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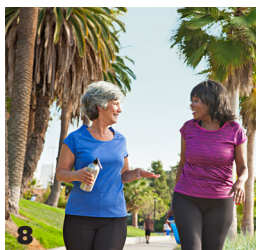


TIME TO VEG

Make healthy, delicious pizza or pasta for dinner tonight



Cover: Photography by Rick Lozier
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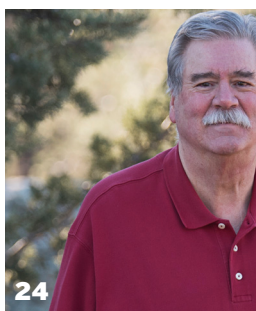
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47%

Percentage of Asian Americans who receive recommended diabetes screenings—the group least likely to be screened in the U.S.

Source: *Journal of General Internal Medicine*

BREAKTHROUGH FOR TYPE 1 DIABETES

Scientists may be closer to a cure for type 1 diabetes. Researchers at the University of Miami have learned how to manufacture healthy human pancreatic islet cells for transplantation into people with type 1. In a clinical trial, 48 people with type 1 underwent the experimental islet cell transplant. None of the test subjects had a bad reaction to the procedure. And a year after the test, most have improved in all areas of blood glucose control.

Source: *Diabetes*



FISH FACTS

A couple of weekly servings of oily fish such as salmon, mackerel, sardines, trout, and herring can greatly reduce the risk of diabetes-related vision loss called diabetic retinopathy. Oily fish is rich in omega-3 fatty acids, a nutrient that helps fight inflammation and disease in the retina. Researchers followed 3,482 older adults with type 2 diabetes for six years. For the ones who consumed the recommended 500 mg of omega-3 fatty acids daily, risk of developing diabetic retinopathy during the study period was almost 50% less than for those who didn't get the healthy fat.

Source: *JAMA*



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CALORIES

Amount a 150-pound woman burns while muscling groceries up the stairs for three minutes. Skip the elevator!

Source: USDA

Know Your Numbers

Newly diagnosed with type 2? Learn the basics of blood sugar testing

BY ERIN O'DONNELL

ASK YOUR DIABETES EDUCATOR

What blood sugar target range should I aim for?

If I stop testing my blood sugar, what will happen?

Can I send you my blood sugar logbook to review?

Can you recommend any apps or websites to use to record my blood sugar?



If you have type 2 diabetes, your health care provider may ask you to test your blood sugar levels, especially if you need daily insulin injections. “When you’re on insulin, there’s a risk of low blood sugar, which can be very dangerous,” explains Cara Harris, CNP, certified diabetes educator for Ohio State University Hospital East. Regular blood tests allow you to spot trends or problems and alert your health care provider to adjust your medication if necessary, she adds.

To check your blood sugar, you’ll use a glucometer—a device that pricks your finger, generating a tiny blood sample to test. “Most glucometers are pretty similar

nowadays,” Harris says, but she notes that some brands offer different features, such as the ability to test on areas of your body other than your fingers, or a way to record information about what you ate. If you need help choosing a meter, ask your diabetes educator, Harris says. Before you choose, she recommends checking with your insurance company; some insurers only cover certain models.

Many health care providers recommend that you check your blood sugar two to four times a day. Before you test, clean your skin with soap and water. “Sometimes patients will peel an orange and then test without washing their

hands first, and it can alter the results,” Harris says. If you don’t have immediate access to soap and water, you can use hand sanitizer, but allow it to dry before testing.

Each time you check your blood sugar, record your results. This allows you to review your numbers with your doctor or diabetes educator and spot any trends. “It’s not so much the checking that’s important, but what you do with the results,” Harris says. “Be sure to talk with your provider about what those numbers mean.” If your levels are too high or too low, it could be the result of your food choices, exercise, or medications, she says. Adjusting your routine may help you bring your numbers back into target range, usually between 80 and 130 mg/dl. (Your target may differ depending on factors such as your age, Harris notes.)

While some glucometers record test data, Harris recommends writing the information in a logbook or entering it in a digital app, which makes it easier to review and see potential problems. Harris says some of her patients have used free apps such as Glucose Buddy and mySugr.

