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DINNER IN 30

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DINNER IN 30

No time for mealtime? A little advance planning—and a few healthy recipes—can go a long way. Prep weeknight meals in no time with our expert strategies

*Cover: photography by Leigh Besich;
food styling by Dan Becker;
prop styling by Glenn Jenkins*



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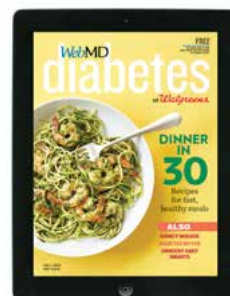
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GOOD EGG

Want your salad to pack a powerful punch? Top a mix of vegetables with whole eggs. A colorful salad gives you a good mix of carotenoids—nutrients that reduce inflammation and help the body detoxify—and cooked whole eggs may help the body absorb those nutrients. Researchers measured the carotenoids in the blood of a group of healthy young men after they ate a raw mixed-vegetable salad. The men whose salad included three scrambled eggs had up to eight times more carotenoids in their bloodstream than the men who didn't have eggs. Researchers say the fat in egg yolks brings the added benefit.

Source: *The American Journal of Clinical Nutrition*



ACTIVE DUTY

Did you know that getting up and moving could be just as good for you as ditching cigarettes? In a study that followed 6,000 older men for 12 years, those who got 30 minutes of physical activity—light or vigorous—six days a week were 40% less likely to die for any reason during the study period than their sedentary counterparts. That's the same reduction in death risk you get when you quit smoking.

Source: *British Journal of Sports Medicine*

75%

THE AMOUNT OF CALORIES

Americans consume from processed—rather than fresh—foods

Source: *The American Journal of Clinical Nutrition*



SUGAR SHOCK

Fructose-sweetened drinks, such as soda, are high in calories and low in nutrition. They could make you choose unhealthy foods, too. In an experiment, people drank either a fructose- or a glucose-sweetened drink. Then they had a brain scan while they looked at pictures of high-calorie foods. The photos stimulated the brains of the fructose drinkers more than the brains of the glucose drinkers. Also, when researchers asked if they would choose a high-calorie treat now or a cash reward later, the fructose group was more likely to go for the food. Most sugar-sweetened drinks contain fructose.

Source: *Proceedings of the National Academy of Sciences*



CLOCKWISE FROM TOP: APELOGA/GETTY IMAGES; LEW ROBERTSON/GETTY IMAGES; TOM GRILL/GETTY IMAGES; EXACTOSTOCK/GETTY IMAGES



GO VEGAN?

A vegan diet—a vegetarian diet that excludes all animal products—may sound extreme, but it could bring several benefits for people with diabetes. In a new study, people with diabetic neuropathy—painful nerve damage usually in the legs and feet—went vegan for five months. Those who stuck to the diet lost an average of 14 pounds and reported much less pain from the neuropathy. The researchers say the improvements in weight, cholesterol, blood pressure, and blood sugar control that come from a vegan diet may also lead to pain reduction.

Source: *Nutrition & Diabetes*

1 IN 3

NUMBER OF U.S. ADULTS WHO HAVE METABOLIC SYNDROME,

a group of risk factors—belly fat, high blood sugar, unhealthy cholesterol, and high blood pressure—that can lead to heart disease

Source: *The Journal of the American Medical Association*

TEST CASE

Ever wonder if all that finger pricking and blood testing to control your blood glucose is worth it? A recent study says yes. Among almost 1,800 veterans with type 2 diabetes, those who kept their A1c levels at 7% or 8% throughout the decadelong study reduced their risk of heart attack, stroke, heart failure, and amputation by about 17%.

Source: *New England Journal of Medicine*



270

NUMBER OF CALORIES

a 50-year-old, 150-pound woman burns raking leaves for an hour

Source: Health Status



WEIGHT AND SEE

If you want to lose weight, does it matter whether you cut calories, increase exercise, or do both? Researchers divided a group of sedentary, overweight men and women into three weight-loss programs. One group would lose 7% of their body weight with calorie-cutting alone. Another would use exercise only. The third would use both. Each group achieved its goal. But the diet-plus-exercise group got more than that. Their body's ability to control blood sugar improved twice as much, compared with members of the other groups.

Source: *Diabetes Care*



Highs and Lows

Get the scoop on blood sugar and how to keep it in check

BY SONYA COLLINS

When you have type 2 diabetes, you want to avoid hyperglycemia and hypoglycemia. The words sound alike, but the two conditions are very different.

What's hyperglycemia? "Hyperglycemia is the medical word for high blood sugar," says Betsy Shilliday, PharmD, a certified diabetes educator at University of North Carolina Health Care.

