Movable Feast
'Tis the season to enjoy delicious foods—the healthy way
pg. 6
**HOT TOPICS!**

**WHAT YOU NEED TO KNOW ABOUT DIABETES**

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**A Better Whey**

Whey protein powder may help control blood sugar after a meal. In a study of 15 adults with type 2 diabetes, those who drank 1.75 ounces of whey protein dissolved in 8.5 ounces of water before a high-glycemic index breakfast had far lower blood sugar than their peers after the meal.

*Source: Diabetologia*

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**Water Works**

Do you have frequent urinary tract infections (UTIs)? They may be related to diabetes. A new study of about 180,000 people—half newly diagnosed with type 2 diabetes and half without diabetes—found that those with diabetes were 50% more likely to have a UTI at any time during the study period. People with type 2 diabetes might need to consider UTI prevention a part of their self-care. One of the best ways to prevent the infections is to drink plenty of fluids to flush the body of potentially harmful bacteria.

*Source: Journal of Diabetes and Its Complications*

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**Mind Matters**

Your diabetes medications do more than you think. Prescription pioglitazone could help protect against dementia. In a study of more than 145,000 people age 60 and up, those who took pioglitazone for three months or more were less likely to develop dementia than their peers over the six-year study period. Every three months of prescription use cut people’s overall risk of dementia by half. Researchers believe the drug brings this added benefit because it helps prevent inflammation of the brain.

*Source: Alzheimer’s Association International Conference*

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**30%**

**INCREASE IN TYPE 2 DIABETES AMONG U.S. CHILDREN & TEENAGERS IN THE PAST EIGHT YEARS**

*Source: American Medical Association*

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**50%**

**DECREASE IN STROKES AMONG ADULTS OLDER THAN AGE 65 IN THE PAST 20 YEARS. THIS IS MOST LIKELY BECAUSE OF BETTER PREVENTION, ESPECIALLY BETTER BLOOD PRESSURE CONTROL.**

*Source: American Medical Association*
"’Tis the season. Cold and flu season, that is. And those illnesses require a few extra precautions for people with diabetes, says Sacha Uelmen, RD, CDE, director of diabetes education for the University of Michigan Health System. She shares her top tips for staying healthy and for recovering quickly if you do get sick.

Focus on prevention. Take commonsense steps to avoid illness in the first place: Get a flu shot, make time for sleep, eat plenty of fruits and veggies, and take a daily multivitamin, Uelmen says. The single most important step is to wash your hands regularly—most viral and bacterial infections are transmitted by touch. Uelmen recommends using warm water and soap instead of hand sanitizers, especially before testing blood sugar. In her work with her patients, she has found that hand sanitizers can skew finger-prick results.

Test, test, test again. If you do get sick, test your blood sugar frequently, every three to four hours. Fighting a virus stresses your body, “and any stress to the body can raise your blood sugar,” Uelmen says. Elevated blood sugar levels are typical, but she says some people have low blood sugar if they eat less while sick. Talk to your doctor, nurse, or diabetes educator if you need advice about adjusting your insulin dose. If you have type 1 diabetes, test your ketones while you’re ill. High ketones can be a sign of diabetic ketoacidosis, a potentially serious complication.

Stay hydrated. Anyone with a cold or flu should drink more fluids such as water and herbal teas. But that’s especially important for people with diabetes because high blood sugar can trigger dehydration.

Plan for the season. “We recommend all patients with diabetes talk to their doctor, diabetes educator, or nurse before they get sick, and make a plan,” Uelmen says. Ask questions. If you’re vomiting, for example, should you keep taking your pills or insulin? Is there a particular blood sugar level that should trigger a call to your doctor? Are there any symptoms, such as fever higher than 101 degrees, that he or she wants to hear about? Should you keep certain supplies, such as over-the-counter medicines, on hand in case of illness? “Planning ahead is always the best policy,” Uelmen says.

Reach for different fuel. In the event nausea or congestion is preventing you from eating and your blood sugars are too low, you might benefit from foods that you would normally avoid, such as regular popsicles or even full-sugar soda, Uelmen says. Talk with your diabetes educator if you need guidance about what to eat while sick.

Don’t panic. Some patients react to cold or flu symptoms by immediately scheduling a doctor visit. That’s rarely necessary, Uelmen says. If you’re truly concerned, give your practitioner a call. But “if your blood sugars look good and you’re not dehydrated, you’re likely to manage it well on your own,” she says.
Eating well when you have diabetes can feel challenging, but it might be easier than you think. Good nutrition is not just about temptation or willpower. The real issue may be misinformation. You can make smart choices without giving up all your favorite foods—you just need to know the truth behind these common myths.

