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Healthy dishes sure to become new favorites



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Number of calories a 150-pound adult burns in 30 minutes of sledding.

Source: USDA



YOUR BEST SHOT

Had your flu shot yet? What are you waiting for? Researchers tracked 124,503 people with type 2 diabetes for seven years. The ones who got flu shots—even though they were older and sicker than those who didn't—were less likely to go to the hospital for the flu or for stroke, heart failure, or pneumonia. They were less likely to die during those seven years, too.

Source: CMAJ

QUALITY CONTROL

People with diabetes are living longer, higher-quality lives. From 1992 to 2002, researchers followed a group of adults with diabetes who were born in the 1930s. Then, from 2002 to 2012, they followed a group born in the 1940s. Those born in the 1940s had up to 2.3 more disability-free years than their older counterparts. They also lived longer. The researchers attribute the differences to improvements in diabetes education and management, and to medical advancements such as hip and knee replacements.

Source: *Lancet Diabetes and Endocrinology*



29

Grams of carbohydrate in 4 tablespoons of raisins. That's the same as 1 cup of grapes.

Source: USDA

A DIET/SEX CONNECTION

The Mediterranean diet's benefits may extend to the bedroom for men and women with type 2 diabetes—a perk since the condition can lead to sexual dysfunction. About 200 people with type 2 diabetes went on either a low-fat diet or the Mediterranean diet for eight years. Every six months, they answered questions about sexual function.

In the beginning, both groups had similar problems with sex. But during the remaining eight years, the Mediterranean dieters reported far fewer issues. The researchers suspect that reduced inflammation and improved heart health—known benefits of the diet—improve sexual function, too.

Source: *Diabetes Care*



A PLAN JUST FOR YOU

Trying to eat healthier? Ask your diabetes educator for personalized goals. Advice customized to your tastes and eating habits might be more effective than the generic “eat five servings of fruits and vegetables each day.” Researchers assigned 1,269 adults to get either general or personalized nutrition advice. Six months later, those who got personalized advice ate less red meat, salt, and saturated fat than their peers. And their diets overall were healthier.

Source: *International Journal of Epidemiology*



29 MILLION

Number
of Americans
living with
diabetes.

Source: CDC

Take Control

What to do if you've been diagnosed with diabetes

BY JODI HELMER

Learning that you have diabetes can be overwhelming. But the disease, which affects 29 million Americans, is manageable.

"A lot of good therapies are available," says Jorge Plutzky, MD, associate physician at Brigham and Women's Hospital in Boston. And if type 2 diabetes is diagnosed early enough, he adds, it might be reversible.

So rather than just feeling overwhelmed, Plutzky suggests taking these four steps.

Know your numbers

Testing your blood sugar is an essential component of managing diabetes. Knowing your blood glucose levels can encourage you to make positive changes, like eating less or going for a walk, Plutzky says.

Blood glucose isn't the only number you'll need to monitor. Diabetes also increases your risk of heart disease, so keeping track of other health numbers, including your blood pressure and LDL or "bad" cholesterol levels, is essential.

Make lifestyle changes

Eating healthy meals and getting regular exercise not only help to keep your blood sugar under control; these good habits could be the keys to managing the disease in the long run. "Diet and exercise can play a role in whether you need medicine and how much you'll need," Plutzky says.

Of course, healthy lifestyle changes can help you lose weight. And given that adult-onset diabetes is often associated with excess weight, "even losing a little weight can have a huge impact on diabetes," he explains.

Talk to your doctor

After your diagnosis, your doctor will likely want to see you more often, to check your blood sugar levels and do an A1c blood test, which provides an average of your blood sugar control over the past two to three months. "These appointments will give your doctor a picture of how well you're responding to treatment," Plutzky says.

These appointments are also good opportunities to ask questions. "Diabetes is a lifelong disease," Plutzky says. "You need to have enough information to understand what it means for you."

Seek support

Support groups can help you learn how to live well with the disease. "For some patients, it's very appealing to be in a group to prepare notes," Plutzky says.

One recent study found that attending a diabetes support group helped participants with type 2 diabetes lower their A1c levels. Your doctor or diabetes educator can recommend groups for you to check out.

ASK YOUR DOCTOR

Do I have type 1 or type 2 diabetes? What's the difference?

How often do I need to test my blood sugar? What is my goal range?

What are the signs of low blood sugar? High blood sugar?