Blood sugar can run high when you eat too much. "If you take diabetes medicine, you can get high blood sugar when you don't have enough medicine in your system. Sickness and stress can raise your blood sugar, too," Shilliday says.

What does it feel like? You might be unusually thirsty or hungry. You could urinate more frequently, feel sleepy, or have blurred vision. In the event of these symptoms, check your blood sugar.

How do you treat it? Watch what you eat. "Don't overwhelm your body with extra sugar or starch," Shilliday says. Continue regular physical activity. A walk can help burn off the sugar. Drink plenty of water, too. "If your blood sugar is in the 300s or 400s, call your doctor," she says.

What's hypoglycemia? Anything below 70 on your glucose meter is hypoglycemia—low blood sugar. Some diabetes medicines can push your sugar too low. Eating less or exercising more than usual can cause your blood sugar to plummet, too.

What does it feel like? Hypoglycemia can cause blurry vision and hunger, just like hyperglycemia. But you might also feel dizzy, nervous, shaky, sweaty, and irritable. You could feel like your heart is racing.

How do you treat it? "If you're on diabetes medicine, carry glucose tablets with you," Shilliday says. Three to four tablets will bring your sugar up. If you don't have tablets, drink half a cup of apple or orange juice, half a can of regular soda, or an eight-ounce glass of milk. More than that will push your sugar too high. Don't treat low blood sugar with cookies or cake.

Wait 15 minutes and check your blood sugar again. If it's not over 70, repeat the tablets or juice. "When your blood sugar is back up, if it's not near mealtime, have peanut butter crackers or half of a sandwich with some type of protein on it to keep your blood sugar up," Shilliday says.

ASK YOUR DOCTOR

What's my target blood sugar?

What's my A1c (a measurement of average blood sugar levels over the past three months)? What should my goal be?

What are my cholesterol and blood pressure numbers? And what should my goals be?

Am I on the "key" diabetes medications (aspirin, cholesterol medication, and blood pressure medication)? If not, should I be?



Check out **20 Reasons for Blood Sugar Swings**, a slideshow at WebMD.com.

LEARN HOW ON
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Shop to It

Get cart-smart with tips for healthy grocery shopping

BY ERIN O'DONNELL



ASK YOUR DOCTOR

What type of eating plan would you advise for me?

About how many carbohydrates should I aim to eat each day?

Should I avoid certain foods completely?

What should I look for on food labels?

Which websites, apps, or other resources would you recommend to help me make healthy food choices?



Read [7 Superfoods for Diabetes](#), a blog post at WebMD.com.

LEARN HOW ON
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The first step to eating well with type 2 diabetes is making smart choices at the grocery store. How do you reach the checkout with a cart full of healthy (and tasty) options? Diabetes educators Afroz Subedar, MS, RD, and Maureen McGrath, RN, MS—colleagues at the University of California, San Francisco—offer these tips for healthier food shopping.

Enter with a plan. Before you hit the store, take five minutes to decide what meals you'll make over the next week. Jot a list of the ingredients you need. This simple but powerful step is worth your time, Subedar says. "The list will help you stay focused and lead you away from some temptations," she says.

Stick to the outside. Spend most of your time on the perimeter of the store, where you'll typically find fresh foods including fruits and vegetables, dairy, meat, chicken, and fish. The store's inner aisles hold packaged foods that are more processed and more likely to pose dietary pitfalls. Of course, the aisles do contain some super-nutritious choices (think canned tuna, beans, and oatmeal). Just be strategic about which inner aisles you visit, targeting the healthy options.

Channel your great-grandma. While you're shopping, ask yourself: Is this a food my great-grandparents would recognize? "Think about how our ancestors ate 100 years ago," McGrath says. "They didn't have frozen or processed foods." In the cereal aisle, consider that your great-grandma probably never ate O's or flakes for breakfast, but she might have eaten some type of porridge or oatmeal.

Go dark. Reach for darker-hued foods. That means picking spinach over iceberg lettuce, sweet potatoes over white potatoes, brown or wild rice over white rice, and hearty whole grain breads over white. Vibrant veggies generally contain more nutrients than their

paler counterparts. And whole grain breads, brown rice, and whole wheat pastas contain more fiber than white varieties, helping to balance your blood sugar and leaving you feeling satisfied.

Rethink your drinks. Leave sugary beverages such as fruit juices, sodas, and sports drinks out of your cart. A major source of empty calories, they're "pure liquid carbs, which will spike blood sugar significantly," Subedar says. Instead, pick up tea bags and lemon to make your own low-sugar ice tea.

Try calorie-free sparkling water, or buy limes and cucumbers to make your own flavorful infused waters.

