

Diabetes and Heart Disease Awareness

Healthy Living with Diabetessm and Heart Healthy Livingsm

Ohio Newsletter • Spring 2012



Signs of a Heart Attack

What are my risks for having a heart attack?

Even if you have heart disease, there is a lot you can do to improve your heart's health. Ask your provider for help. Together, you can set goals to reduce the things that raise your risk of a heart attack.

- Don't smoke and avoid other people's tobacco smoke.
- Treat high blood pressure, if you have it.
- Eat a healthy diet that is low in saturated fat, transfat, cholesterol and salt.
- Exercise at least 30 minutes on most or all days of the week.
- Keep your weight in a healthy range.
- See your provider for regular check-ups.
- Take your medicines exactly as prescribed.
- Control your blood sugar if you have diabetes.

What are the signs of a heart attack?

Some heart attacks are sudden and intense. Some heart attacks start slowly, with mild pain or discomfort. Here are some of the signs that can mean a heart attack is happening:

- Pressure, fullness, squeezing, pain and/or uneasy feeling in the center of the chest that lasts for more than a few minutes.
- Pain or achy feeling which spreads to the shoulders, neck, arms or jaw.
- Chest pain which does not go away after rest or after taking your heart medicine.
- Chest pain with any or all of the following:
 - Sweaty, cool, clammy, pale skin
 - Shortness of breath
 - Sickness in your stomach or vomiting
 - Feeling dizzy or faint
 - Weakness or feeling tired
 - Fast or irregular pulse

Know the warning signs of a heart attack. This can help you know when to call for help. Acting quickly can save lives.

In This Issue

| Signs of a Heart Attack | pg 1 |
|--------------------------------|------|
| What is Cholesterol? | pg 2 |
| Are You At Risk For | |
| | 0 |
| Kidney Failure? | pg 2 |
| | 2 |
| Do Not Forget Your Dental Care | pg 3 |
| Loss Calt Mars Eluid | |
| Less Salt, More Fluid | pg 3 |
| Nurse Advice Line | ng 1 |
| Nuise Auvice Line | pg 4 |
| | |

Need Help to Quit Smoking?

If you need help quitting smoking, call: **Covered Families and Children** (CFC): 1-800-642-4168 **Aged, Blind or Disabled** (ABD): 1-866-408-9501 **TTY for the hearing impaired:** 1-800-750-0750 or 711.

You are receiving this newsletter as part of a Disease Management Program. If you do not want to receive this newsletter or participate in any Disease Management Program please let us know. Please call us at: **Covered Families and Children** (**CFC**): 1-800-642-4168 **Aged, Blind or Disabled (ABD)**: 1-866-408-9501 **TTY for the hearing impaired**: 1-800-750-0750 or 711.

All material in this newsletter is for information only. This does not replace your provider's advice.

What is Cholesterol?

Cholesterol is a fat-like substance made in your body and found in some foods you eat. Your liver makes two types of cholesterol:

- LDL (low-density lipoprotein) is called bad cholesterol because it leaves cholesterol in your arteries. This may cause your arteries to clog, leading to a heart attack or stroke.
- HDL (high-density lipoprotein) is called good cholesterol because it brings cholesterol back to the liver, where it is passed from the body.

Triglycerides are another type of fat found in your blood. A diet high in sugar and alcohol can raise your triglyceride number. High levels of triglycerides are linked with an increased risk of heart disease and stroke.

The good news is most people can lower their cholesterol through diet. Eat food low in saturated fat and cholesterol. Here are some simple daily guidelines:

- Keep your calories low by eating a variety of foods low in saturated fat and cholesterol.
- Eat at least five servings of fruits and vegetables every day.
- Eat six or more servings of cereals, breads, pastas and other whole-grain products.
- Eat fish, poultry without skin and leaner cuts of meat instead of fatty ones.
- Eat fat-free or 1% milk dairy products rather than wholemilk dairy products.
- Exercise at least 30 minutes on most or all days of the week
- Maintain a healthy weight.

If you have heart disease, you should get regular check-ups to get your cholesterol levels tested. This information can help your provider determine the best treatment plan for you. One step at a time, you will look and feel better. Your provider can help you in lots of ways. Just ask.

Are You At Risk For Kidney Failure?

According to the National Kidney Foundation, one in nine Americans has Chronic Kidney Disease (CKD), but many do not know it.

To find out if you are at risk, check the boxes below that apply:

- $\hfill\square$ I have diabetes
- □ I have high blood pressure or heart disease
- □ I have a family history of chronic kidney disease
- □ I am 60 years of age or older
- □ My ethnic background is African-American, Hispanic, Asian Pacific Islander or Native American

If you checked any of the boxes, you may be at risk to for CKD and should see your provider soon.

Healthy kidneys balance your body's fluids. They do this by:

- Filtering and releasing wastes and excess fluids from your body as urine
- Controlling your body's fluid level and important minerals in your blood such as sodium, potassium, phosphorus and calcium
- Removing drugs and toxins from your body
- Releasing hormones into your blood that control blood pressure, make red blood cells and keep your bones healthy

When you have chronic kidney disease, your kidneys can no longer perform these jobs well.