Will I need insulin or other medications to control my blood sugar?

What other health care providers need to be part of my diabetes management team?



DAVIDE ILLINI/STOCKSY

REVIEWED BY BRUNILDA NAZARIO, MD, WEBMD LEAD MEDICAL EDITOR



Read [5 Tips for Managing Type 2](#), an article at WebMD.com.

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The Celiac Connection

Should you get tested for this autoimmune disease?

BY ERIN O'DONNELL

Having type 1 diabetes boosts your chances of developing celiac disease, an autoimmune disorder that causes the body to overreact to gluten. When people with celiac disease eat gluten—a protein found in grains including wheat, barley, and rye—their immune systems respond by attacking the tissue of the small intestine.

“Celiac disease affects 1 in 80 to 1 in 300 folks in the general population, but among people with type 1 diabetes, the risk is about tenfold higher,” says Elvira Isganaitis, MD, an endocrinologist at Joslin Diabetes Center. “You’re looking at something like 3% to 10% of people with type 1 diabetes also having celiac disease.” If you were diagnosed with type 1 as a baby or young child, your odds of developing celiac disease appear to be even higher, Isganaitis adds.

Type 1 and celiac are both autoimmune disorders, and researchers suspect that the same genes set the stage for both diseases. Given these links, many endocrinologists ask patients with type 1 diabetes to undergo periodic blood tests to screen for celiac disease. If the screening is positive, the doctor usually refers the patient to a gastroenterologist for an endoscopy, a procedure in which the doctor uses a scope to examine the small intestine and takes a tissue sample to confirm the diagnosis.



Celiac disease may trigger symptoms including diarrhea and abdominal pain. But for most people, celiac “is usually silent,” Isganaitis says, and can go undiagnosed and untreated for years. That’s a problem. “Celiac disease causes inflammatory changes in the gut that can be severe enough to cause nutrient malabsorption,” she says.

As a result, children with celiac disease may fail to grow to their expected height. Adults may develop early osteoporosis. And the combination of type 1 diabetes and undiagnosed celiac disease may cause unexplained low blood sugar levels.

When her patients are diagnosed with celiac disease, Isganaitis encourages them to work with a diabetes- and celiac-savvy dietitian. The only treatment is to remove all gluten from the diet, which Isganaitis acknowledges is a radical change. “It’s just not as simple as eliminating bread and pasta. A surprising number of things contain gluten, such as salad dressings and soy sauce,” she says.

Given the expanding awareness of celiac disease and greater availability of gluten-free products, eating gluten-free is easier than ever. “It allows patients to feel much better in terms of energy, malaise, and blood glucose regulation,” Isganaitis says. “After the initial diagnosis, which is admittedly an adjustment, it is pretty rare that they complain about missing gluten.”

ASK YOUR DOCTOR

What potential celiac symptoms should I watch for?

Can you recommend a dietitian with experience treating celiac disease and type 1 diabetes?

Would I benefit from a gluten-free diet?



Check out [A Visual Guide to Celiac Disease](#), a slideshow at WebMD.com.

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Portion Control

Try this hands-on approach to filling your plate

BY MICHELE COHEN MARILL

Sit down at a restaurant and you're likely to get a heaping plateful of pasta or huge hunk of steak and an oversized beverage to wash it down. Those servings may make you feel like you get your money's worth, but they distort the way you think about portion size. And portion control is the key to managing carbohydrates, weight, and diabetes. Even if you choose mostly healthy foods, too-big portions may cause you to overindulge.

If you count carbs, you may be accustomed to checking food labels. But the serving size listed on the label is often less food than the average real-life portion. To figure out how much to eat, just take a look at your plate. The federal nutritional guide, called MyPlate, divides a dinner plate roughly into quarters, with one-quarter each of protein, starchy vegetables or grains like rice or potatoes, nonstarchy vegetables, and fruit—plus a small side of dairy.

As you scoop food onto your plate, use your hand as a visual cue to gauge portion size, says Sherri Shafer, CDE, a registered dietitian who teaches nutrition at the University of California, San Francisco Diabetes Teaching Center, and is the author of *Diabetes Type 2: Complete Food Management Program*. "I like the image of your hand because you can't leave home without your measuring device," she says.

Here are some easy clues to help you correctly size up your portions.