Suss out snacks. Plan for the midafternoon munchies. And remember that "a snack does not have to come in a package," Subedar says. In place of chips, cookies, or little fish crackers, opt for real foods: half a turkey sandwich, a small handful of nuts, a Greek yogurt. "I like snacks that come from the food groups," Subedar says.

REVIEWED BY HANSA BHARGAVA, MD, WEBMD MEDICAL EDITOR

ASK YOUR DOCTOR

What are the signs of low blood sugar?

What should I know before I start a risky new activity, such as scuba diving or mountain climbing?

How often should I check my blood glucose when exercising or playing a sport?

Should I have a snack before I exercise?

How should I change my insulin treatment plan if I want to become pregnant?



Find out [The Truth About Type 1 Diabetes](#). Take the quiz at [WebMD.com](#).

LEARN HOW ON
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Do Over

Rethink your “don’t” list

BY MICHELE COHEN MARILL

What David Marrero, PhD, remembers most about learning he had type 1 diabetes at the age of 25 were the can’t-do’s and never-mores. He assumed the disease meant a life of restriction—no carefree eating, drinking, or random adventures.

Or so he thought. Times have changed, and most absolute prohibitions—the don’ts—are now do’s, as long as you partake in moderation, monitor your blood glucose, and communicate with your doctor or health care provider.

“I want to be able to indulge in the full richness of life. I can do that, but I have to apply some thinking and some rules to it,” says Marrero, president of health care and education for the American Diabetes Association and director of the Diabetes Translational Research Center at Indiana University School of Medicine.

These are just some things you may have thought were off limits—but aren’t:

Sweets You can eat the occasional candy bar, but figure out how much insulin you need and then check your blood glucose in case the dose needs to be adjusted. When Marrero tries a new food, he checks his blood glucose every 30 minutes for about three hours after eating. Pay attention to your total carbohydrate load during a meal. That way, if you have something sweet, you can cut back on other carb-laden foods, such as bread or potatoes.

Alcohol Have a beer, glass of wine, or cocktail with food, and drink it slowly. Be aware that alcohol can cause hypoglycemia, or dangerously low blood sugar for up to 24 hours after you drink it, so check your glucose before, during, and after you drink, including before you go to bed.

Intense sports People with type 1 diabetes have climbed Mount Everest, competed in the Ironman Triathlon, and run marathons. Marrero enjoys scuba diving, once considered



too dangerous for someone with diabetes. “Exercise acts like insulin and lowers your glucose,” so you’ll need to compensate, he says. For example, distance runners monitor their blood glucose to see how it fluctuates and use sports drinks, glucose gel, or another fast-acting carbohydrate to compensate.

Pregnancy Work with your doctor to develop a pre-pregnancy plan and get your glucose tightly controlled before you conceive. High glucose levels can be dangerous for your baby, especially in the first trimester. Your target range before getting pregnant should be 60 to 119 mg/dL before meals and 100 to 149 mg/dL one hour after meals.

Jobs in transportation or law enforcement Almost any job is open to people with diabetes. The Federal Aviation Administration still excludes people who are insulin-dependent from commercial pilot jobs, but you may apply for a medical certificate that allows you to fly private planes.

People with diabetes can become law-enforcement officers. Medical issues are handled on a case-by-case basis.

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

ASK YOUR DOCTOR

I'm new to exercise. What resources are available to help me get started?

I try to be active but I lack motivation. How can I change that?

How often should I check my glucose levels when exercising? What are some red flags?

Should I avoid certain activities?

Who can help me come up with an exercise plan I'll stick to?



Watch *Diabetes and the Power of Exercise*, a video at WebMD.com.

LEARN HOW ON
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Make a Move

Staying active will do more than just help you lose weight

BY KATHERINE KAM

Ready to get fit? It's good for managing diabetes, burns stress, and makes you feel good. Once your doctor gives you the green light, the choice is yours. Pick an activity you'll enjoy, and follow these tips for success.

Check your blood sugar before and after exercise. "It's a motivation tool," says Jacqueline Shahar, MEd, a clinical exercise physiologist at Joslin Diabetes Center in Boston. "When you exercise and see your blood glucose improve, you'll probably do more because it's going in the right direction."

Keep snacks on hand for low blood sugar. Be prepared. Bring fast-acting snacks to your workout in case your blood sugar drops too low while you exercise.

Wear comfortable shoes. Good shoes will help you avoid foot problems, which can be more serious when you have diabetes. They should be appropriate for your activity.

Wear a diabetes ID. Slip on a bracelet or necklace, or carry something that says you have diabetes, lists an emergency contact, and indicates whether you take insulin.