REVIEWED BY BRUNILDA NAZARIO, MD, WEBMD LEAD MEDICAL EDITOR

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HELP FOR SEASONAL ALLERGIES

Pharmacist and certified diabetes educator Lisa Rivera, RPh, offers these tips to ease allergy symptoms without medication:

Take off your shoes and change your clothes when you get home to keep pollen and other outdoor allergens off your furniture and rugs.

Use a sinus rinse to keep your nasal passages clear of allergens.

Use a saline nasal spray to help prevent inflammation and irritation in your nose.

Try using a cool mist humidifier to help you breathe easier.

➔ Search for the slideshow 12 Natural Ways to Defeat Allergies at WebMD.com.

Sneeze Patrol

Smart strategies to help you deal with allergies

BY SONYA COLLINS

You may be an old pro when it comes to dealing with seasonal allergies, but now that type 2 diabetes is in the picture, you might need to make some adjustments to your allergy treatment, too.

“When you’re trying to control your diabetes with diet and physical activity, it’s important to know that many of the medications you might take for seasonal allergies can impact your appetite and desire to get up and get moving,” says Lisa Rivera, RPh, a certified diabetes educator and pharmacist in metropolitan Dallas-Fort Worth.

Some antihistamines can make you sleepy, so you might not feel like going to the gym or preparing a healthy meal. Look for non-drowsy antihistamines so you can keep up with your routine.

Nasal decongestants might suppress your appetite. While your diabetes plan might call for weight loss, “you don’t want to skip meals,” says Rivera. “That sends your blood sugar up and down rather than keeping it constant, which is what you want.” If decongestants steal your appetite, try a lower dose or take them less frequently.

Sometimes a runny nose can drain down your throat and cause a phlegmy cough. But beware: Cough suppressants can also kill your appetite. What’s more, the thick syrups may contain hidden sugar. “The label won’t tell you how many grams of sugar are in a teaspoon, so you can’t do any carb counting,” said Rivera. Ask your pharmacist about sugar-free or diabetes-friendly cough syrup.



Masking more serious symptoms

Unexplained blood sugar spikes can be a sign that seasonal allergies have escalated to an infection that needs a doctor’s attention. But some people who are newly diagnosed with type 2 diabetes don’t check their blood sugar every day. Allergy medications can mask other signs of infection, so it might be a good idea to monitor your blood sugar while you’re taking medication.

Impact on other conditions

Before you buy an over-the-counter allergy medication, ask the pharmacist if it’s safe to take with your other medications or conditions. Most people with type 2 diabetes have at least one other chronic condition, such as high cholesterol, high blood pressure, or depression. Allergy medications typically won’t interfere with any diabetes medications you may take, but could interfere with other drugs or conditions. Nasal decongestants, for example, can raise your blood pressure.

Treat only your symptoms

Seasonal allergies can cause a runny nose, watery eyes, sneezing, congestion, and coughing. If you don’t have all of these symptoms, don’t treat them all. Because allergy medications can bring unwanted side effects, only take those you need.

REVIEWED BY AREFA CASSOOBHOY, MD, MPH, WEBMD MEDICAL EDITOR

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Tailor-Made

Exercise is a proven tool for managing diabetes. But when it comes to a fitness routine, find your own sweet spot

BY KARA MAYER ROBINSON

EXPERT TIPS

Try these get-fit tips from endocrinologist Gregory B. Dodell:

Try an assortment of workouts. They'll engage different muscles and challenge your body in different ways.

Alternate days. "Do yoga on one day, Zumba on another, and maybe use the elliptical on another day," says Dodell.

Do strength training. Build muscle with resistance bands or light weights, or take a class a few times a week.

Ban the gym (if you don't like it). Find things you enjoy that also get you moving. Take the stairs or a brisk walk, or try yoga.



Exercise lowers your blood sugar, helps your body use insulin better, and helps your cells turn glucose into energy. But all workouts may not be created equal. New research suggests that good timing and logging enough minutes can maximize your benefits.

