Diabetes Toolkit

Educational/Promotional Materials

*Newsletter articles:* All audiences

1. 6 Things to Know About Diabetes
2. Are You at Risk for Type 2 Diabetes? Take the Test
3. Prediabetes: Answers to Commonly Asked Questions

*Newsletter articles:* Employees diagnosed with prediabetes/type 2 diabetes

1. Top Tips for Staying Healthy with Diabetes
2. The A-B-Cs of Managing Diabetes
3. Make Your Visit Count!

Newsletter Article Copy: All Audiences

*Option #1*

6 Things to Know About Diabetes

1. *Type 2 diabetes is the most common type*

According to estimates from the Centers for Disease Control (CDC), more than 37 million American adults have diabetes and type 2 accounts for 90% - 95% of diagnosed cases. This is a troubling trend that will likely continue as the the population ages and obesity remains a serious problem. One in four people with diabetes don’t know they have it and, as a result, are at greater risk for complications.

*Learn more about diabetes basics at* [*https://www.cdc.gov/diabetes/basics/diabetes.html*](https://www.cdc.gov/diabetes/basics/diabetes.html)*.*

1. *Genetics and family history play a role*

Studies have shown that family history can play a role in the development of type 2 diabetes. Your risk increases if you have a close relative (parent or sibling) with the disease. Lifestyle habits learned from parents during childhood, such as unhealthy eating or lack of regular exercise, can also impact your risk throughout life.

*Learn more about genetics of diabetes from the American Diabetes Association (ADA) at* [*https://diabetes.org/diabetes/genetics-diabetes*](https://diabetes.org/diabetes/genetics-diabetes)*.*

1. *Weight is a risk factor…but not always*

Being overweight or obese is a major risk factor for diabetes but not the only one. Keep in mind that not all overweight people have diabetes, and many people with the condition are a normal weight or only moderately overweight. This is why it’s important to understand all of the factors that increase your risk of developing diabetes.

*Learn more about misconceptions related to diabetes at* [*https://diabetes.org/tools-support/diabetes-prevention/diabetes-myths*](https://diabetes.org/tools-support/diabetes-prevention/diabetes-myths)*.*

1. *Inactivity is a primary risk factor for developing type 2 diabetes*

Regular physical activity can help lower your blood sugar, cholesterol and blood pressure. You may also find that regular exercise helps relieve stress, increases your energy and contributes to overall well-being. The American Diabetes Association (ADA) recommends at least 30 minutes of aerobic exercise at least five days a week. Include strength training, such as lifting weights, for a well-rounded program.

*Learn more from the ADA on* *lowering your risk of type 2 diabetes at* [*https://diabetes.org/healthy-living/fitness*](https://diabetes.org/healthy-living/fitness)*.*

1. *Prediabetes is a growing problem*

When your blood sugar is higher than normal but not high enough for a diagnosis of type 2 diabetes, you have prediabetes. There are no clear symptoms with prediabetes and eight out of 10 people who have it don’t know. An estimated 96 million Americans have prediabetes and without treatment many of these individuals will develop type 2 diabetes.

*Learn more about prediabetes from the CDC at* [*https://www.cdc.gov/diabetes/basics/prediabetes.html*](https://www.cdc.gov/diabetes/basics/prediabetes.html)*.*

1. *Race and ethnicity can be a risk factor*

The American Diabetes Association says that some groups have a higher risk than others of developing type 2 diabetes. These include African American, Hispanic/Latino, American Indian, Asian American and Pacific Islanders. Although this is one risk factor you cannot control, there are many things you can do to decrease your risk of developing type 2 diabetes. Lifestyle change involving weight, diet and physical activity are key in preventing, delaying onset and controlling type 2 diabetes.

*Learn more about risk factors for diabetes you can’t change at* [*https://diabetes.org/about-us/statistics/about-diabetes*](https://diabetes.org/about-us/statistics/about-diabetes)*.*

*Take the Type 2 Diabetes Risk Test at* [*https://diabetes.org/diabetes/risk-test*](https://diabetes.org/diabetes/risk-test)*.*

Newsletter Article Copy: All Audiences

*Option #2*

Are You at Risk for Type 2 Diabetes? Take the Test.

One in five Americans with diabetes is undiagnosed. Could you be one of them? Take the American Diabetes Association *Diabetes Risk Test* and learn more about your risk for getting type 2 diabetes.