But you might think you have no time for

exercise. Jennifer Auyer of Nashua, N.H., knows what that's like. Between her job and her family, she couldn't find an easy spot in her schedule for working out.

Her father became her reason to find one. Auyer's dad had many health issues related to type 2 diabetes, including heart disease, a foot amputation, and vision problems. He died at age 61 from those complications.

Growing up, Auyer never saw her father, who was a heavy man, exercise. She was overweight, too, and knew she needed to make a change. When Auyer heard about a weight-loss and exercise class at Joslin Diabetes Center, she signed up.

She learned strength-training exercises using elastic bands. She also started interval training, varying her intensity or pace to make her workout harder or easier.

Get stronger, and your muscles burn more glucose. You will also burn more calories, says Shahar, who taught Auyer's class.

To Auyer's delight, her blood sugar levels improved as well. "Almost immediately, I noticed a change."

REVIEWED BY MICHAEL DANSINGER, MD, WEBMD DIABETES EXPERT



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Crunched for time?
A little planning goes a long
way. Get your weeknight meals
on the table in no time with
these strategies

DINNER IN

30

BY KERRI-ANN JENNINGS

REVIEWED BY HANSA BHARGAVA, MD, WEBMD MEDICAL EDITOR

You want to put a healthy meal on the table, but the hectic crunch of weeknights can make it hard to muster anything more than a plate of spaghetti or some takeout. With a few easy strategies, you can feed your family (or just yourself) a well-balanced, flavorful meal in less than 30 minutes.

PHOTOGRAPHY
BY LEIGH BEISCH
FOOD STYLING BY DAN BECKER
PROP STYLING BY GLENN JENKINS





BE PREPARED

“Plan to be busy later,” says Jill Nussinow, RD, “The Veggie Queen” and author of *Nutrition CHAMPS*. “I pretend that someone cooks for me—I keep my freezer stocked with ready-to-go beans, corn, cooked brown rice, and vegetables, so I can assemble a healthy meal in minutes.” She also recommends frozen meals—either store-bought or homemade—for those nights where all you can do is turn on the microwave. Look for healthy versions, though—low in salt and fat, high in fiber and nutrients.

TURN TO TEMPLATE RECIPES

Have a handful of simple recipes in your back pocket to whip up meals with virtually no effort. These can be as easy as rice and beans, omelets, chicken tenders with pan sauce, or quesadillas. Experiment with new recipes when you have more time and feel like cooking. Pull out one of your fallback dinners when you want dinner on the table pronto.



Pesto Spaghetti With Shrimp

Frozen shrimp and prepared pesto are two pantry staples that make this dish a cinch to whip up. If you have a spiralizer, you can use that to make long curly strands of zucchini “pasta,” but a box grater also works—adding grated zucchini to pasta gives you a more heaping serving of noodles while keeping carbs in check.

Makes 4 servings

INGREDIENTS

2 tsp olive oil, divided
1 lb raw shrimp (any size—if frozen, let thaw before cooking)
1 large zucchini, grated or spiralized
½ lb dry spaghetti
½ cup pesto (homemade or jarred)

DIRECTIONS

1. Heat 1 tsp olive oil in a large skillet over medium-high heat. Add shrimp and cook until it turns pink and is cooked through (3–6 minutes, depending on size). Remove shrimp from pan and set aside in a serving bowl.
2. Add remaining oil and zucchini and cook a couple minutes until golden. Remove zucchini to serving bowl with shrimp.
3. Put spaghetti in the same pan and cover with water. Bring water to a boil and cook until al dente (about 10 minutes). The spaghetti will absorb the water in the pan. Remove spaghetti with pasta fork and add to serving bowl. Add pesto and toss to combine.

PER SERVING

479 calories, 31 g protein, 48 g carbohydrate, 18 g fat (4 g saturated fat), 187 mg cholesterol, 3 g fiber, 5 g sugar, 409 mg sodium. Calories from fat: 33%

Chickpea-Cauliflower Curry

This recipe can easily be doubled, but be sure to pack up leftovers before you sit down to dinner for better portion control. Serve with cooked brown rice. (Keep bags of cooked, portioned brown rice in your freezer.)

Makes 3 servings

INGREDIENTS

1 tbsp canola oil
1 small onion, diced
1 clove garlic, peeled and minced
1 tbsp peeled, minced ginger
1 tbsp curry powder
salt to taste
1 can light coconut milk
1 bag frozen cauliflower florets, thawed
1 15.5-oz can chickpeas, rinsed and drained

DIRECTIONS

1. Heat oil in a large sauté pan over medium heat.
2. Add onion, garlic, and ginger and cook 1–2 minutes. Add curry powder and salt and continue to cook until onion is soft.
3. Whisk in coconut milk. Add cauliflower and chickpeas and cook until heated through.