**Myth:** You must follow a special diabetes diet.

**Truth:** A standard diabetes diet does not exist. Some people with diabetes count carbs, but others don’t. If you’re overweight, one of your main goals should be to slim down, and you can do that in many ways.

“Many popular diet plans—such as Weight Watchers or The Zone—can help you lose weight. And the more you lose, the more you’ll improve your blood sugar levels,” says Michael L. Dansinger, MD, director of Tufts Medical Center’s Lifestyle Coaching for Diabetes Weight Loss program in Boston and the nutrition adviser for NBC’s The Biggest Loser.

**Myth:** “Diabetes-friendly” and “sugar-free” foods are good for you.

**Truth:** That box of sugar-free cereal on the grocery shelf might not be any better for you than the regular cereal next to it, though the so-called diabetes version probably costs more.

Sugar-free foods often contain plenty of calories and even carbs, so always check nutrition labels closely. You’ll also want to scan ingredient lists for sweeteners such as sorbitol, mannitol, and xylitol, which may upset your stomach, says Carolyn Brown, MS, RD, a nutritionist at Foodtrainers in New York City.

In general, limit all processed foods. Instead, fill up on a variety of fruits and vegetables, lean beef, poultry, fish, and low-fat dairy products.

**Myth:** People with diabetes can’t eat any sweets.

**Truth:** Yes, you can order dessert! Of course, it’s not wise to end every meal with chocolate cake or indulge in ice cream daily. But it’s perfectly fine to include a small serving of sweet food in an otherwise healthy eating plan, as long as you take into account the calories and carbs you ate that day.

“You’ll go crazy if you limit yourself too much,” Brown says. She urges her clients to satisfy their sweet tooth with fruit on a daily basis but says it’s OK to splurge a little once a week, as long as you get right back on track.

Dansinger agrees. He notes that most weight-loss plans allow for some wiggle room. “You can be strict 90% of the time,” he says. “All of my patients eat some sugar and some starch. Living life to the fullest has to include some treats.”

**Myth:** People with diabetes shouldn’t eat potatoes.

**Truth:** They’re high in carbs, but you can still enjoy them in moderation. You can also eat other carb-rich foods, such as pasta, bread, and rice—but watch how much and don’t go overboard.

“A serving of potatoes should be the size of your fist,” Brown says. Since many spuds are large, plan to eat half at a time. Baked potatoes are healthy, but sweet potatoes are even better: “They have more nutrients, including beta-carotene, which gives them their color,” she says. And eat the skin, which is a great source of fiber.
When you have diabetes, few places are more perilous than the holiday party buffet line. Navigating the platters of pigs in blankets, mayonnaise-drenched dips, and gooey pastries is an extreme test of willpower. You don’t have to turn down every party invite, but you do need to establish a few strategies between now and New Year’s to get through the festivities with your diet intact and your blood sugar stable.

Don’t Go Hungry
To prep for a dinner party, you might consider skimping on breakfast and lunch. Bad strategy. “You don’t want to go to a party and test your willpower when you’re crazy hungry,” says Jill Weisenberger, MS, RDN, a registered dietitian and certified diabetes educator based in Newport News, Va., and author of Diabetes Weight Loss—Week by Week. Starving yourself will send your blood sugar into a nosedive and erode your self-control. A better approach is to eat breakfast and lunch, plus a little something before you leave for the party. She recommends a high-protein, low-carb snack such as nuts, or vegetables with hummus, to prevent hunger pangs.

Wear Something Snug
In a big, flowing dress or loose pants, you won’t be able to tell when you overeat. Instead, Weisenberger suggests wearing slimmer-fitting clothes. That way, you’ll feel the tightening the moment you’ve had too many hors d’oeuvres.

Bring a Dish
You can’t control the food offerings unless you bring something (call or email your host first to ask if it’s OK). An assortment of vegetables with a healthy dip is a good option—it’s filling and low in carbs. “Another idea might be something like shrimp [cocktail] because that also has little or no impact on blood sugar, and it’s relatively low in calories,” Weisenberger says.

Make Trade-Offs
If you love sweets, you don’t have to skip the dessert table. “No food is off-limits,” Weisenberger says. But you can’t eat heavy appetizers, plus dinner, plus dessert. You need to make choices. Are you going to eat the sliders or the pie? Once you’ve chosen, keep an eye on portion sizes. You don’t want to overdo it.