Get your timing right

Working out after meals—especially dinner—may be prime time for getting glucose levels on target.

In a recent study published in *Diabetologia*, people with type 2 diabetes saw bigger improvements in blood sugar levels when they walked after meals. The results were most

dramatic in the evening. A separate study in the journal *Diabetes Care* found that one to two hours after eating was the sweet spot.

Want similar results? Take a walk an hour after dinner. If you sit down for lunch at noon, sign up for a 2 p.m. yoga class.

But don't try to squeeze a square peg into a round hole, says Gregory B. Dodell, MD, an assistant professor of endocrinology at the Icahn School of Medicine at Mount Sinai. "Do what's right for you," he says. If you lack a certain get-up-and-go later in the day, try a morning workout.

Aim high (enough)

The same *Diabetes Care* study also found that people who exercised longer had heftier decreases in blood glucose. The longer they sweat it out, the better. As they went from 10 minutes to 30 minutes and more, their levels kept improving.

Dodell says exercising as much as you can is best—but respect your limits. If you're not up for an intense cycling class, that's fine. "A brisk 20-minute walk will still have a positive impact on glucose values," he says.

Breaking up exercise into bite-size chunks may be most successful in the long run, he adds. It's good for recovery and gives your body more chances to benefit from being active.

A good weekly target is 150 minutes of moderate cardio exercise. If you're crunched for time, you can get the same benefits in half the time by pumping up the intensity and doing a total of 75 minutes a week. Try brisk walking, dancing, tennis, biking, or just about anything that gets your heart pumping. Tack on a couple of days of strength training, too. "The more muscle that we have, the better we process calories," Dodell says.

Dodell isn't a fan of setting minimums and maximums, which often backfire. "If people feel that they can't meet those requirements, they're likely to skip that day." That, of course, defeats the purpose.

➔ Search for the slideshow **Sneak Exercise Into Your Day** at WebMD.com.

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



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ASK YOUR DOCTOR

1. Should I check my blood sugar before I go to sleep?

If you take certain medications, such as insulin, you might need to adjust them before you go to sleep.

2. What should I do if foot pain keeps me up?

Prescription medication for neuropathy may help, though some can cause daytime sleepiness. Ask your doctor about the best choice for you.

3. Do I need a sleep study?

When your doctor suspects sleep apnea, the answer is usually yes. You might be able to do the study at home instead of in a lab.

4. Where can I go for more help?

You may need a referral to a specialist in sleep disorders or a therapist trained in cognitive behavioral therapy for insomnia.

Better Rest

Diabetes and sleep issues often go hand in hand

BY BARBARA BRODY

You're careful about carbs, try to stay active, and take your meds as prescribed. While those measures are crucial to managing type 2 diabetes, you might be forgetting about another piece of the puzzle: quality sleep.

While sleep issues are quite common—one in three Americans say they don't get enough—you shouldn't dismiss them. Good sleep is vital for good health, and a number of sleep problems have been linked to diabetes. If you have any of the following symptoms, be sure to discuss them with your doctor.

Your partner says you snore. While annoying for others within earshot, snoring isn't worrisome. However, the catch is that it's often a sign of obstructive sleep apnea.

As many as 40% of people with diabetes have this dangerous condition in which you stop breathing for several seconds at a time. Those pauses between breaths make your oxygen levels dip, which raises your risk of heart disease and can interfere with your body's ability to produce and properly use insulin, says Neomi Shah, MD, a pulmonary, critical care, and sleep medicine specialist at The Mount Sinai Hospital in New York.

You may need a special device, called a continuous positive airway pressure (CPAP), to keep your airways open.

You toss and turn because of discomfort in your legs or feet. Diabetic neuropathy



(nerve damage) can be so painful that it keeps you up or wakes you during the night.

People with type 2 diabetes also have an increased risk of restless legs syndrome, a condition that might make you feel like something is crawling on your legs or that you just have to wiggle them around when you lie down. Lifestyle changes like stretching and limiting caffeine, as well as medication, can help.