PER SERVING

248 calories, 9 g protein, 27 g carbohydrate, 12 g fat (5 g saturated fat), 9 g fiber, 5 g sugar, 449 mg sodium. Calories from fat: 44%



SPICE IT UP

Use spice blends to make the same old, same old fresh and new. You can make blends yourself or buy them ready-made. Try harissa or za’atar for a Middle Eastern flavor or jerk seasoning to bring your palate to the Caribbean. Nussinow suggests adding tomatoes, garlic, oregano, and basil for an Italian-tasting dish, and sesame, soy sauce, ginger, and garlic for an Asian-inspired meal. She often cooks a basic lentil soup and then adds different seasonings each day to keep it exciting.

BALANCE IT OUT

Adhere to the no-fail formula of protein + produce + starch for a satisfying, balanced dinner every time. For example, balance out a side of pizza (protein/starch) with a large salad. Add shredded chicken, baby spinach, and sliced mushrooms to quesadillas.





Check out [Best and Worst Meals for Diabetes Dining](#), a slideshow at [WebMD.com](#).

LEARN HOW ON
PAGE 3

HAVE VEGETABLES READY TO GO

In an ideal world, you'd shop on the weekends and wash, dry, and prep a variety of produce so you can throw it into meals at a moment's notice. But if that's not realistic, buy fresh vegetables that are precut (a particularly good call for intimidating types like winter squash) or frozen vegetables and fruit.

PREP YOUR PANTRY

A good pantry (as well as a stocked fridge and freezer) can keep you from ordering out. Make sure you have the basics of your template meals on hand (pasta, beans, tuna, tomato sauce, jarred pesto). Plan for a few nights where you can just whip up a simple dish, like pasta with frozen veggies or a frittata and salad.

Polenta With Chicken Sausages and Broccoli Rabe

Quick-cooking polenta is a cinch to make and offers a creamy base for peppery broccoli rabe and sweet Italian sausages.

Makes 4 servings

INGREDIENTS

1 tbsp olive oil
2 cloves garlic,
peeled and sliced
1 bunch broccoli
rabe, rinsed and
shaken to dry, and
lightly, roughly
chopped
pinch of red pepper
flakes
salt and pepper to
taste
4 cooked sweet
Italian chicken
sausages
2 cups low-sodium
chicken stock
1 cup water
1 cup quick-cooking
polenta
¼ cup grated
Parmesan cheese

DIRECTIONS

1. Heat oil in a large skillet over medium heat. Add garlic and cook 1 minute. Add damp broccoli rabe and cover. Continue cooking until rabe is soft, 5–10 minutes. Add red pepper flakes, salt, and pepper. Remove rabe mixture from pan and transfer to a serving bowl. Cover to keep warm.
2. Place chicken sausages in the same pan and cook until heated through (about 5 minutes), turning once.
3. While sausages cook, prepare polenta. In a medium saucepan, bring chicken stock and water to a boil. Slowly whisk in polenta and continue to cook until polenta firms enough to pull away from sides of pan (takes about 5 minutes). Remove from heat and stir in Parmesan. Divide polenta among dishes and serve with broccoli rabe and sausage.

PER SERVING

372 calories, 23 g protein, 38 g carbohydrate, 13 g fat (4 g saturated fat), 72 mg cholesterol, 7 g fiber, 2 g sugar, 655 mg sodium. Calories from fat: 32%

Plain Truth

Debunking diabetes myths

BY JODI HELMER

Diabetes is one of the most common chronic diseases—almost 30 million Americans currently live with type 1 or type 2 diabetes—and one of the most misunderstood.

“Even patients who do their best to be well-informed have misconceptions about the disease,” says Fredric Kraemer, MD, professor of medicine and chief of the Endocrinology, Gerontology, and Metabolism division at Stanford University School of Medicine. “Because diabetes is so prevalent, education is important.”

Here’s the truth behind some common diabetes myths.

Myth: Type 1 and type 2 diabetes are the same.

Fact: Both type 1 and type 2 diabetes are linked to insulin production, but the diseases are very different.

Type 1 diabetes is an autoimmune disease—the body stops producing insulin. It’s more commonly diagnosed in children. Between 5% and 10% of people with diabetes have type 1 and require regular insulin injections to help their bodies convert food into energy.

Those with type 2 diabetes produce insulin, but the body’s cells don’t absorb it. Lifestyle factors like obesity and inactivity increase the risk of type 2. Diet and exercise can control type 2, but most people need medications, sometimes including insulin.

