause a low blood glucose reaction. However, with long-acting insulins, hypoglycemia is less likely to occur.



### **Managing Diabetes:**

#### The Highs and Lows

Managing diabetes is a balancing act.

- Too High (hyperglycemia): You may experience:
  - Getting up at night to go to the bathroom
  - Increased thirst

- Increased Hunger
- Moody
- **Too Low (hypoglycemia):** Check your blood sugar if you suddenly have any of these symptoms:
  - Shakiness
  - Dizziness
  - Sweating
  - Hunger
  - Headache
  - Clumsy or jerky movements

- Seizure
- Difficulty paying attention, or confusion
- Tingling sensations around the mouth
- Pale skin color

It is important to educate yourself—and those who care for you—about low blood sugar and what to do if it happens to you. Low blood sugar can result from any of the following:

- Missed, small, or delayed meals
- Too much insulin or diabetes medication
- Increased activity/exercise
- Excessive alcohol

#### If your blood sugar is too low,

### Here are some tips to raise it quickly

- 3 to 4 glucose tablets (check the Nutrition Facts label for carbohydrates per tablet; most tablets are 4-5 grams—at least 15-20 grams are needed). Note: this is a good, quick source of glucose.
- ½ cup (4 oz) of regular soda (not diet)
- ½ cup (4 oz) of juice
- 2 tablespoons of raisins
- 4 or 5 saltine crackers
- 4 teaspoons of sugar
- 1 tablespoon of honey or corn syrup

#### **Recommended Guidelines**

Controlling your A1C levels over time helps reduce the risk of complications later.

- AIC: Less than 7%. However, your individual goal may be more or less depending on your age and/or health history. For example, some seniors may have a goal of less than 8% depending on health history.
- Plasma blood glucose before meals: 70-130 mg/dL

Talk to your health care provider about your appropriate target level and possible problems and ask any questions.