Keep track of your points and add them up at the end to see your risk score. The higher your score, the higher your risk!

|  |  |  |  |
| --- | --- | --- | --- |
| Height | Weight (in lbs.) | |  |
| 4´ 10˝ | 119–142 | 143–190 | 191+ |
| 4´ 11˝ | 124–147 | 148–197 | 198+ |
| 5´ 0˝ | 128–152 | 153–203 | 204+ |
| 5´ 1˝ | 132–157 | 158–210 | 211+ |
| 5´ 2˝ | 136–163 | 164–217 | 218+ |
| 5´ 3˝ | 141–168 | 169–224 | 225+ |
| 5´ 4˝ | 145–173 | 174–231 | 232+ |
| 5’ 5” | 150–179 | 180–239 | 240+ |
| 5´ 6˝ | 155–185 | 186–246 | 247+ |
| 5’ 7” | 159–190 | 159–190 | 255+ |
| 5´ 8˝ | 164–196 | 197–261 | 262+ |
| 5’ 9” | 169–202 | 203–269 | 270+ |
| 5´ 10˝ | 174–208 | 209–277 | 278+ |
| 5’ 11” | 179–214 | 215–285 | 286+ |
| 6´ 0˝ | 184–220 | 221–293 | 294+ |
| 6’ 1” | 189–226 | 227–301 | 302+ |
| 6´ 2˝ | 194–232 | 233–310 | 311+ |
| 6’ 3” | 200–239 | 240–318 | 319+ |
| 6´ 4˝ | 205–245 | 246–327 | 328+ |
|  | **1 point** | **2 points** | **3 points** |
|  | If you weigh less than the amount in the left column: **0 points** | | |

1. **How old are you?**
2. Less than 40 years (0 points)
3. 40–49 years (1 point)
4. 50–59 years (2 points)
5. 60 years or older (3 points)
6. **Are you a man or a woman?**
7. Man (1 point)
8. Woman (0 points)
9. **If you are a woman, have you ever been diagnosed with gestational diabetes?**
10. Yes (1 point)
11. No (0 points)
12. **Do you have a mother, father, sister, or brother with diabetes?**
13. Yes (1 point)
14. No (0 points)
15. **Have you ever been diagnosed with high blood pressure?**
16. Yes (1 point)
17. No (0 points)
18. **Are you physically active?**
19. Yes (0 points)
20. No (1 point)
21. **What is your weight category?** (see chart at right)

Add up your score to the seven questions.

***If you scored 5 or more:*** You are at increased risk for having type 2 diabetes. Talk to your health care provider about simple blood tests to check for diabetes or prediabetes. Early diagnosis and treatment can prevent or delay heart attack, stroke, blindness, kidney disease, and other health problems.

***If you scored below 5:*** You may still be at increased risk for having prediabetes—blood sugar levels that are higher than normal but not high enough to be called diabetes. The good news for people with prediabetes is that you can lower your risk for type 2 diabetes. Talk to your health care provider about getting tested, particularly if you are over 45, overweight, or have a family member with diabetes. Find out about the small steps you can take to prevent or delay type 2 diabetes and live a long and healthy life.

Type 2 diabetes is more common in African Americans and people with African ancestry, Hispanics and Latinos, American Indians, Alaska Natives, Asian Americans, Native Hawaiians, and Pacific Islanders.

For more information, visit the American Diabetes Association at [www.diabetes.org](http://www.diabetes.org).

*Learn more about your risk for type 2 diabetes at* [*http://www.diabetes.org/are-you-at-risk/*](http://www.diabetes.org/are-you-at-risk/)*.*

Newsletter Article Copy: All Audiences

*Option #3*

Prediabetes: Answers to Commonly Asked Questions

It’s no secret – the number of people in the U.S. with diabetes is high and continues to grow. The Centers for Disease Control (CDC) estimates that more than 37 million Americans have diabetes and 90 – 95% of these have type 2.

What most people don’t know is that this number is just the tip of the ice berg. Floating right beneath the surface are millions of people with prediabetes, a condition when blood sugar is higher than normal but not high enough to be considered diabetes. Ninety-six million U.S. adults have prediabetes and eight out of 10 don’t know it.

To learn more, read the answers to these commonly asked questions about prediabetes:

*What is diabetes?*

Diabetes is a chronic disease in which the body either cannot make insulin or cannot use it properly, causing unhealthy levels of sugar to build up in the blood. There are two main types of diabetes. Type 1 is most common in children and young adults and accounts for only 5-10% of all diabetes diagnoses. In this case, the body cannot produce insulin, so daily doses are required. Currently, there is no known way to prevent type 1 diabetes. Type 2 diabetes is diagnosed most often in adults, develops over many years and can be prevented or delayed with lifestyle change.

*How is prediabetes different from type 2 diabetes?*

With prediabetes, blood sugar levels are higher than normal but not as high as with type 2 diabetes. Prediabetes is especially dangerous because it puts you at a greater risk for developing type 2 diabetes and is undiagnosed in most people who have it.

*What are the symptoms?*

Most people with prediabetes don’t have obvious symptoms. However, in some cases symptoms common in type 2 diabetes begin to appear. These can include urinating often, dry mouth/feeling thirsty, feeling very tired, blurry vision and cuts/bruises that are slow to heal. Since prediabetes has no clear symptoms, it is important to know your risk factors and talk to your doctor about a screening schedule appropriate for you.

*What problems can happen if I don’t know I have prediabetes?*

Some long-term complications related to type 2 diabetes may begin during prediabetes. These include heart, vision, nerve and kidney problems, which can develop over time if diabetes is untreated.