Myth: If I have diabetes, I’ll know it.

Fact: Symptoms associated with diabetes include frequent urination, excessive thirst, fatigue, and blurred vision. You may have some of these—or none at all.

To make a diabetes diagnosis, doctors look for fasting glucose levels of 126 mg/dL



or higher on two separate occasions, which is high enough to signal a problem but not high enough to cause symptoms.

If you’re older than 45, overweight, or have high blood pressure and a family history of diabetes, Kraemer suggests getting screened.

Myth: If you’re overweight or obese, type 2 diabetes is inevitable.

Fact: Some 69% of American adults are overweight, but less than 10% of the population has diabetes. Losing weight lowers your risk. A study conducted by the National Institutes of Health found that people who lost an average of 15 pounds and exercised for 150 minutes per week lowered their risk of type 2 diabetes by up to 58%.

Myth: Too much sugar causes diabetes.

Fact: While several studies show a connection, sugar in sweets and soda might not be the problem. “A diet high in [sugar] won’t cause a normal-weight individual with normal insulin levels to develop diabetes,” Kraemer says.

But consuming too much of anything, including sugar, contributes to weight gain, which increases the risk of diabetes.

ASK YOUR DOCTOR

What is the best treatment? Treatment options vary depending on whether you have type 1 or type 2 diabetes and the specifics of your medical history.

What lifestyle changes do I need to make? Ask your doctor how eating healthy foods, exercising, quitting smoking, and other lifestyle changes can improve your health.

What complications should I be aware of? Diabetes affects more than your blood sugar. You’re at higher risk of heart disease, nerve damage, vision problems, and other health conditions.



Read [10 Diabetes Diet Myths](#), an article at WebMD.com.

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Filtered Truth

How to prevent kidney disease BY CHRISTINA BOUFIS

ASK YOUR DOCTOR

What are my blood sugar goals?

What are my blood pressure goals?

What are my cholesterol goals?

What should I eat to control blood sugar, blood pressure, and cholesterol?

How can I exercise safely?

Am I on any medications that can affect my kidney function?

How frequently should I get tested for kidney function?

How can I lower my blood sugar?



How Well Do You Know Your Kidneys? Take the quiz at WebMD.com.

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You probably don't often think about your kidneys—your body's filtration system—but you need to protect them when you have diabetes. Why?

"Three things can contribute to kidney disease. The first is high blood sugar," says Jason C. Baker, MD, endocrinologist and assistant professor of clinical medicine at Weill Cornell Medical College in New York City. "If it remains high, it can lead to damage of the kidneys—both to the blood vessels that feed the kidneys and to a part of the kidneys that filters the blood."

High blood pressure and high cholesterol are two other things that can damage the blood vessels, "essentially putting pressure on the kidneys," causing them to work harder and "to leak important things like proteins," Baker says.

How can you prevent kidney disease? Keep blood sugar controlled. Studies show that intensively managing blood glucose can halve your risk of developing kidney disease—or halt its progression, if you do have it.

One way to achieve tight control is to test and monitor your blood sugar often at home. "Knowing what your blood sugar is before

you eat and drink and knowing what it is one to two hours after is extremely important in understanding if you've eaten the appropriate food or beverage," Baker says.

In addition to eating foods that help you stay in control of your blood sugar, follow a lower-sodium diet such as the DASH (Dietary Approaches to Stop Hypertension) diet, Baker suggests. Research shows that this plan, which emphasizes vegetables, fruit, low-fat dairy, whole grains, fish, and nuts and limits salt, meat, and sweets, is effective for lowering blood pressure. Also, talk to your doctor about blood pressure-lowering medications, such as ACE inhibitors, to see if they're right for you.

Next up? "Exercise, which is essential for the health of blood vessels and can protect the kidneys," Baker says. Start gradually, and build up to the recommended 30 minutes most days. "Take even 10 minutes to exercise. This might mean taking the stairs instead of the elevator," Baker says.

As for lowering cholesterol, a healthy diet is key but so is knowing your family history, since cholesterol levels are influenced by your genes. "Talk to your health care provider about your individualized cholesterol goals," Baker says.

REVIEWED BY BRUNILDA NAZARIO, MD, WEBMD LEAD MEDICAL EDITOR

How Does Food Affect Your Blood Sugar?



When you have diabetes, your blood sugar level reflects the foods you choose. “For over a year, my sugar ran from 250 to 350 every day,” writes WebMD Diabetes community member **chui55**. After switching from chips and sweets to fruits, vegetables, and lean meats, “my sugar is ranging between 110 and 185...I am so glad I have turned a major corner now and [am] on my way to a healthier me.” Do you know which foods can help you control blood sugar? Take this quiz to find out.