Meat the size of your palm

Twice a day you can have a serving of meat or fish the size and thickness of your palm, or



about 3 to 4 ounces. Choose lean options, such as skinless chicken breast or beef that isn't marbled with fat. Lean meat typically has about half the calories of fatty versions.

A fistful of starch

Your fist will equal about a cup of rice or pasta. Whole grains, such as brown rice, are a better choice than refined grains, such as white rice. Or you can have two slices of whole wheat bread.

Fruit about the size of a tennis ball

Wrap your hand around a juicy peach or apple, or scoop a handful of berries. Fruit gives you important nutrients and fiber but also adds a burst of carbohydrates and calories. Stick to two or three portions a day, Shafer advises.

A thumbful of fat

A little butter on your bread or potato—about the size of your thumb tip—can add flavor without too many calories, Shafer says. When possible, choose foods that contain "good" fats such as nuts, avocados, or salad dressing with olive oil. Steer clear of deep-fried foods.

Little or no fruit juice

A fruit smoothie might seem like a healthy beverage, but it's packed with carbs, natural sugar, and calories. The sugar in juice raises blood glucose faster than a serving of fruit, Shafer says.

Lots of veggies

Vegetables such as broccoli, zucchini, and carrots boost your diet with nutrition and fiber while adding minimal calories and carbs. Shafer recommends piling half your plate with vegetables and filling up on these healthy foods.

ASK YOUR DIETITIAN OR DIABETES EDUCATOR

What is the difference between a serving size and a portion?

How does portion size affect my blood glucose?

How can I control portion size when I eat out?

Are any foods off-limits for me?

What drinks can I have with my meals?



Read [What Is MyPlate?](#) an article at WebMD.com.

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Go With the Flow

Give tai chi a try. The low-key practice may deliver big wins for your health

BY KARA MAYER ROBINSON



High-energy workouts are great for your health. But they're not the only type of exercise that can help you control diabetes. If gentle workouts are more your speed, try tai chi, an ancient mind-body practice that mixes slow, fluid movements with meditation and deep breathing. Studies suggest that tai chi improves your glucose control, quality of life, posture, flexibility, and range of motion. It also helps to keep you mentally alert during the day and sleep better at night.

Tai chi is low impact, so it's one of the easiest activities to begin with, says diabetes fitness coach

Michael G. Hofrath, MA, of Marina del Rey, California. Do it safely and effectively with these guidelines.

Learn from a master

Tai chi is a specialty practice, so it's best to learn proper form by working with a master instructor, Hofrath says. Try group classes or private lessons. You may find them at your local YMCA or health club, or visit americantaichi.org. Classes typically run for about an hour.

If you don't find qualified instructors in your area, try following a DVD or streaming workout led by a master practitioner.

Keep it up

The more you do tai chi, the better you'll get. You'll need to do tai chi two or three times a week for at least six months to get the full health benefits. On the days you don't have class, try to practice at home for 15 to 20 minutes.

Be patient

Tai chi may feel awkward at first. That's OK. You need time and practice to develop posture, flexibility, and agility. Keep it up and you'll find your groove. "It takes several months of consistent practice to feel confident in all the tai chi movements," Hofrath says. Also, it's normal to feel sore in the beginning. You're firing up muscles that aren't used to working. This too will get better with time.

Listen to your body

If any movement feels uncomfortable, ease up. If you feel dizzy or short of breath, or if you develop headaches or severe pain, stop and tell your doctor.

Make it just right—for you

Tai chi is a safe exercise for just about everyone, but if you have limited mobility you may need to make adjustments. You can modify positions to work with balance limitations, chronic pain, injuries, or joint swelling. Talk to your doctor, diabetes educator, or tai chi master for guidance.

ASK YOUR DOCTOR

Is tai chi safe for me?

Do you recommend any modifications?

How will it affect my glucose levels?

Will I need to change my insulin dosage?

When's the best time of day to do tai chi?

Does tai chi replace other types of exercise?



Read [Tai Chi and Qi Gong](#), an article at WebMD.com.

