

Diabetes and Heart Disease Awareness

Healthy Living with Diabetessm and Heart Healthy Livingsm

California Newsletter • Summer 2009



Checking Your Blood Sugar Levels



Keeping track of your blood sugar levels is the main way to tell how well your diabetes self-care plan is working.

Check your own blood sugar levels at home. If you do not know how to do this, ask your provider to show you how. Be sure to write down the results of all of your tests and the time you checked them. Share your record with your healthcare team.

BEFORE-MEAL

Blood sugar target range = 70 to 130

AFTER-MEAL

Blood sugar target = Less than 180

Ask your provider when and how often you should check your blood sugar level, and ask what your goals should be.

You also need to have your provider check your blood sugar level. This test is called Hemoglobin A1c. Have a Hemoglobin A1c test done by your provider two or more times a year.

This test shows your average blood sugar control over the past 2 to 3 months.

Hemoglobin A1c target goal = Less than 7%*

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Need Help Quitting Smoking?

If you need help quitting call Molina Healthcare's **Health Education** team at 1-800-526-8196, ext. 127532 to get information about smoking cessation programs.

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 1-866-891-2320.

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

What is Diabetic Kidney Disease?

Diabetic kidney disease is a decrease in kidney function that occurs in some people who have diabetes. It means that your kidneys are not doing their job as well as they once did to remove waste products and excess fluid from your body. A build up of these wastes can cause damage to other organs.

In the early stages, there may not be any symptoms. As kidney function decreases further, toxic wastes build up, and patients often feel sick to their stomachs and throw up, lose their appetites, have hiccups and gain weight due to fluid retention. If not treated, you can develop heart failure and fluid in your lungs.

Almost all people with Type I and Type II diabetes start to have some signs of decreased kidney function within two to five years of diagnosis. About 30 to 40 percent of these people will go on to more serious kidney disease within about 10 to 30 years.

There are new treatments that can help. A group of high blood pressure medicines called ACE inhibitors may help to prevent or delay the progress of diabetic kidney disease. Talk to your provider to see if these medicines could help you.

If your kidneys fail there are two types of dialysis treatments available. One is called hemodialysis and the other is peritoneal dialysis. Another option may be to have a kidney transplant. Talk to your provider about which treatment would be the best choice for you.

Diabetes and CVD

If you have diabetes, you are at risk of having cardiovascular disease (CVD).

That means that your chances of having a heart attack or stroke are high. In addition, many people with type 2 diabetes also have high blood pressure, high cholesterol and are obese. These add to the risk of CVD. If you have diabetes and you smoke, it doubles your risk of CVD.

The good news is that you can lower your risk.

The first step is to know what your risk factors are. These include cigarette smoking, high blood pressure, high cholesterol, and high blood sugar. Other risk factors include overweight or obesity, physical inactivity, and a family history of CVD. The next step is to reduce your risk. Some factors you cannot help, like your age and family history. But others you can do something about.

The National Diabetes Education Program encourages people with diabetes to control their ABCs:

A is for A1C. Aim to keep your A1C (average blood glucose) test less than 7%.

B is for blood pressure. Aim to keep yours less than 130/80 mmHg.

C is for cholesterol. Aim for LDL less than 100 mg/dl.

Just how do you do all that? Try to add some physical activity to your day. Do your best to make healthy food choices. Choose low fat dairy, lean meats and whole grains. Stop smoking. Take your medications as prescribed.

Your efforts will make a difference! Blood pressure control reduces the risk of CVD by 33% to 50%. Better control of cholesterol can reduce CVD problems by 20% to 50%, something to be proud of!

Travel and Diabetes



When traveling or going on vacation, you don't get to leave your diabetes behind. Here is a list of things to keep in mind before you go.

Plan ahead:

Make an appointment to see your healthcare provider four to six weeks before your trip. Have a check up. Get a letter from your doctor explaining that you have diabetes. Also get a prescription for insulin or oral medication in case of an emergency.

What to pack:

Pack twice the amount of medication and supplies. If you take insulin, pack an extra bottle of Regular just in case. Don't forget to bring a glucose monitor and test strips. Keep snacks, glucose gel, or tablets with you in case your blood sugar drops. Bring your glucagon emergency kit.

If you are flying:

Keep all supplies in your carry-on luggage. Tell airport security that you have diabetes. You can take medicine and supplies through security checkpoints. They must have prescription labels on them. Have enough food

with you to cover the entire flight. If you inject insulin while on the plane, don't inject air into the bottle. This is because the cabin is pressurized. Flying across time zones means shorter or longer days. If you inject insulin, talk to your doctor before your trip about your need for more or less insulin on travel days.

Other important tips:

- Don't keep your medication in the trunk or glove compartment of your car. Insulin does not have to be refrigerated. But it should not get too hot or too cold.
- Tell traveling partners about the early signs of low blood sugar. These signs are glassy-eyed, confused, irritable, or sweating inappropriately. You will need sugar, juice, or milk right away.
- Take care of your feet. Change your shoes often. This will help prevent blisters and soreness at pressure points. Bring a first aid kit with you to treat minor foot injuries.
- Test your blood sugar more often. Changes in your daily schedule can affect your blood sugar.
- Always wear medical identification that says you have diabetes.



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Questions about your health?

Call Our Nurse Advice Line!

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

OPEN 24 HOURS!

Your family's health is our priority!

For the hearing impaired please call TTY/866-735-2929 English TTY/866-833-4703 Spanish