Medication is prescribed to help you. But every year, many people are hurt because they take the wrong medication or they take the right medication the wrong way.

One of the best ways to avoid mistakes is to learn as much as you can about each of your medicines. For instance, you should know:

> Its name
> How much to take and when
> What it’s for
> Possible side effects

As soon as you pick up a prescription, look at the label and the medicine itself. If you’ve taken this drug before, ask your pharmacist about any changes in medication size, color, markings, or dose.

The American Pharmacists Association and the National Council on Patient Information and Education also recommend:

> Keeping a list in your wallet of all the medications you take (prescriptions, herbs, vitamins, and supplements). Share it with your doctor(s).
> Keeping medicine in its original bottle. The color of the bottle protects the medicine from light. The label lists important information, including the name of the medicine and the pharmacy’s phone number.
> Throwing away any cotton in the bottle. It can absorb moisture and affect the medication.

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An Endocrinologist Can Help

Staying healthy with diabetes means keeping your blood sugar under control. And to do that, you may need to see a specialist called an endocrinologist.

Many people with diabetes can stay healthy without this expert’s care. But you might need to see one if:

- You have type 1 diabetes, especially when you’re first diagnosed. There’s a lot to learn about how to stay healthy, and this doctor can help.
- You have type 2 diabetes, but it’s hard to control it.

What is an endocrinologist?

This doctor specializes in treating diabetes and other hormonal conditions. He or she has extra training in the endocrine system—the system of glands in your body.

The endocrine system includes the pancreas, which produces the hormone insulin. In type 1 diabetes, your body doesn’t make any insulin at all. In type 2 diabetes, your body doesn’t make or use insulin well.

Seeing an endocrinologist doesn’t mean you’ll never see your regular doctor again. But it does mean you have an extra set of eyes to help you stay healthy. Diabetes often takes a team approach, and together, these doctors can help you stay healthy.

Sources: American Diabetes Association; Hormone Health Network
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Exercise: How to Overcome Roadblocks

When it comes to exercise, many of us are tempted to make excuses. However, physical activity is an essential part of diabetes control.

According to the American Diabetes Association, regular exercise can:

- Lower blood glucose and blood pressure
- Improve the body’s use of insulin
- Lower the risk for heart disease and stroke

Here are some common roadblocks to exercise, along with advice on how to overcome them.

**I don’t have time to exercise.** Aim for 150 minutes of moderately intense aerobic activity over at least three days each week. Plus, do resistance training at least two days each week. To start,
exercise for ten minutes at a time, three times a day. Gradually work up to the full amount of time. Plan on working exercise into your daily routine.

You could:

- Garden or rake leaves
- Take the stairs instead of the elevator, or park farther away from your destination
- Go for a walk during your lunch break

**I’m not sure which activities are good choices.** Work with your doctor to determine what’s safe for you. Choose activities that you’ll enjoy. To avoid getting bored, try different exercises on different days.

**My blood sugar will drop too low.** To avoid low blood glucose during exercise:

- Create a plan with your doctor. If you take diabetes medicines that can cause low blood glucose, ask your doctor whether you should change how much you take before you exercise or whether you should have a snack if your blood glucose level is below 100.

Don’t overdo it. Exercising for too long or too strenuously can cause low blood glucose.

**Because exercise can lower blood glucose, talk to your doctor about ways to exercise safely.**

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### Insulin May Offer You Better Control

If you have type 2 diabetes, your doctor may recommend adding a powerful tool to your treatment program—insulin.

Surprised? Many people with type 2 diabetes are. That’s because insulin misconceptions abound. For example, some think insulin is only for people with type 1 diabetes. Not true. Others think it’s only for people who mismanage their condition. Also not true.

Many people begin treatment for type 2 diabetes with a better diet, more exercise, and medications that makes it easier for the body to use insulin. After a while though, that treatment plan may lose its effectiveness.

That’s when insulin may be added. About three in ten people with type 2 diabetes take insulin.

Your doctor will help you decide how much insulin you need, how often to take it, and what kind will work best for you. To be effective, insulin must be injected into the layer of fat just below the skin.

While many new insulin users are anxious at first, most adjust quickly. Insulin helps keep your glucose level near normal, which can mean more energy, better sleep, and a more stable mood.

**Sources:** Agency for Healthcare Research and Quality; American Diabetes Association

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Keep a Close Eye on Vision Problems

Most people with diabetes will eventually develop some degree of retinopathy.

A cataract is a clouding of the eye’s lens—the part of the eye that focuses light on the retina.

Anyone can get a cataract, but people with diabetes are 60% more likely to get cataracts compared to people without the disease.

Glaucoma is a buildup of pressure in the eye. It can damage the retina and the optic nerve and cause vision loss. While it affects people without diabetes too, people with diabetes are about twice as likely to get glaucoma as those without the disease.

Your best defense against eye problems includes two basic steps:

1. Keep blood sugar levels as close to normal as possible. Tight control may help prevent or slow eye disease. But it’s not for everyone. Ask your doctor what your blood sugar goals should be.

2. Have a dilated eye exam every year. You can have permanent eye damage before symptoms ever occur. Regular eye exams help catch problems early and keep you seeing clearly.

Sources: American Diabetes Association; National Institutes of Health
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Diabetes can affect just about every part of the body—even your eyes. To help protect your sight, learn about a few of the dangers and how to address them.