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REVIEWED BY MICHAEL W. SMITH, MD, CPT, WEBMD CHIEF MEDICAL EDITOR

Stuffed Delicata Squash

These hearty stuffed squash are a perfect vegetarian and vegan main dish. They're also gluten-free. Delicata are a small, sweet-tasting winter squash. When baked, the skin is tender enough to eat. (Extra fiber, anyone?) To save time, you can prepare the squash and stuffing separately the day before. Assemble and bake until heated through right before you're ready to eat. Serve with a vegetarian gravy for a flavorful, satisfying main dish. *Makes 4 servings*

INGREDIENTS

2 1-lb delicata squash,
cut in half, seeds removed
cooking spray
salt and pepper to taste
⅓ cup wild rice
1 cup water
1 tbsp butter
1 tbsp olive oil
1 small yellow onion, diced
½ cup chopped celery
1 tsp minced fresh ginger
¼ cup chopped pecans
½ cup fresh cranberries
2 cups firm tofu, drained and
mashed with a fork
1½ tsp Bell's Seasoning
1 tbsp maple syrup

DIRECTIONS

1. Preheat oven to 375°F.
2. Prepare squash: Spray cut side of squash with cooking spray and sprinkle with salt and pepper. Place cut-side down on a foil-lined baking sheet and bake until a fork can pierce it easily, about 40 minutes.
3. Prepare rice: Bring water to a boil and add rice. Cover and reduce to a simmer. Cook until all the water is absorbed, about 40 minutes. Set aside.
4. Prepare stuffing: While rice and squash cook, heat a large skillet over medium heat. Add butter and oil. Add onion, celery, and ginger and cook until soft, about 10 minutes. Add pecans, cranberries, tofu, seasoning, and cooked rice.
5. In a baking dish, place cooked squash cut-side up and fill evenly with stuffing. Drizzle with maple syrup. Return to oven and bake another 5 minutes.

PER SERVING

353 calories, 15 g protein, 43 g carbohydrate, 17 g fat (4 g saturated fat), 8 mg cholesterol, 7 g fiber, 6 g sugar, 204 mg sodium. Calories from fat: 42%

HOLIDAY SHOW STOPPERS

Mix things up this
year and create
some new holiday
menu favorites

BY KERRI-ANN JENNINGS

REVIEWED BY HANSA BHARGAVA, MD
WEBMD MEDICAL EDITOR

PHOTOGRAPHY BY CHARLES MASTERS

The usual roasted turkey with all the trimmings is a holiday tradition, and with good reason. It's a perennial crowd-pleaser and yields delicious leftovers that last for days. But if you want to mix things up this holiday season, consider creating some new traditions in the process. Turn the page for more of our fresh new menu suggestions, complete with recipes.

Roasted Turkey Legs With Vegetables

This all-in-one turkey leg dinner is just right when you have less than a crowd. Without roasting a whole bird, you can still have roast turkey with all the fixin's. Plus, it can easily be scaled up or down. This is a blueprint, so feel free to get as creative as you like with the vegetables. Any and all root vegetables or winter squash will do. For variety, try sunchokes, rutabagas, sweet potatoes, or parsnips.

Makes 4 servings

INGREDIENTS

2 turkey legs
1½ tbsp olive oil, divided
½ tsp rosemary
½ tsp dried sage
¼ tsp kosher salt
¼ tsp garlic powder
pinch black pepper
1 yellow onion, peeled and diced
(keep a few slices aside)
2 stalks celery, diced
(keep a few slices aside)
1 large potato, diced
2 large carrots, peeled and diced
1 turnip, peeled and diced
salt and pepper to taste

DIRECTIONS

1. Preheat oven to 350°F. Pat turkey legs dry with paper towels. Combine 2 tsp olive oil and spices in a small bowl. Loosen the turkey skin and rub spiced oil mixture under the skin.
2. With a sharp paring knife, make a few small incisions in the turkey legs and fill with diced onion and celery.
3. In a 9x13-inch baking pan, scatter remaining vegetables and toss with remaining olive oil, plus salt and pepper. Place turkey legs on top and roast until an instant-read thermometer registers 160°F, about 90 minutes.

PER SERVING

(with skin removed before eating)

330 calories, 36 g protein, 25 g carbohydrate, 9 g fat (2 g saturated fat), 134 mg cholesterol, 4 g fiber, 5 g sugar, 442 mg sodium.
Calories from fat: 25%



MORE ▶

Check out [11 No-Alcohol Drinks for People With Diabetes](#), a slideshow at WebMD.com.