Anxious thoughts keep you awake. "Stress is very closely tied with insomnia," says Shah, and having to manage a chronic condition like diabetes can be nerve-racking. Excess stress may also take a toll on your glucose levels and sometimes leads to depression, which can worsen your condition. Connecting with others who have type 2 diabetes, perhaps through a support group, may help.

You wake several times during the night to use the bathroom. If you always have go during the night, your blood sugar may be too high. Or you might have a urinary tract infection, a prostate problem, or obstructive sleep apnea (which has been linked to nighttime bladder issues). See your doctor to sort it out.

➔ Search for the video **How to Fall Asleep Quickly** at WebMD.com.

REVIEWED BY BRUNILDA NAZARIO, MD, WEBMD LEAD MEDICAL EDITOR

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TIME TO VEG

Slash carbs and boost flavor with this veggie-loaded pizza and pasta



PHOTOGRAPHY: RICK LOZIER; FOOD STYLING: SUE MOSS

By Kerri-Ann Jennings

Reviewed by Hansa Bhargava, MD,
WebMD Medical Editor

Cauliflower-Crusted 'Pizza'

Finely chopped cauliflower provides a virtually carb-free base for your favorite pizza toppings. While not an exact replica of pizza crust, it does give you a reason to feel good about eating pizza on any night of the week. And it packs a whopping three cups of vegetables per serving, so think of it as a salad alternative—perfect for still-chilly spring nights. Get as creative as you like with toppings. **SERVES 2**



➔ For more recipes, search for the [Healthy Recipe Finder](#) at [WebMD.com](#).



1 small head of cauliflower, outer leaves removed
1 egg, whisked lightly with a fork
½ tsp dried oregano
14 oz can crushed, unsalted tomatoes
1 tbsp finely minced fresh basil
½ tsp dried oregano
1 tbsp olive oil, divided
4 oz shredded part-skim mozzarella
3 cups arugula

Preheat oven to 425°F. Line a cookie sheet with parchment paper and set aside.

Break cauliflower into pieces and chop in a large food processor until finely ground. Transfer to a microwave-safe bowl and heat for 4 minutes. Pour onto a clean kitchen towel and let cool for several minutes. When cool enough to handle, take up the edges of the kitchen towel and squeeze the liquid out of the cauliflower.

Scrape cauliflower into a clean bowl, add egg and oregano, and stir to combine. Spread cauliflower mixture into a rectangle shape on the prepared cookie sheet. Bake for about 20 minutes, or until cauliflower begins to brown.

Meanwhile, add tomatoes, basil, oregano, and ½ tbsp olive oil to the food processor and puree into a sauce.

Remove cauliflower crust from oven. Spread tomato sauce over the crust, then cover with mozzarella and arugula. Return to the oven for another 2 minutes, or until cheese is melted. Remove from oven, drizzle with remaining olive oil, and serve.

Per serving: 317 calories, 22 g protein, 19 g carbohydrate, 19 g fat (8 g saturated fat), 118 mg cholesterol, 455 mg sodium, 7 g fiber, 10 g sugar. Calories from fat: 54%

Pasta with Zucchini Noodles and Almond-Mint Pesto

Grated zucchini noodles double the volume of this flavorful pasta dish, which uses just under a full pasta serving per person. For an ultra low-carb version, replace all of the pasta with long, curly zucchini “pasta,” made with a vegetable spiralizer. Otherwise, grating the zucchini lengthwise with a box grater works just fine—just be careful not to cut yourself. The bright almond-mint pesto brings lots of fresh flavor to the dish. **SERVES 2**

1 cup loosely packed fresh mint leaves
¼ cup toasted unsalted almonds
Juice and zest of ½ small lemon
Pinch of kosher salt
1 tbsp olive oil plus 1 tsp olive oil
½ tbsp water

3 oz gemelli or other short pasta shape
1 large zucchini, spiralized or
grated lengthwise
1/2 cup peas (can use frozen)
Chili flakes to taste
2 oz feta cheese



In the bowl of a mini food processor, place the mint, almonds, lemon juice, lemon zest, and a pinch of salt. Pulse until finely chopped. Scrape down the sides, add 1 tbsp olive oil and pulse again. Add water; pesto should become a thick, spreadable paste.