QUIZ

- 1. The glycemic index ranks foods based on:**
 - a. The amount of sugar they contain
 - b. How much weight gain they cause
 - c. How much they raise blood sugar
 - d. Their calorie count
- 2. Which of these breads is lowest on the glycemic index?**
 - a. White
 - b. Pumpernickel
 - c. Whole wheat
 - d. 100% whole grain
- 3. Which of these vegetables is your best choice if you have diabetes?**
 - a. Baked potato
 - b. Carrots
 - c. Corn on the cob
 - d. Sweet potato
- 4. Which of these nuts might help control your blood sugar?**
 - a. Cashews
 - b. Hazelnuts
 - c. Pecans
 - d. All of the above

ASK YOUR DOCTOR

Which foods can help stabilize my blood sugar?

What size portions should I eat?

Can I snack between meals?
What are the best snacks?

What should I do if my blood sugar stays high?

ANSWERS: **1. c.** The glycemic index ranks carbohydrate-based foods based on how much they raise blood sugar levels. Foods that are high on this index can cause blood sugar to spike, making diabetes harder to control. **2. d.** Breads that are 100% whole grain are made with the entire grain—unlike refined grains, which are processed to remove some of the nutrient-dense layers. Whole grain foods are high in nutrition and slow burning, so they help keep your blood sugar steady. **3. b.** Though carrots can be sweet, they’re lower on the glycemic index than the other vegetables on this list. Green, leafy vegetables are an even better addition to your plate. Ideally buy vegetables fresh, or look for frozen or canned options with no added sauces or salt. **4. d.** A review of 12 studies showed all kinds of tree nuts—from Brazil nuts to walnuts—improved A1c and fasting blood sugar levels. Peanuts weren’t included in the research—they’re legumes, not nuts. Add tree nuts to your daily diet, but don’t go overboard because they are high in fat and calories. People in the studies ate about 2 ounces of nuts a day (that’s about 40 almonds or 14 walnuts).

SOURCES:

American Diabetes Association, American Heart Association, Harvard Medical School, WebMD Diabetes Health Center

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

Straight Talk

How to let friends and family know what kind of help you need BY GINA SHAW



ASK YOUR DOCTOR

Can you help me with coping skills?

How well do you think I'm managing diabetes? What's the one thing I should focus on most?

How do I talk to my partner and family about diabetes?

What do I need to know to still enjoy going out to dinner with family and friends?

How can diabetes affect my sex life?



Join 500+ convos in WebMD's [Diabetes Community](#) at [WebMD.com](#).

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"Should you be eating that?"

"I found this article online, and it says that people with diabetes need to..."

"Have you tested your blood sugar today?"

If you have diabetes, you've probably heard questions and comments like these at least once from friends and family—the people who seem to think that by nagging you, they can help you manage your condition better. How can you teach these well-meaning folks to offer the kind of help you need, instead of what they *think* you need?

Erase myths with education. "There's a lot of misinformation about diabetes, and it's important that people understand what's true and what isn't," says Dawn Sherr, MS, RD, a practice manager at the American Association of Diabetes Educators. "For people who are close to you—spouses, family members, or close friends—encourage them to attend a diabetes education class, or ask them to accompany you to an office visit to get a better understanding of how diabetes is going to affect you."

Figure out what support means to you. For example, some people see reminders about what to eat or what to buy at the store as helpful—others don't. "If someone asks me if I've tested my blood sugar today, I see it as showing that they care about me," says Elizabeth Mwanga, a diabetes advocate and owner of a health care tech company. "But for other people, that can feel like nagging." Sit loved ones down and explain the kind of help that works best for you.

Make family and friends part of the solution. "If you're newly diagnosed with diabetes and trying to become more physically fit or eat better, encourage your friends and family to be supportive and participate themselves," Sherr says. Making lifestyle changes a group effort allows them to feel they're contributing—and lets them see just how hard you're working.

Stress small steps. "Just because someone has been diagnosed with diabetes doesn't mean they will change everything about their life overnight," Sherr says. "Let the people in your life know that."

Be honest with yourself. It can't hurt to take a quick look in the mirror. Are the comments bothering you because they might be a little bit on target?

Let others know you appreciate their concern. Most of the time, when people "nag" you about your diabetes, they do it out of concern and love, not to be a pain. Tell your husband or mom or best friend, "It means a lot that you care so much about me and want me to be healthy. Trust me—I've got this under control."

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

Q

Why does my blood sugar spike in the morning?



**Joan Bardsley,
RN, CDE**
assistant vice
president, MedStar
Health Research
Institute

There are many reasons for a high reading.