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Salmon en Croûte

Layers of pink salmon and green spinach give this dazzling main dish a festive appearance, and it looks much more difficult to make than it really is. To lighten up the recipe, replace the traditional puff pastry with phyllo dough. We kept the prep easy by using frozen spinach and premade pesto in the filling, but feel free to use fresh spinach and homemade pesto if you like. *Makes 6 servings*

INGREDIENTS

2 tbsp olive oil
1 tbsp minced garlic
10 oz frozen spinach
juice and zest of 1 small lemon
4 oz light cream cheese, softened at room temperature
4 tbsp pesto
6 sheets phyllo dough, defrosted according to package instructions
1 large fillet wild salmon (about 1.5 lbs), skin and all bones removed

DIRECTIONS

1. Heat a large skillet over medium heat and add 1 tbsp olive oil. Add garlic and cook until it starts to become fragrant, about 30 seconds. Add spinach and cook until heated through. Remove from heat and stir in lemon juice. Set aside to cool. Set oven to 400°F.
2. Mix together cream cheese, pesto, and lemon zest and set aside.
3. Line a large cookie sheet with parchment paper. Place a sheet of phyllo on the sheet,

long end facing you. Brush with olive oil. Place another sheet of phyllo on top and brush with oil. Continue layering the remaining sheets, saving some oil to coat the final package. Spread the cream cheese mixture in the middle of the phyllo, leaving a one-inch border. Place the salmon fillet across the width of the phyllo, about one-third of the way up from the bottom edge. Spread cooled spinach mixture over the salmon.

4. Wrap the salmon in phyllo, folding the bottom edge up and top edge down. Fold edges to seal. Brush with remaining oil. At this point, you can chill the salmon 3 to 4 hours until you're ready to bake it.
5. Bake 25 minutes until the pastry is crisp and golden.

PER SERVING

339 calories, 29 g protein, 14 g carbohydrate, 18 g fat (4 g saturated fat), 57 mg cholesterol, 2 g fiber, 2 g sugar, 292 mg sodium. Calories from fat: 48%



Does Your Bladder Control Your Life?

If urinary problems get in the way, ask yourself these questions

BY SONYA COLLINS



Your doctor told you to take a walk every day to control your weight and blood sugar. But what if you're afraid you won't make it to the corner before you have to go again? When issues like this come up, it may seem like your bladder is controlling your life.

"Typically, we say it's a problem if you urinate more than eight times a day," says Lisa Hawes, MD, a urologist at Chesapeake Urology Associates in Maryland. Or maybe it's not about how often you go, but rather that when you do have to go, it feels urgent right away.

Bladder issues are common as you get older. But for people with diabetes, problems can start earlier and be more severe. Fortunately, you can take steps to make it better. Before you call your doctor about your frequent trips to the loo, ask yourself a few questions to rule out some possible causes.

Is my blood sugar in check?

"When you have high blood sugar," Hawes says, "more water is drawn into the urine so that the excess sugar can be excreted." This will fill up your bladder faster.

How much water do I drink?

The bladder holds 10 to 15 ounces of urine. If you drink more than 80 ounces of water a day, more than eight trips to the bathroom might be normal. Log your fluid intake and track how many times a day you go, Hawes suggests.

What do I eat?

Acidic foods and drinks produce acidic urine, too, which can make nature's call feel more urgent. Acidic foods include coffee (regular and decaf), tea, carbonated beverages, citrus fruit juices, tomatoes, chocolate, and spicy foods. "For people with diabetes, artificial sweeteners could also be a trigger," Hawes says.

Am I constipated?

Both diabetes-related nerve damage and dehydration caused by high blood sugar can lead to constipation. "Stool that's sitting in the intestines can put pressure on the bladder and give people more frequency and urgency," Hawes says. To help keep things moving along, be sure to eat plenty of fruits, vegetables, and fiber, and drink plenty of water. If these dietary changes don't take care of the problem, an over-the-counter stool softener could help.

If you've ruled out these possible causes, reach out to your doctor. At your appointment, your doctor can check to see whether you might have a bladder infection or another underlying problem, and then discuss treatment options, including prescription medications.

ASK YOUR DOCTOR

Should I be concerned about my bladder health?

What lifestyle changes or other measures can I try on my own?

At what point should I see a specialist?

What kinds of treatments can I try?



Check out [Foods and Drinks That Make You Gotta Go](#), a slideshow at WebMD.com.

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Get Well Sooner

Ways to fight a cold, and how to prevent one in the first place

BY MATT McMILLEN

If you have diabetes, coming down with a cold or the flu might mean more than just aches, pain, sniffles, and fever. Both of these common winter ailments can cause dangerous spikes in blood sugar and potentially deadly complications. Here's how to protect yourself.