Cook pasta according to package directions, but remove with two minutes remaining to cook. Heat 1 tsp olive oil in a large skillet over medium-high heat, and add zucchini and peas.

Cook for one minute. Add pasta, use tongs to toss, and sauté for two minutes more. Remove from heat, add mint pesto, and toss until pasta is coated. Transfer to serving bowls and sprinkle with chili flakes and crumbled feta.

Per serving: 413 calories, 15 g protein, 48 g carbohydrate, 20 g fat (4 g saturated fat), 13 mg cholesterol, 337 mg sodium, 9 g fiber, 6 g sugar, Calories from fat: 43%

Age Well

Awareness is the first step to better health

BY MATT McMILLEN

One in four Americans older than 60 has diabetes, and as they age, healthy lifestyle choices and self-care become more essential.

“Whenever you talk about aging with diabetes, heart disease is at the top of the list,” says endocrinologist Robert Courgi, MD, a diabetes specialist at Northwell Health’s Southside Hospital in Bay Shore, New York. “Just having diabetes increases your risk of a heart attack by a significant factor.”

High blood pressure and high cholesterol—common with diabetes, especially in older adults—also contribute to other serious diabetes complications, such as kidney disease, stroke, and vision loss.

Fortunately, small changes can lead to significant improvements. According to a new study, simply standing up occasionally rather than sitting all day can improve blood sugar control. Add in a short walk, and you’re on your way to better glucose control.

“You don’t need to do lots of intense exercise,” says Courgi. “What you need to do is get up off the couch and walk around the block. It doesn’t take much exercise to see benefits, but you’ve got to do something you like or you won’t do it.”



Your diet likely needs adjustments as well. Shrink your portion sizes, says Courgi, but be sure that you get enough nutrition. “Malnourishment is much more common than you think,” he says, “because you lose hunger as you age.”

Focus on fruits and vegetables and lean proteins, and reduce the carbohydrates in your diet. But don’t make the mistake of trying to change everything all at once. “Unrealistic expectations will set you up to fail,” says Courgi. “I recently had a diabetes patient who wanted to lose 50 pounds. I said, ‘Lose five pounds first and go from there.’”

You may also need to plan additional trips to the doctor. “Once every three months is not enough for someone whose diabetes is not well controlled.”

ASK YOUR DOCTOR

What are my numbers?

Your A1c, an average of your glucose level over two to three months; your blood pressure reading; and your LDL, or bad, cholesterol are important numbers to track, says Robert Courgi, MD.

Do my medications have side effects and do they interact well?

Physicians rarely spend enough time on medications’ risks, benefits, and alternatives, says Courgi. Make sure you—and your doctor—know all you should about what you take.

Am I at risk of low blood sugar?

Older patients on multiple medications have a higher risk of hypoglycemia, or low blood sugar, says Courgi. The disorientation that may result can cause serious accidents.

What about eye exams?

As you age, your risk increases for eye problems such as cataracts, glaucoma, and diabetic retinopathy. See an eye doctor once a year.

ASK YOUR DOCTOR

Q. How can I prevent diabetes complications?

A. Keep your blood sugar within a healthy range. Ask your doctor how often you should test your levels.

Q. Which specialists do I need to see?

A. Because diabetes affects so many parts of your body, you might need to visit other doctors besides your endocrinologist. You may also see a podiatrist, cardiologist, eye doctor, and dermatologist.

Q. What tests do I need?

A. Schedule regular checks for blood sugar, blood pressure, and cholesterol levels. You should also get routine kidney tests and eye and foot exams.

Q. What warning signs should I look out for?

A. Vision changes, numbness or tingling in your hands or feet, sores on your skin, and swelling are all signs you need to see your doctor about possible complications.



How Diabetes Affects Your Body

Chronically high blood sugar takes its toll on every organ and system in your body, from your head to your feet. Do you know these signs of diabetes complications?

