Why Eye Exams Are Essential

When you have diabetes, an annual look at your eyes could save your sight.

Diabetes increases your risk for problems such as retinopathy and glaucoma—conditions that sometimes cause vision loss or blindness if not treated early.

Unfortunately, you might not notice any vision problems at first. That’s why getting a comprehensive eye exam at least once a year is a must.

During the exam, your pupils are dilated, or widened, with drops. This makes it easier to spot early signs of damage.

Source: National Eye Institute
Menu Matters

**Feet First**

TAKE TIME FOR A DAILY CHECK

Type 1 diabetes affects virtually every part of your body, including your feet.

First, high blood sugar reduces the ability of nerves to carry messages to your lower limbs. As a result, you may lose feeling in your feet, which means you can injure yourself without realizing it.

Second, if you do get hurt, a cut or sore on your foot may heal slowly—or not at all. That’s because diabetes also limits blood flow to your feet, which can impair healing so much that healthy tissue may develop gangrene.

Here are some tips from the American Diabetes Association to help you enjoy your dining experience without sending your blood sugar soaring or piling on the calories.

> Instead of an entrée, order a salad and a lower calorie appetizer as your meal.
> Avoid breaded foods. Ask to have your fish or meat broiled, steamed, baked, or poached.
> Order salad dressings, sauces, or gravy on the side to control how much is put on your food.
> Ask for substitutions. Get a baked potato or a double order of vegetables instead of french fries.
> If the serving is large, eat half and take the rest home for another meal.

Remember, whether you take diabetes pills or insulin shots, you’ll want to plan ahead so you can time your medication and your meals accordingly.

**TIPS FOR DINING OUT**

Eating out can be a challenge when you have diabetes. Many menu items may not fit well into your meal plan.

> Instead of an entrée, order a salad and a lower calorie appetizer as your meal.
> Avoid breaded foods. Ask to have your fish or meat broiled, steamed, baked, or poached.
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Remember, whether you take diabetes pills or insulin shots, you’ll want to plan ahead so you can time your medication and your meals accordingly.

Sources: American Diabetes Association; Centers for Disease Control and Prevention
“Am I doing everything possible to protect my heart?”

Because diabetes raises your risk for heart disease, this is a good question to ask yourself regularly.

There’s a lot you can do to reduce your risk of developing heart disease—or to protect your heart from further damage if it’s already been harmed. And we all need to give our hearts a little love.

Start with these suggestions from the American College of Cardiology and the American Diabetes Association:

Take control of the ABCs of diabetes. A is for A1C. The A1C test measures your average blood sugar for the past two to three months. Most people with diabetes should aim for an A1C below 7%.

B is for blood pressure, which—if it’s too high—can make your heart work too hard. Keep your blood pressure in a healthy range, ideally below 140/90 mm Hg.

C is for cholesterol. LDL cholesterol (the bad kind) clogs arteries, so keep it low. Ask your doctor what your LDL level should be.

Take any medications your doctor prescribes to help you reach your target ABCs.

Eat a heart-friendly diet, and be active. Your heart will thank you if you eat less fat (especially saturated fat and trans fat), go easy on salt, and—with your doctor’s approval—get at least 30 minutes of aerobic exercise (such as brisk walking) on most days of the week.

Drop a few pounds if you’re overweight. Losing just 5 to 10% of your total weight can help protect your heart.

Finally, if you smoke, try hard to quit. Lighting up adds to your already elevated risk for heart disease. Ask your doctor for help to quit.
Lose Weight, Gain Control

A little weight loss can boost your health in big ways when you have diabetes and some pounds to spare.

That’s because shedding some of that excess weight—even 10 to 15 pounds—may help you achieve better control of your blood sugar, blood pressure, and cholesterol and possibly reduce your need for some of the medications you take.

To lose weight, you need to use more calories than you take in. You can do that by changing some eating and exercising habits.

Easier said than done, right? But you can succeed. Your doctor can help you start a safe and effective weight-loss plan. You might also find a partner, such as a friend or relative, with similar health goals to help motivate you.

Try a few changes at a time:

> Cut back on high-calorie, fatty foods and eat a balanced diet.
> Don’t skip meals, especially breakfast. Otherwise, you may eat more later on.
> Don’t grocery shop on an empty stomach when high-calorie goodies are hard to resist.
> Avoid junk food aisles. Put healthy snacks, like fresh fruits and veggies in your shopping cart instead.
> Aim to be active on most days of the week. Walking can be a good option.

Sources: American Diabetes Association; National Institute of Diabetes and Digestive and Kidney Diseases
Can Diabetes Pills Help Me?