Boost your immune system

The best preventive measures are to wash your hands often and stay away from anyone who appears to be sick. Also, avoid touching your eyes, nose, and mouth; this can help stop germs from spreading.

"These very basic hygiene recommendations are very effective," says Marwan

Hamaty, MD, an endocrinologist at the Cleveland Clinic. He also points out that people with diabetes—especially those who don't have their disease well under control—have a higher risk of infection due to their compromised immune systems. "That's a good reason to get a flu vaccine every year, and the earlier in the season you get it, the better," Hamaty says.

Treat symptoms right away

If you start to feel like you might be getting sick, don't ignore your symptoms. You might be able to lessen the duration or severity of a cold or the flu if you act fast. For example, treat nausea right away—before you start vomiting, which can cause dehydration. Anytime you don't feel well, Hamaty adds, you should drink plenty of fluids, because dehydration will elevate your glucose levels.

You should check your levels more often than usual while you're fighting a bug. Hamaty says the timing depends on the type of medication you take. Ask your doctor or diabetes educator before you get sick so you know what to do.

Don't skip meals, even if you don't have much of an appetite, or low blood sugar could become an issue. Certain diabetes medications can contribute to low blood sugar if you don't eat enough. "Get some calories to prevent low blood sugar," Hamaty says. "Drink fruit juice, if that's all you have. If you can eat a piece of fruit, that's great."

Also, avoid some over-the-counter medications. If you have a cough, pick a sugar-free remedy. For a stuffy nose, stick to antihistamines and skip decongestants, which can increase your blood pressure, Hamaty recommends.

Finally, review your diabetes education materials. "Sick days management is an important part of that education," Hamaty says. "The plans provided are a good guideline, but you may need some individual tailoring, which your doctor can provide."

WHEN TO SEE A DOCTOR

Your flu lasts more than a week, your symptoms worsen significantly or suddenly, or your fever goes over 101°F.

You have been vomiting, or have had diarrhea for longer than six hours.

Your blood sugar levels go above 240 despite taking extra insulin on sick days or, if you take diabetes pills, your blood sugar goes above 240 before meals and stays there for more than 24 hours.

You have high levels of ketones in your urine, symptoms of dehydration, or other serious complications, such as chest pain, trouble breathing, fruity-smelling breath, or dry, cracked lips and tongue.



JUTTA KLEE/GETTY IMAGES



Read [How Do I Manage My Blood Sugar When I'm Sick?](#) an article at WebMD.com.

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REVIEWED BY BRUNILDA NAZARIO, MD, WEBMD LEAD MEDICAL EDITOR

The Anti-Support Group

Signs someone is sabotaging you instead of supporting you

BY BARBARA BRODY

When you live with a chronic disease like diabetes, you want the right people in your corner. The best support system includes a few professionals (like your doctor and a certified diabetes educator), as well as some solid friends and family members you can lean on. But every now and then, someone in your trusted circle will say or do something that's more hurtful than helpful. Watch out for the following red flags.

Your spouse or partner is the diabetes police

You're at a cocktail party and he or she practically slaps your hand every time you reach for the hors d'oeuvres tray. The motive might be to assist you, but being so controlling "is not helpful, and it's a strain on the relationship," says Camilla Levister, a nurse practitioner and certified diabetes educator at Mount Sinai Diabetes Center at The Mount Sinai Hospital in New York. Remind your spouse or partner that you can eat anything provided you're smart about portions (which is for you—not him or her—to worry about).

Your mother wants to know if you've put on a few pounds

Such queries may come from a place of caring,



but if it drives you batty, put a stop to it. "Whether someone has diabetes or not, it's rarely appropriate to make comments about weight," says Levister. If your mom really wants to help you slim down, she should skip the preaching and make specific suggestions about how to get healthier together—whether that means offering to team up for an exercise class or check out a new healthy restaurant.

Your workout buddy keeps ditching your session

Sure, it's more fun to exercise with a partner, but you need to be on the same page. If you're lacing up your sneakers and he's urging you to blow off the gym and meet him at a cafe instead, you have a problem. Tell him that you're not willing to miss a workout, but if he's not interested in joining, you'd be happy to catch up afterward, says Levister. If this pattern continues, you'll want to replace him with a different workout buddy. You shouldn't be the only one doing the motivating.