QUIZ

1. You have floating spots in your vision.

☐ Yes ☐ No

3. You have high blood pressure.

☐ Yes ☐ No

5. You've gained weight and/or your ankles are swollen.

☐ Yes ☐ No

2. You have red, itchy patches on your skin.

☐ Yes ☐ No

4. You have heartburn or a swollen belly.

☐ Yes ☐ No

6. You have numbness, weakness, and/or tingling in your hands or feet.

☐ Yes ☐ No

ANSWERS

1. Diabetes damages blood vessels that feed the light-sensitive tissue—the retinas—in the back of your eyes. Diabetic retinopathy is the No. 1 cause of vision loss in people with diabetes.

2. Diabetes leaves you more vulnerable to bacterial and fungal skin infections. Wash and dry your skin well every day. Watch for redness, itching, and raised areas of skin, and report them to your dermatologist.

3. Two in three people with diabetes have high blood pressure, which puts them at risk for heart disease and stroke. Limit salt, exercise daily, and quit smoking. Take blood pressure medications as directed and talk to your doctor about daily aspirin use.

4. Diabetes can damage the nerve that helps food move through your stomach. As a result, your stomach won't empty as quickly as it should after you eat, leaving you bloated and feeling the burn.

5. Millions of tiny blood vessels in your kidneys filter wastes from your blood into your urine. Diabetes can damage these vessels and prevent them from filtering properly, causing your body to hold onto extra fluid.

6. High blood sugar damages blood vessels that supply nerves in your hands and feet, leading to nerve damage called diabetic neuropathy. Check your feet daily for signs of an injury you might not feel.

Focus Time

What it took for me to finally get serious about diabetes

BY JOSEPH REDFERN

JOE'S TIPS

“Get educated. Talk to your doctor. Go online. Ask if your local hospital has diabetes classes. Join a support group.”

“Don’t get down on yourself. When you’re sick or stressed, your blood sugar’s going to be higher. Don’t measure yourself by your numbers.”

“Read food labels. I pay attention now. I look to make sure something is low in carbs and not high in salt.”

In 2003, I was 57 and needed to have neck surgery. When I checked in at the pre-op, the doctor ran a blood glucose test and said I had diabetes. I couldn’t believe it. My blood sugar was almost 400, and although I had classic symptoms—excessive thirst, blurry vision, and dizziness at times—I didn’t really put it together. I was also overweight and ate a lot of carbs.

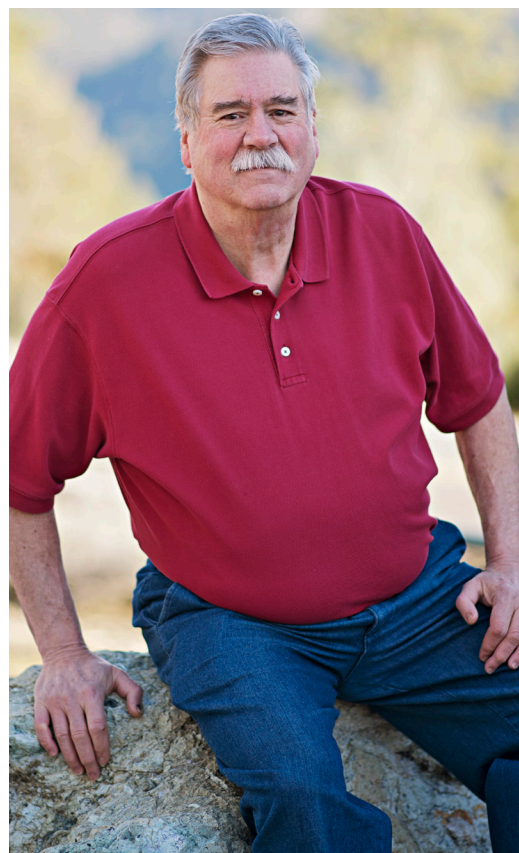
After my surgery, the staff showed me how to take my blood sugar readings four times a day, gave me a binder with some information, put me on two medications, and away I went.

I had a hard time accepting having diabetes. People often fight change, and I was one of those people. I bounced around for a while. I’d be doing well regulating my diabetes. Then I wasn’t.