The leading causes of CKD are diabetes and high blood pressure. Diabetes increases pressure inside the kidney's filters. Over a period of time, this pressure damages the filters, which then leak protein into the urine. High blood pressure, or hypertension, means the pressure of your blood against the walls of your blood vessels increases. If left untreated, hypertension can lead to CKD, heart attacks and strokes.

African Americans, Hispanics, Asians, Pacific Islanders and Native Americans are at an increased risk for kidney disease. One reason is diabetes is more common in these groups. African Americans also have a higher risk factor for high blood pressure.

Other symptoms of CKD are:

- Loss of energy
- Poor appetite
- Troubling sleeping
- Dry, itchy skin
- Muscle cramping at night
- Swollen feet and ankles
- Puffiness around the eyes, mainly in the morning
- The need to urinate more often, mainly at night
- Unexpected weight loss or gain

If left untreated, CKD can lead to cardiovascular disease as well as kidney failure.



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Do Not Forget Your Dental Care

Your provider may have already told you to take care of your feet, eyes, and heart to prevent health problems from diabetes. Have you thought about your teeth and gums? Good dental care is very important for people with diabetes. People with diabetes are at a higher risk for developing serious gum disease.

Plaque is the main causes of gum disease. Diabetes can also be a contributing factor. Diabetes may weaken your mouth's ability to fight germs. High blood sugar levels can make gum disease worse. At the same time, gum disease can make diabetes harder to control.

How can I tell if I have gum disease?

Often gum disease is painless. You may not even know you have it until you have some serious damage. Regular dental visits are your best option to maintain healthy gums. While gum disease may not hurt, there are warning signs to watch for.

- Bleeding gums when you brush or floss. This bleeding is not normal. Even if your gums don't hurt, get them checked.
- Red, swollen, or tender gums
- Gums that have pulled away from teeth. Part of the tooth's root may show, or your teeth may look longer.
- Pus between the teeth and gums (when you press on the gums)
- Bad breath



- Permanent teeth that are loose or moving away from each other
- Changes in the way your teeth fit when you bite
- Changes in the fit of partial dentures or bridges

How can I help prevent dental problems associated with diabetes?

First and foremost, control your blood glucose level. Then, take good care of your teeth and gums. The three main steps in fighting gum disease are brushing, flossing, and seeing your dentist regularly. Brush at least twice a day and floss at least once a day. Ask your dentist or hygienist to show you the correct way to brush and floss.

With good diabetes control and regular dental exams you can keep your teeth and gums healthy.

Less Salt, More Fluid

Cutting back on sodium (salt) is important if you have Cardiovascular Disease (CVD). Salt keeps fluids in your body. To pump the added fluid, the heart has to work much harder than usual. People with CVD should not put this extra strain on their heart.

Too much salt can cause:

- Swelling
- Shortness of breath
- Weight gain

You may need to go to the hospital if these symptoms become severe.

The American Heart Association (AHA) recommends limiting salt intake to less than 1,500 mg a day for the following people:

- African Americans
- Middle aged and older adults
- People with high blood pressure

Most people tend to eat a lot more than 2,000 mg. Depending on your health, your provider may tell you to cut salt out completely.

What can I do to reduce sodium in my diet?

Most of the salt in our diets comes from adding it when food is being prepared. Many processed foods are also high in salt. Read food labels.

They tell how much salt is in food products. Below are some tips for reducing salt intake:

- Take the salt shaker off the table
- Cook without salt
- Avoid salty seasonings like bouillon cubes and soy sauce
- Cook with low-salt seasonings like lemon juice, vinegar and herbs
- Drain and rinse canned foods before using them
- Eat fresh lean meats, skinless poultry, fish, egg whites, and tuna canned in water

Besides limiting salt intake, staying hydrated is also important. For some forms of CVD like heart failure, your provider might recommend limiting how much fluid you get. Avoid drinks with caffeine such as:

- Coffee
- Black tea
- Some sodas

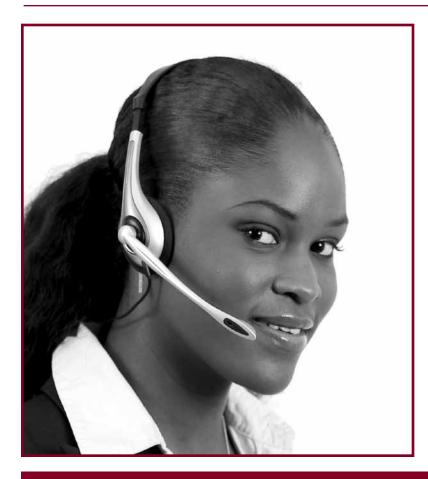
Caffeine is a stimulant. It can put more stress on your heart.

Don't overwork your heart. Start making changes to your diet today. This can help you reduce the risk for more severe health problems.



PO Box 349020 Columbus, OH 43234-9020

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Questions about your health?

Call Our Nurse Advice Line!

English: 1-888-275-8750 Spanish: 1-866-648-3537

OPEN 24 HOURS! Your family's health is our priority!

For the hearing impaired, please call TTY (English): 1-866-735-2929 TTY (Spanish): 1-866-833-4703