They don't take your illness seriously

Whether your friend insists that type 2 isn't the "bad" kind of diabetes or your aunt pressures you to take a large slice of the pie she so lovingly baked, some people just don't get that you have a condition that requires you to stay on top of your health.

"You might need to learn to assert your needs, ideally in a way that doesn't turn into an argument," says Levister. "Don't assume that they'll eventually figure it out."

ASK YOUR DOCTOR OR DIABETES EDUCATOR

Can you recommend a support group that would be a good fit for me?

Do you know of any groups that welcome friends of people with diabetes?

What should I be doing that I'm not already to prevent my condition from worsening?

If I need help between appointments, how and when can I contact you?

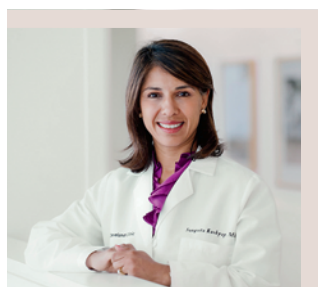


Join 500-plus convos in WebMD's Diabetes message board at WebMD.com.

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I have type 2 diabetes. Should I consider weight loss surgery?



Sangeeta Kashyap, MD
endocrinologist at the
Cleveland Clinic and
associate professor
of medicine at
Cleveland Clinic Lerner
College of Medicine

We recommend weight loss surgery for people with a body mass index of 35 or greater who haven't been able to lose weight and who can't control their type 2 diabetes even with insulin and other medications. We also consider other health issues related to weight, such as sleep apnea, high triglycerides, high cholesterol, and high blood pressure.

Losing around 15% to 25% of your body weight with weight loss surgery can be extremely therapeutic for people with diabetes. In fact, those who have surgery within five years of being diagnosed can see a reversal of their diabetes. Their blood sugar will normalize, and they'll be on little to no medication. If they're off their medicines for one year, we call that remission.

Not everyone is a good candidate for surgery. We have our patients undergo a very careful psychiatric and medical assessment first. Issues like substance

abuse, serious illness, and failure to stick with the program could prevent you from having surgery.

The most effective weight loss procedure for diabetes is a Roux-en-Y gastric bypass, which reduces the size of the stomach and bypasses

a lot more than you would with diet.

I always tell patients that weight loss surgery is a great start. It's going to get them losing weight, because they are going to start eating a lot less. But the patients who do best long-term are those

I always tell patients that weight loss surgery is a great start. But the patients who do best long-term are those who exercise.

part of the intestine so you can't eat as much. Another procedure is sleeve gastrectomy, in which the surgeon removes about 80% of the stomach. Gastric bypass can cause more side effects, such as trouble absorbing vitamins and minerals, which can put you at risk for conditions like kidney stones and osteoporosis. With sleeve gastrectomy, you'll lose a little less weight than with a bypass, but you'll still lose

who exercise. The surgery just forces you to eat less. People who are couch potatoes will lose weight initially, but they'll also have a tendency to pick up the weight eventually. Exercise is really critical to maintaining weight loss.



Check out [Weight Loss Surgery: What to Expect](#), a slideshow at WebMD.com.

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REVIEWED BY BRUNILDA NAZARIO, MD, WEDMD LEAD MEDICAL EDITOR



ASK YOUR DOCTOR

Q. Is my blood sugar in the right range?
A. In general, aim for 80 to 130 milligrams/deciliter (Mg/dL) before a meal, and less than 180 Mg/dL one to two hours after you eat.

Q. How often should I test my blood sugar?
A. Most people check before meals or two hours after they eat. Ask your doctor which testing interval is right for you.

Q. How can exercise affect my blood sugar?
A. Your body uses glucose more efficiently when you work out, which can make your blood sugar dip. Keep fast-acting carbs like sports drinks or glucose tabs close by.

Q. How can I keep my blood sugar under control?
A. Diet, exercise, and medication can bring your blood sugar into a healthy range. Lose excess weight if you need to.

High & Low Blood Sugar

Diabetes is a disease of high blood sugar (hyperglycemia), but it can also drop too low (hypoglycemia). Do you know how to spot the signs and deal with blood sugar swings?

QUIZ

- | | | |
|---|---|--|
| 1. You have hypoglycemia when your blood sugar dips below 70 Mg/dL.

