



Less Salt, More Fluid



Cardiovascular Disease (CVD), is a term for diseases of the heart and blood vessels. High blood pressure and heart failure are two examples. If you have CVD, limiting your sodium (salt) intake is important. Water follows salt. When you eat or drink things with salt in them, that salt gets into your blood stream. Water will follow to try to dilute the salt content. Then, your heart has to work harder to pump a larger volume of fluid. Too much salt can cause swelling, shortness of breath and weight gain. Most people should get less than 2,300 milligrams of sodium per day. But, if you have heart failure, the recommended sodium intake is no more than 2,000 milligrams per day.

The American Heart Association recommends the following tips to reduce sodium 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.

Besides limiting salt intake, drinking enough water is also important. (For some forms of CVD, like heart failure, your doctor might recommend limiting how much fluid you get.) Most doctors recommend eight cups a day. This includes fluids like water, juice and ice cubes and foods such as yogurt, and fruit. Watch out for caffeinated beverages like coffee, black tea and some sodas. Caffeine makes your heart pump faster, so it can put more stress on your heart.

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What is Diabetic Kidney Disease?

Diabetic kidney disease is a decrease in kidney function that occurs in some people who have diabetes. This means that your kidneys are not doing their job as well as they once did in removing 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, toxic wastes build up, and patients often feel sick to their stomach, 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.

People with Type I and Type II diabetes should start looking out for signs of decreased kidney function within two to five years of diagnosis so that any problems can be quickly addressed with a health care provider.

If you develop diabetic kidney disease, your health care provider will let you know how you can treat it. There are new treatments that can help. A group of high blood pressure medicines called ACE inhibitors may help to prevent or delay the progression of diabetic kidney disease.

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. There are things you can do to keep from getting diabetic kidney disease in the first place. Keeping your glucose levels under control, eating a healthy diet, getting plenty of exercise, and avoiding alcohol and cigarettes will all help keep your kidneys healthy.

What is a GFR or an eGFR?

Your kidneys filter your blood and help control blood pressure. They remove waste and water and make urine. Your provider uses a blood test to measure how much blood your kidneys are filtering. This test is called an estimated glomerular filtration rate (eGFR).

It is important to know your eGFR because you may not be able to feel if your kidneys have been damaged. Your provider will test your blood for creatinine. Creatinine is a waste that comes from your muscles.

Ask your health care provider if this test is right for you. The test is not recommended for people who are:

- Younger than 18 years old
- Over 70 years old
- Very overweight
- Very muscular
- Pregnant
- Have another serious illness

Your health care provider will check your eGFR results and will let you know what they mean.

- 30 – 59 = Moderate Kidney Damage
- 15 – 29 = Severe Kidney Damage
- Less than 15 = Kidney Failure (Dialysis or transplant may be needed soon)

If your eGFR is 60 or higher, your provider will check other things to make sure you do not have early-stage kidney disease. **Your provider may check:**

- Your urine for protein or blood
- Your health history
- Your blood for wastes and toxins
- Your family's health history
- Your blood pressure

Take care of your kidneys, and they will take care of you.

Checking Your Blood Sugar Levels

Keeping track of your blood sugar levels is the best way to tell if 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. Be sure to write down the results of all of your tests and the time you checked them, and then share your log with your diabetes care 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 what your goals should be.

You also need to have your provider check your blood sugar level. This test is called an A1C. You should have an 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.

• *A1C target goal = Less than 7%**

Have a Healthy Heart

When you have heart disease, healthy habits are even more important. Changing your diet and adding a little exercise can give you more energy. Here are a few things you can do to keep your heart healthy.

DIET CHANGES

Eat more fiber

Fiber helps reduce heart disease. Try eating more high fiber foods:

- vegetables
- fresh fruits
- whole grain bread
- whole wheat pasta
- oatmeal

Eat less fat

To lower your fat intake, switch to low fat milk and cheese. Eat less butter and red meats. Try fish or skinless chicken. Instead of frying, try steaming, baking, or broiling. Olive oil and canola are better fats for cooking.

Eat less sodium (salt)

Take your salt shaker off the table. Use lemon juice, herbs and spices to flavor your food.

Eat fewer calories

For your sweet tooth, eat fresh fruit like grapes and apples.

EXERCISE

What can you do for exercise? Try walking. A short walk a few times a week may be all you need. Make sure you

check with your doctor before starting any exercise routine. Here are a few things walking can do:

It can make your body feel better.

Exercise helps you have a healthy heart because it makes your heart pump. When your heart is pumping, you release hormones that make you feel good. Exercise speeds up your digestion. It helps your body remove toxins faster. It can also help your immune system so you won't get sick as often.

It can help you relieve stress.

Walking can help to lower stress. People who walk feel less anxious. Walking can be a good time to clear your mind.

It can help lower your risk for health problems.

Stretch for a few minutes before and after exercise. Regular walking can help control cholesterol levels. Exercise can help lower your weight. Losing weight can lower your risk of diabetes and heart disease.

Exercise can be easy. Here are a few ways to include walking into your daily schedule:

- If it is very cold or hot, walk inside a mall.
- If you don't have much time during the day, try walking at lunchtime.
- Take fifteen minutes and walk before breakfast or after dinner.
- Walk the dog.
- Encourage your spouse or your neighbor to walk with you.
- Make exercise fun by keeping track with family or friends. See how far you can go in a week!



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