First, look at food. What you ate the night before may be behind the blood sugar spike—for example, if you ate much more than you usually eat, or the amount of food was more than your medications are tailored to handle.

A second cause could be your medicine. Perhaps the medications you take aren't lasting through the night, or the dose isn't high enough to keep your blood sugar in check.

Another possibility is one that occurs naturally in the body in response to low blood sugar. When your blood sugar drops, your body releases stored sugar—mainly from the liver—and overcompensates. If your blood sugar drops in the middle of the night, this overproduction of sugar can cause a high morning blood sugar level. This is called the Somogyi effect. When your blood sugar is low, it's best to eat about 15 grams of carbohydrates and then wait 15 minutes before repeating the process.

Or, the spike could be due to the release of hormones between 4 a.m. and 7 a.m. that raise blood sugar. Your body needs to balance these high hormone levels by increasing insulin production. When it can't produce enough insulin to compensate, your blood sugar will be high. You may need to manage the timing or amount of your medicine to control your blood sugar levels.

The risk of having high blood sugar in the morning is that it can raise your average blood sugar levels, as measured on the hemoglobin A1c test. And starting out high in the morning means you'll have to work harder to keep your blood sugar in range for the rest of the day.

The first thing to do is find out what caused the blood sugar increase. Talk with your diabetes team ahead of time, so if you wake up and your blood sugar is high, it's not a panic situation. Know your target blood sugar range and exactly what to do when it's elevated. Ask your diabetes educator and doctor when to call the office or adjust your medicine dose—for example, if your blood sugar is over a certain level for a predetermined amount of time.

Create a diabetes plan with your team, and then be ready to adjust that plan, because diabetes can change over time.



Read *Why I Don't Always Test My Blood Sugar*, a blog post at WebMD.com.

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REVIEWED BY BRUNILDA NAZARIO, MD, WEBMD LEAD MEDICAL EDITOR

Family Matters

A mother with a history of diabetes takes control

BY MARIA IBARRA, WEBMD.COM COMMUNITY MEMBER



I was diagnosed with type 2 diabetes when I was 35—I'm 40 now—and I have a strong family history of the disease. My late mom had it. Her sister and my two brothers have it, and my brothers have had extensive complications from diabetes. Hearing what they've gone through is scary. After I was diagnosed, I thought: How can I gain control? How can I keep complications to a minimum?

During that first year or so, I didn't have good control of my A1c. I didn't exercise. I wasn't active because I thought a pill was going to take care of it. And I was so focused on my A1c, but I didn't realize the small steps that would help bring that down.

Eventually I met with a diabetes educator, and she really helped me. One of the things that you hear so often is that walking during your lunch breaks or

MARIA'S M.O.

"It's really important to start with small, achievable goals. One of mine was just getting out and walking 10 minutes."

"I'd look at changes in a 30-day span. If I stuck with it for 30 days, I'd think, 'What's another small change that's achievable for me that I can add?' Eventually, all the small changes become part of your normal life."

"Get the support of friends. I reached out to my co-workers, and they were all very supportive. Even though they don't have diabetes, we're all trying to motivate each other to stay active."

"Working with a diabetes educator and a nutritionist really does help, because there are so many pieces to managing diabetes."

after a meal will bring your blood sugar level down. And I thought, "Let me test and see how true that is." Sure enough, if I got up and walked during my lunch break—especially since my job involves a lot of sitting—or walked after work, my blood sugar levels were lower.

So I started walking when I got home. It was not easy. After about 10 minutes, I'd say, "Whew, I'm tired." I live on a long block, and eventually I'd be able to circle the block for 15 or 20 minutes. Then I'd do that a couple of times. Gradually, I worked up to 3 miles a day.

I also started doing 5Ks. I'd speed-walk. The first time, I did it with my oldest daughter. Then my youngest joined in. They are 18 and 16, and are always supporting me and keeping me accountable. It was more like a family event. Now my 16-year-old goes to the gym with me and keeps me motivated. Today I go to the gym three to four times a week and do about two and a half miles on the treadmill—alternating walking and jogging. I also lift weights for about 30 minutes, and I like doing the StairMaster.

I eventually lost weight by eating healthy, watching carbs, and being more active. I still have the last 20 pounds to go, but I'm maintaining my healthy eating and enjoying life.

My A1c is about 6 now, down from 8.7. It took a lot of work to bring it down. And it probably took about two years after being diagnosed for me to really commit to being more active, but now it's part of my lifestyle. I don't want my daughters to get diabetes. I think about that, and want to show them you have to maintain being active. That's the key.

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

CARL COSTAS