Don’t Drink Your Carbs
“Watch what you’re drinking at the party. The calories and the carbohydrates can be very high,” Weisenberger advises. A 12-ounce can of cola contains 39 grams of sugar and 39 grams of carbs. That’s almost as many carbs as you should eat in an entire meal. Instead of soda, drink tomato juice or a glass of seltzer with lime. If your doctor says it’s safe for you to drink alcohol, stick to the serving size—5 ounces of wine, 12 ounces of beer, or 1.5 ounces of 80-proof liquor. Stay away from the bar entirely if your blood sugar isn’t under good control.

Get Back on Track
No one’s perfect. If you overdid it at a holiday party, start thinking about how to recoup your losses. “Decide what you’re going to do tomorrow, and what you’re going to do the next time at a party so it doesn’t happen again,” Weisenberger says. Set positive goals for yourself—like adding a cup of green vegetables at lunch and dinner the next day. You can also atone for the extra calories you consumed by adding a walk to your daily routine. Exercise not only helps you shed the weight you gained, but also helps your body control your blood sugar more efficiently.
Movable Feast

'Tis the season to enjoy delicious foods—the healthy way

From family feasts to seasonal cocktail parties, tempting food seems to be everywhere you turn during the holidays. While it takes some extra effort to enjoy the food-focused celebrations without paying for your indulgences later, you don’t have to go overboard. With a few simple strategies, you can plan ahead to avoid weight gain and keep your blood sugar levels on track.


“That can often save you from escalating blood sugars during the holidays.”

Ideally, figure out your carbohydrate budget before the holidays by monitoring how many carbs are in a meal and then measuring your blood sugar two hours after. Most women need between 30 and 45 grams of carbohydrates per meal, while men can sometimes go up to 60 grams per meal. Also, keep an eye on saturated fat and sodium; both can contribute to heart disease, Brown-Riggs says.

By Kerri-Ann Jennings

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Celery Root-Potato Mash

Celery root, also called celeriac, is a so-called “skinny starch.” Low in carbohydrates (9 grams per cup), it cuts the carb load and imparts a fresh celery flavor to classic mashed potatoes. 

Makes 8 servings

Ingredients

- 2½ lbs russet potatoes, peeled and cut into chunks
- 1 lb celery root, peeled and cut into chunks
- 1 tbsp unsalted butter, softened
- 1 tbsp olive oil
- ¼ cup light sour cream
- ½ tsp onion salt
celery leaves, for garnish

Directions

1. Place potatoes and celery root in a medium pot and cover with water. Bring to a boil, and simmer until potatoes and celery root are tender, about 25 minutes. Drain, reserving some of the cooking liquid.

2. Press vegetables through a ricer into a mixing bowl. Add butter, oil, sour cream, and onion salt and mix. Thin, if desired, with the reserved cooking liquid. Garnish with celery leaves.

Per serving

161 calories, 3 g protein, 24 g carbohydrate, 7 g fat (3 g saturated fat), 10 mg cholesterol, 4 g fiber, 3 g sugar, 120 mg sodium. Calories from fat: 36%
Pomegranate Panna Cotta

This pretty panna cotta takes some planning, since it needs to completely cool before layering, but it takes surprisingly little hands-on effort. The single-serving cups keep portions in check. (Panna cotta will work with lower-fat dairy, but will be less rich-tasting and a little looser. Go full-fat and stick to one serving.)

Makes 8 servings

Directions

1. To make the panna cotta layer, place ¼ cup water in a small bowl. Stir in 2½ tsp powdered unflavored gelatin and set aside until gelatin softens, about 15 minutes.

2. In a large bowl, whisk yogurt and half-and-half.

3. In a small saucepan, combine milk and sugar and bring to a simmer. Stir in water-gelatin mixture and remove from heat. Whisk this mixture into the yogurt mixture, then stir in orange blossom water.

4. Let cool for half an hour before pouring into eight 6- to 8-oz glasses or glass ramekins. Continue to cool in the refrigerator until completely set (at least 4 hours).

5. To make the pomegranate jelly layer, stir ¼ cup hot water and 1½ tsp powdered unflavored gelatin together until gelatin dissolves. Pour pomegranate juice into the mixture and stir. Set aside to cool for one hour.

6. When the panna cotta layer has firmed, pour a layer of pomegranate gelatin over each panna cotta and let set in refrigerator until firm. You can make this up to two days before serving. When ready to serve, sprinkle pomegranate seeds to garnish.