___ Yes ___ No | 3. When your blood sugar is low, avoid refined sugar such as candy.

___ Yes ___ No | 5. Stress can raise your blood sugar.

___ Yes ___ No |
| 2. Symptoms of low blood sugar include shaking, chills, fast heartbeat, and weakness.

___ Yes ___ No | 4. Urinating less than usual is one sign of high blood sugar.

___ Yes ___ No | 6. If your blood sugar is high, you should drink less water.

___ Yes ___ No |

ANSWERS:

- 1. Yes.** Your blood sugar is considered low if it drops below 70 Mg/dL and you have symptoms. Yet everyone is different. Ask your doctor what range is optimal for you.
- 2. Yes.** You might also feel confused, light-headed, hungry, nauseated, or sleepy (although some people have no signs). Test your blood sugar to be sure.
- 3. No.** A tablespoon of sugar or piece of candy can bring your blood sugar back up to normal. Eat 15 grams of simple carbs, such as jellybeans, raisins, or juice, and repeat every 15 minutes as needed.
- 4. No.** Increased urination is a sign of high blood sugar, along with thirst, fatigue, and blurred vision.
- 5. Yes.** A tough day at work, getting stuck in traffic, and the stress on your body from a bad cold can all increase your blood sugar.
- 6. No.** Drink more water—at least eight glasses a day—to dilute the sugar in your blood and help flush it out of your body.

REVIEWED BY BRUNILDA NAZARIO, MD,
 WEBMD LEAD MEDICAL EDITOR

Sources: American Diabetes Association, Diabetes Action Research and Education Foundation, Joslin Diabetes Center, WebMD Diabetes Health Center



Rallying the Team

Not going it alone is key for managing my diabetes

BY TIM McRANDAL

Two years ago, I went fishing with my son and could barely walk with him upstream. I'd also noticed I was going to the bathroom a lot, and that I was exhausted. I'd come home in the middle of the day and go to sleep for an hour or two because I was so wiped out.

My doctor lives across the street, and, when I got home one day, he tested my blood sugar. It was 436. [Above 200 is generally considered an indication of type 2 diabetes.] He told me to go to the hospital. I went to the emergency room and was admitted.

I've been a wrestling and football coach all my life and somewhat of an athlete, but I never saw the diabetes coming. I had gained about 30 pounds in a month, which didn't seem right.

I was put on insulin and three other medications, including one for blood pressure. I was 50 years old, lying in the hospital thinking, "I'm not going to let this beat me. I'll beat it."

So I started doing research, working with my doctors, and went to the diabetes center at the hospital to develop a plan. I met my diabetes educator, and without someone like her, I wouldn't have known what to do.

I read that if you have a gut, you have to get rid of it. My waist size was 54 inches at the time. I knew I had to change my lifestyle. It wasn't a diet.

I gave up eating cookies and cakes and foods like that. I tested things I wanted to eat to see how they affected my blood sugar. Some foods didn't affect it at all. Those that did, I stayed away from or didn't eat as much of them.

I also worked out with a wrestling trainer to help me lose weight. He said, "We're going to work out nice and slow," to cut the weight properly. He started slowly, with me stretching and carrying a medicine ball, and told me to increase my physical activity.

For instance, instead of going to the mall and trying to find a parking space out front, I parked across the lot and walked. At work, instead of sitting, I got up and stretched, or put the phone on speaker and did knee bends, anything to keep my body moving. I joined a golf league and got more active that way.

Working with the doctors and the people at the diabetes center was like working with coaches. They're all on your team. Everything just started coming together, and I ended up dropping 70 pounds. Now I'm 52 and feel the best I've ever felt. I even play better golf. My lab results show my A1c went from 12 to 5.6. My pants size is now between 42 and 44.

I still keep an eye on my blood sugar levels, see my doctors every six months, and do my bloodwork. It's been a pretty awesome ride so far. It would have been a very scary road without all the people I met, my team.

TIM'S TIPS

Take baby steps. You don't have to give up all the foods you love, just eat them in moderation.

Diabetes can be very serious if you let it be. But if you work hard at it, you can manage it.

You can't do it by yourself. You have to have help. You need to keep in touch with your team.

Be proactive about your health. I go to every checkup now, for my feet, eyes, skin, blood work. Diabetes affects everything, and you have to stay on top of it.



Watch [How to Start Your Exercise Routine](#), a video at WebMD.com.

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