When I moved to Paradise, California, I started going to the Veterans Affairs clinic, and they tried to help me. They put me on medication for my high blood pressure. I’d lose a certain amount of weight, but I wasn’t where I wanted to be. Eventually I went on insulin.

My blood sugar shot up to around 300, and I got scared and tried exercising to bring it down. I’d walk a little a few times a day. But my back was hurting, and I wasn’t really paying attention and doing all the stuff I needed to do.

One day I went to a new doctor and saw pamphlets called “Diabetes Survival Camp.” It really struck a nerve. I signed up and took diabetes education classes. Right away I got enthused. My diabetes educator and rest of the staff were great motivators.



I committed myself to getting into a real regimen. The classes talked about nutrition and exercise and how they go hand in hand.

Something really clicked. My A1c started coming down. I’ve lost over 35 pounds and [have been] able to keep it off. Now I go for walks in the park, or go to the mall and park my car far away. I measure my food. I eat a lot of fresh vegetables, more salads, organic turkey breast, and not a lot of red meat. I feel more peppy. I even joined a support group and go once a month.

I just turned 70, and I’m in a good place. I’ve been off insulin for a few months and am slowly cutting down on my other meds. I’m really happy and proud of my progress. For me, I had to take responsibility and get motivated.

➔ Search for the article **What NOT to Say to Someone With Type 2 Diabetes** at WebMD.com.

REVIEWED BY AREFA CASSOOBHOY, MD, MPH., WEBMD MEDICAL EDITOR

Seven Super Foods

Create healthy meal plans with these nutritious choices

BY JENNIFER D'ANGELO FRIEDMAN



When you have type 2 diabetes, what you choose to eat not only helps stave off hunger but also can prevent spikes in your blood sugar.

These seven foods can help keep your blood sugar in check and are smart choices for your overall health, too, explains Maggie Powers, PhD, a registered dietitian and president of health care and education at the American Diabetes Association.

1. Raw, cooked, or roasted vegetables

These add color, flavor, and texture to a meal. Choose low-carb veggies like mushrooms, onions, eggplants, tomatoes, Brussels sprouts, and low-carb squashes, like zucchini. Try them with dip, such as a low-fat salad dressing, hummus, guacamole, and salsa, or roast them with seasonings like rosemary, cayenne pepper, or garlic.

2. Greens

Give lettuce a break and try kale, spinach, and chard. They're healthy, delicious, and low-carb, Powers says.

And don't just stick to salads. Roast kale leaves in the oven with olive oil for quick, crunchy chips. You can also mix greens with roasted veggies to add texture and flavor, or serve them with a little protein, such as grilled chicken.

3. Flavorful, low-calorie drinks

Plain water is always good, but water infused with fruits and vegetables is more interesting. Cut up a lemon or cucumber and put it in your

water, or make ice cubes with pieces of fruit or other flavoring in them.

Or try cold or hot tea with lemon or a cinnamon stick. "Not only are these beverages low-carb, they can also help fill you up so you don't crave other foods," Powers says.

4. Melon or berries

Did you know that one cup of either melon or berries has just 15 grams of carbs?

For a twist, mix the melon or berries with plain yogurt, or freeze them in ice cubes to flavor water.

5. Whole-grain, higher-fiber foods

Fill up on whole grains to keep from overeating or choosing the wrong foods. Besides breads, try legumes like dried beans, peas, and lentils. Or enjoy black bean-and-corn salsa with raw vegetables.

6. A little fat

Good fat choices include olive oil, avocado, and fatty fish—think salmon served on a bed of lettuce, for example. Bonus: The fat from the fish serves as a dressing for the salad, Powers says.

7. Protein

Powers recommends Greek yogurt, cottage cheese, eggs, and lean meats. And don't forget treats. "Peanut butter on a celery stick is a good fat-and-protein mix for a healthy, satisfying snack," she says. You can also snack on a lower-fat cheese stick or a piece of beef jerky—but keep an eye on how much sodium each contains, she says.

ASK YOUR DIABETES EDUCATOR

What are some nutritious snacks I can eat?

Which foods should I eat sparingly?

Can you help me create meal plans that incorporate my favorite healthy foods?

How often should I eat during the day?