Per serving
160 calories, 7 g protein, 18 g carbohydrate, 7 g fat (4 g saturated fat), 24 mg cholesterol, 16 g sugar, 51 mg sodium.

Calories from fat: 38%

Ingredients

Panna cotta layer
- ¼ cup water
- 2½ tsp powdered unflavored gelatin
- 2 cups whole-milk Greek yogurt
- 1 cup half-and-half
- 1 cup whole milk
- ½ cup granulated sugar
- 1 tsp orange blossom water
- ½ cup pomegranate seeds for garnish

Pomegranate jelly layer
- ¼ cup hot water
- 1½ tsp powdered unflavored gelatin
- 8 oz pomegranate juice

Plan holiday meals with your carb budget in mind.
When you have diabetes, exercise may do more for you than you realize. Did you know it will lower your blood sugar levels by prompting your body to use insulin more effectively? Exercise may also help you need less medication, insulin, or other therapies.

Over time, physical activity can improve your A1c level, which reflects your blood sugar control over the past three months. It also reduces blood pressure and combats stress and anxiety. “With all of these benefits, we should send a message that exercise is a great ‘medication’ for people with diabetes,” says Jacqueline Shahar, MEd, manager of the exercise physiology department at Joslin Diabetes Center in Boston. Start with these strategies.

1. Check with your doctor.
Your doctor will make sure you’re ready for whatever you want to do. “Certain complications might warrant changing the type of exercise or the intensity,” says Shahar. For example, lifting heavy weights can be dangerous if diabetes has damaged the blood vessels in your eyes, or you have cataracts or glaucoma. And if you have diabetes-related nerve damage in your feet, you may need to choose activities that don’t put too much pressure on them. There are plenty of options. Your doctor will tell you what you can do, and may recommend you take an exercise stress test.

2. Do what you like.
You can generally do just about any type of exercise you enjoy when you have diabetes. Walking, jogging, bicycling, swimming, and other cardio activities are great for torching calories and getting your heart pumping. Your goal: Build up to at least 150 minutes per week of moderate aerobic activity.

3. Add strength training twice a week.
Using weights or working with resistance bands helps increase muscle mass. “Resistance exercise has been shown to improve glycemic control and reduce insulin resistance,” says Wayne Westcott, PhD, an instructor of exercise science at Quincy College in Massachusetts. “Building muscle will also boost your metabolism, so you’ll burn more calories throughout the day and night—even after your workout.”

4. Check your meds and your blood sugar.
Ask your doctor about how any medicine you’re taking might affect you during exercise. Some drugs might make your blood sugar drop too low, causing dizziness, fainting, or seizures. Simple steps, such as testing your blood sugar before you work out and eating a snack if your level is below 100 mg/dL, can help a lot. You can keep some juice or glucose tablets on hand for a quick boost in case your sugar does drop unexpectedly. If you take insulin or other medications, ask your doctor if you need to adjust them on days you exercise or just before heading to the gym.
Managing diabetes requires commitment and stamina. Every day you need to brush and floss your teeth, inspect your feet, exercise, and eat healthy foods. Most people also need to check their blood glucose levels daily.

Other tasks need to be done monthly and yearly, says Nora Saul, MS, RD, LDN, CDE, a diabetes educator and manager of nutrition services at Joslin Diabetes Center in Boston. Here’s her checklist:

**MONTHLY**

**Download blood glucose numbers from your meter and check for patterns.** Look for trends of high and low blood sugars, Saul says. If your blood sugar is always high at bedtime, maybe you’re eating too much for dinner or you need to adjust your insulin dose. If your blood sugar is low before lunchtime for several days, perhaps you’re eating too few carbohydrates at breakfast or you need to adjust your medication.

**Keep track of how well you’re eating.** Once a month, keep a three-day food record to see how closely you’re following your meal plan, Saul suggests. A food record not only alerts you to whether you’re consuming too many calories, but also points out your triggers for overeating and whether you’re eating too many carbohydrates.

Also note whether you ate because you were hungry or overindulged out of boredom, anger, or sadness.

**Restock your pantry with healthy staples.** Preparing homemade meals loaded with too much salt, sugar, and fat can ruin your healthy diet. Check your pantry monthly to make sure it’s stocked with staples that are good for you, including healthy oils and whole wheat breads and flours, Saul says.