Only people with type 2 diabetes can use pills to manage their diabetes, people with type 1 diabetes must use insulin.

These pills work best when used with meal planning and exercise. This way you have three therapies working together to lower your blood glucose levels.

Diabetes pills don’t work for everyone. Although most people find that their blood glucose levels go down when they begin taking pills, their blood glucose levels may not get close to the normal range.

WILL THEY HELP?

What are the chances that diabetes pills will work for you? Your chances are low if you have had diabetes for more than 10 years or already take more than 20 units of insulin each day. On the other hand, your chances are good if you developed diabetes recently or have needed little or no insulin to keep your blood glucose levels near normal.

While the cause is unknown, diabetes pills sometimes stop working after a few months or years, but this doesn't mean your diabetes is worse. When this happens, oral combination therapy can help.

Even if diabetes pills bring your blood glucose levels near the normal range, you may still need to take insulin if you have a severe infection or need surgery. Pills may not be able to control blood glucose levels during these stressful times when blood glucose levels shoot up.

Also, if you plan to become pregnant, you’ll need to control your diabetes with diet and exercise or with insulin. It is not safe for pregnant women to take oral diabetes medications.

There is no “best” pill or treatment for type 2 diabetes. You may need to try more than one type of pill, combination of pills, or pills plus insulin.

The most-prescribed drug to treat people with the type 2 diabetes may be causing irreversible nerve damage in many patients.

Metformin, also known as Glucophage, is prescribed to more than 120 million patients worldwide. It works by reducing the amount of glucose produced by the liver as well as increasing a patient’s sensitivity to insulin.

A recent research study conducted by two hospitals in the United Kingdom confirms a concern the medical world has been aware of for quite a few years.

Metformin is causing varying degrees of vitamin B12 deficiency in approximately 10% of prescribed patients.

The research, performed by Dr. Kaenat Mulla and colleagues at Hucknall Road Medical Centre in Nottingham, audited vitamin B12 screenings and deficiencies among female patients with type 2 diabetes who were taking metformin.

The researchers conducted an audit of vitamin B12 screening and deficiency among female patients with type 2 diabetes who were taking metformin.

“The audit findings indicated that 64% of patients had not had their vitamin B12 levels checked at all, and that 9.6% of the patients were deficient but only 6.4% were being treated with vitamin B12,” a press release from the study states.

“I’ve been hearing about this since about five years ago,” Dr. Caroline Messer, an endocrinologist and clinical assistant professor at Mount Sinai School of Medicine, told Healthline. “But there are no guidelines established for testing for it.”

Messer said the problem is that while some doctors are testing their patients’ vitamin B12 levels, many doctors are not because it hasn’t become an official part of standardized diabetes care.

“In my office, patients on metformin who are B12 deficient isn’t something we see often. It’s rare here, but this study says 10% of all patients taking metformin are deficient, and that’s not a small amount,” she said.

“Just have your levels checked every year if you take metformin,” she said. “For patients with levels over 300 mg/mL, taking a supplement isn’t necessary.”

Mulla added that patients shouldn’t stop taking Metformin because of this research.

“Metformin remains the best treatment for type 2 diabetes. These findings should not discourage patients from taking it, but encourage doctors to monitor vitamin B12 levels more routinely, so any deficiency can quickly be treated.”

Resource: healthline.com/health-news/check-your-vitamin-b12-levels-if-you-take-metformin
Budget-Friendly Cilantro Lime Roasted Chicken

INGREDIENTS
1 whole chicken (2 1/2 lbs) cut into 8 pieces
2 tbsp. cilantro (chopped)
1 lime (zested and juiced)
1 tbsp. honey
2 cloves garlic (minced)
½ tsp. black pepper
½ tsp. salt (optional)
Serves 6

Prep time 5 minutes
Cook time 50 minutes

INSTRUCTIONS
1. Preheat oven to 375 degrees F. Coat a baking dish with cooking spray.
2. Remove the skin from the chicken and arrange in a single layer in the baking pan.
3. In a small bowl, whisk together the cilantro, lime zest, lime juice, honey, garlic, ground black pepper, and salt (optional). Pour the mixture evenly over the chicken and bake for 45-50 minutes or until the internal temperature of the largest piece of chicken is 165 degrees.

Source: diabetesfoodhub.org

NUTRITION FACTS
Serving Size: ½ breast, 1 thigh, or 1 drumstick + 1 wing

Calories: 130
Carbohydrates: 4 g
Protein: 18 g
Fat: 4.5 g
Saturated Fat: 1 g
Sugars: 3 g
Dietary fiber: 0 g
Cholesterol: 55 mg
Sodium: 55 mg
Potassium: 170 mg
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