Diabetic retinopathy is a leading cause of blindness in adults. It happens when the blood vessels of the retina are damaged. The retina is the lining at the back of the eye that senses the light coming into the eye.

Regular Visits with Your Healthcare Provider are a Must

It’s complicated.

No, we’re not talking about relationships. We’re talking about diabetes—a complicated disease that can lead to many other serious health problems if it’s not well monitored and controlled.

That’s why it’s important to see your doctor regularly throughout the year. Your doctor needs to stay on top of your disease, which will help keep you in the best health possible.
Among other things, at every visit, your provider may:

› Take your blood pressure and check your weight.
› Review all the medications that you take, including over-the-counter herbs and supplements.
› Talk about your blood sugar levels—both high and low—and go over the results of your A1C test, if you’ve had one.
› Ask if you’ve had any problems with your diabetes care plan or made any changes to it.
› Discuss any illnesses that you’ve had since your last visit.
› Check your feet.

Ask if you have any questions about your diabetes care.

IT TAKES A TEAM

In addition to your primary care provider, you may also need to see an eye doctor, a dietitian, a foot doctor, and a diabetes educator on a regular basis. That may seem like a lot of appointments. But this team approach to treating diabetes is often the best way to ensure a healthy and long life.

Source: American Diabetes Association
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Small Losses Can Mean Big Gains

Sometimes, just a little is enough.
Consider diabetes and weight loss. Studies show that losing only a few extra pounds if you’re overweight can lead to big improvements in your health.

According to the American Diabetes Association (ADA), losing as few as 10 to 15 pounds can help lower your blood sugar and blood pressure and improve your cholesterol levels. You may even be able to cut back on the amount of diabetes medications you take.

Your provider can help you develop a safe weight-loss plan. The ADA also offers these tips:

› Eat slowly. Turn off the TV during meals, and pay attention to your appetite. Stop eating when you start to feel full.
› Don’t go grocery shopping on an empty stomach, and buy only what’s on your shopping list.
› Don’t skip meals. You might overeat at your next one.

› Don’t deprive yourself. It’s okay to treat yourself to foods such as desserts or fast-food items that aren’t necessarily considered healthful—but don’t eat them very often, and only have small portions.
› Work exercise into your day. Bike or walk instead of driving. Take the stairs instead of the elevator. Do something active instead of watching TV.

Remember, every step you take for your health is a step in the right direction. If you get off track, you can always get right back on.

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Focus on Your Feet

Kick off your shoes and pull off your socks. But before you put your feet up and relax, get ready for a key part of diabetes self-care: inspecting your feet.

Your feet deserve close attention when you have diabetes. That’s because the disease can damage feet and increase the risk for sores or other problems that can escalate into major issues. For instance, if you get a cut or blister, poor circulation can stifle healing. Then if you have nerve damage, you might be unaware of the wound because you can’t feel it. Untreated wounds can become deep sores, called ulcers, that may get infected. In extreme cases, infections lead to amputation.

Checking your feet regularly (along with following the foot care advice from your health care team) can help you reduce these risks.

WHAT TO WATCH FOR

It’s best to check your feet daily. If it’s hard to see the bottoms of your feet, use a mirror or have someone help you. If you notice anything that concerns you, let your provider know.

Examine each foot carefully for possible problems, such as:

> Cuts or breaks in the skin
> Red spots
> Swelling
> Blisters
> Bruises
> Changes in the color or shape of the foot
> Ingrown toenails, corns or calluses
> Changes in the way the foot feels, such as reduced sensitivity to pain

Your doctor should also check your feet at each office visit. And you should have a thorough foot exam at least once a year. Ask your doctor what’s right for you.

Finally, make sure your doctor or nurse explains to you how to take care of your feet to reduce your risk of problems.

Sources: American Diabetes Association; American Podiatric Medical Association
Slow Cooker Italian Sausage and Vegetables

**INGREDIENTS**

1 (14.5-ounce) can no-salt-added diced tomatoes
1 teaspoon dried oregano
1 teaspoon dried basil
1 clove garlic, minced
2 teaspoons olive oil
4 ready-to-cook Italian turkey sausage links (about 3 ounces each)
1 large green pepper, sliced
1 medium onion, sliced
16 ounces frozen Italian-style vegetables (unseasoned broccoli, cauliflower, carrots, green beans, & zucchini)

*This recipe serves 4*

**INSTRUCTIONS**

1. In a small bowl, mix together the diced tomatoes, oregano, basil, and garlic. Set aside.

2. Heat the oil in a medium sauté pan over medium-high heat. Add the sausage and sauté for about 2 minutes per side until brown. Remove from the pan.

3. Layer the green peppers and onions on the bottom of the slow cooker (such as a Crock-Pot).

4. Place the Italian sausage links on top of the pepper and onion mixture. Pour frozen Italian vegetables on top of Italian sausage.

5. Pour the diced tomatoes mixture on top of the Italian sausage.

6. Place the cover on the slow cooker. Cook on low setting for 6 hours or until done (cooking times vary based on the slow cooker).

**NUTRITION FACTS**

_Serving Size: 1 1/4 cup_

- Calories: 245
- Carbohydrates: 16 g
- Protein: 21 g
- Fat: 11.0 g
- Saturated Fat: 2.1 g

_Sugars: 8 g
Dietary fiber: 5 g
Cholesterol: 70 mg
Sodium: 570 mg
Potassium: 805 mg_

_Source: diabetes.org_
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