She suggests some beneficial substitutes:

- Unsaturated oils (corn, olive, or canola) instead of butter and lard
- Fresh fruit instead of sweets and desserts
- Beans instead of meats
- Spices instead of salt

**TWICE A YEAR**

**Get your A1c levels checked.** This laboratory blood test shows you and your doctor your average blood glucose level over the past two or three months and offers a measure of how well you’re managing your blood sugar.

If your diabetes is under good control, a test every six months is “a good rule of thumb,” Saul says.

But if blood sugar is poorly controlled, testing every three months is better, she says. That enables your doctor to keep a closer eye on your control and progress with your treatment options. Your doctor might also want testing every three months if you change your diabetes treatment, such as by starting a new medication.

**Visit your dentist for a checkup and professional cleaning.** A dental checkup every six months is fine for most people with diabetes, unless you have gum disease or other dental problems that require more visits.

“One thing you should do is always tell your dentist that you have diabetes,” Saul says.
**ONCE A YEAR**

**Go for an annual checkup.** "That’s the absolute minimum,” Saul says. Your doctor may want you to come in more often. Be sure to bring a list of questions. “When people come in to see the doctor, a lot of times they forget what they want to ask,” she says. Some good questions include: Should I lose weight? How can I prevent foot problems?

Your annual visit should also include a cholesterol test and a blood pressure reading. High blood pressure damages your kidneys and eyes, so make sure you have your blood pressure checked at every doctor’s visit.

During your annual exam, feel free to talk with your doctor about any emotional or social problems you’re having. Most people with diabetes don’t get depressed, but the disease puts you at higher risk than someone without diabetes. Managing diabetes can be stressful and lonely. Remember that you can tell your doctor at any time if you’re feeling depressed or overwhelmed by your illness. Let her know if you have symptoms of depression, such as loss of pleasure or energy, disrupted sleep, appetite changes, trouble concentrating, loss of energy, or guilt and sadness.

Your doctor can check for any physical causes for your symptoms.

For instance, low blood sugar during the night can disturb your sleep. By bringing emotional problems into the open, you can get help if you’re indeed depressed.

**Get a microalbumin urine test.** Type 2 diabetes puts you at higher risk for kidney disease. Each year, you should have a microalbumin urine test to check your kidney function. Normally, urine won’t have any of the protein albumin, but if it’s detected, it may signal early kidney damage.

**Have a dilated eye exam.** Retinopathy is a type of diabetes-related eye disease that can damage the blood vessels in your eyes and harm your vision. Get a comprehensive eye exam at least once a year by an eye doctor to check on the health of your eyes. Make sure he knows that you have diabetes.

**Schedule a complete foot exam.** A thorough foot exam by a doctor at least once a year checks for problems related to diabetes, such as reduced blood flow or nerve damage that alters sensation in the feet, as well as infections. Have your doctor check your feet at every visit.

**Get a flu shot.** “People with diabetes are at higher risk of developing a secondary infection [like pneumonia] if they get the flu,” Saul says, so don’t skip the vaccine.
Diabetes

Reviewed by Brunilda Nazario, MD, WebMD Lead Medical Editor

**QUIZ**

1. The target A1c number is:
   a. Below 5
   b. Below 7
   c. Below 9
   d. 10–12

2. You should have your A1c level tested:
   a. Every five years
   b. Every two years
   c. Once a year
   d. Several times a year

3. If your A1c level is too high, your doctor will:
   a. Make you take insulin injections
   b. Suggest you change your diet
   c. Suggest you exercise more
   d. All or any of the above

4. You should have an A1c test if you have:
   a. Type 1 diabetes
   b. Type 2 diabetes
   c. Prediabetes
   d. All of the above

**HEALTH CHECK**

**DO YOU KNOW YOUR A1C?**

If you have diabetes, you’ve probably heard about the A1c test. It provides an average of your blood glucose measurements over the past two to three months. The results allow your doctor to see how well your blood sugar is controlled over the long term, which can help you reduce your risk of diabetes-related complications. As **debs_bear**, a WebMD Diabetes community member, tells another member, “A1c’s do not lie—if it says 11, then that means your diabetes is not controlled.” How much do you know about this important test? Take our quiz to find out.

**Sources:**
NIH, American Diabetes Association, WebMD Diabetes Health Center

**ASK YOUR DOCTOR**

1. Are there lifestyle changes I can make to lower my blood sugar?
2. Do I need to make a change in my medications to achieve better control?
3. If I’m overweight, how much weight should I lose to improve my health?
4. How often should I have my A1c level tested?

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