*Does prediabetes always lead to type 2 diabetes?*

No, not always. But being diagnosed with prediabetes does mean your risk of developing type 2 diabetes is much higher. There are certain actions you can take to help bring your blood sugar down to normal. Weight loss and moderate physical activity are important. Without this type of lifestyle change, many people with prediabetes will go on to develop type 2 diabetes.

*How can I prevent or delay the onset of prediabetes?*

According to the American Diabetes Association, whether you are at risk of developing prediabetes or have already been diagnosed, lifestyle change is critical. Take these two actions to prevent or delay prediabetes: First, lose weight. Even 5% - 7% of your body weight can help bring blood sugar down. This is around 8 – 11 pounds for a 150-pound person. Second, do regular physical activity. Get at least 30 minutes of moderate exercise at least five days each week.

*Read “The Surprising Truth About Prediabetes” from the CDC at* [*https://www.cdc.gov/diabetes/library/features/truth-about-prediabetes.html*](https://www.cdc.gov/diabetes/library/features/truth-about-prediabetes.html)*.*

*Find out if you may have prediabetes. Take the Prediabetes Risk Test at* [*https://doihaveprediabetes.org/take-the-risk-test/#/*](https://doihaveprediabetes.org/take-the-risk-test/#/)*.*

Newsletter Article Copy: Diagnosed with pre- and type 2 diabetes

Option #1

Top Tips for Staying Healthy with Diabetes

* Enjoy a healthy, balanced diet.

According the the American Diabetes Association (ADA), people diagnosed with type 2 diabetes don’t need to eat special foods. Keep your blood sugar in your target range by carefully planning your meals t0 include lean protein like fish, poultry and beans; fruits and vegetables; whole grains and low-fat dairy products. Scheduling snacks strategically between meals can also help. Consider seeing a registered dietitian or certified diabetes educator to make sure you have a meal plan that works for you.

*Read more about meal planning at* [*https://medlineplus.gov/ency/article/007429.htm*](https://medlineplus.gov/ency/article/007429.htm)*.*

* Aim for a healthy body weight.

Being overweight or obese increases your chances of diabetes-related complications. Losing even a modest amount of weight helps a person with diabetes better control their blood sugar and often improves energy and overall well-being. Losing weight and keeping it off can be a challenge, so try taking small steps focused on eating healthy foods in reasonable portions and getting physical activity on most days.

*Read more from the ADA at* [*https://diabetes.org/healthy-living/weight-loss/extra-weight-extra-risk*](https://diabetes.org/healthy-living/weight-loss/extra-weight-extra-risk)*.*

* Get regular physical activity.

This can help you better manage your blood sugar and, in some cases, can mean reducing your need for diabetes medication. To get started, talk with your doctor if you haven’t exercised in a while. Identify the barriers that might keep you from success and work to overcome them one at a time. Overall, aim to do some type of aerobic activity for at least 30 minutes five days each week. For a complete program, include strength training as well.

*Learn more about diabetes and physical activity at* [*https://www.cdc.gov/diabetes/managing/beactive.html*](https://www.cdc.gov/diabetes/managing/beactive.html)*.*

* Learn how to effectively manage your stress.

Excess stress makes it hard to manage diabetes. Stress hormones can change your blood sugar levels directly, causing it to increase quickly. Stress can also lead to unhealthy actions like drinking more alcohol, exercising less and eating to cope. All of these things make managing diabetes challenging. Learn ways to relax that work for you. These may include breathing exercises, progressive relaxation and/or physical activity. If you’re struggling with stress related to living with diabetes, seek support by talking with others in your situation. If you feel overwhelmed, talk with your doctor about a referral to a mental health professional.

*Learn more about managing stress and diabetes at* [*https://www.niddk.nih.gov/health-information/professionals/diabetes-discoveries-practice/helping-patients-with-diabetes-manage-stress*](https://www.niddk.nih.gov/health-information/professionals/diabetes-discoveries-practice/helping-patients-with-diabetes-manage-stress)*.*

* Protect yourself from the flu.

According to the Centers for Disease Control, if you have diabetes you are three times more likely to be hospitalized due to complications from the flu than other people. A flu shot is the best way to protect yourself from getting the flu. If you do get sick, talk with your doctor about special precautions you can take to make sure your blood sugar doesn’t go too low or too high.

*Learn more about flu and diabetes at* [*https://www.cdc.gov/flu/highrisk/diabetes.htm*](https://www.cdc.gov/flu/highrisk/diabetes.htm)*.*

* Monitor your blood sugar.

Checking your blood sugar is a good way to know how the food you eat, the activity you do and the medicine you take (if any) impact your blood glucose levels. If your doctor wants you to monitor your blood sugar at home, it’s important to work carefully with your diabetes care team so you understand when, how and how often to do this.

*Learn more about checking your blood glucose from the ADA* [*https://diabetes.org/healthy-living/medication-treatments/blood-glucose-testing-and-control/checking-your-blood-sugar*](https://diabetes.org/healthy-living/medication-treatments/blood-glucose-testing-and-control/checking-your-blood-sugar)*.*

* Take medications as prescribed by your doctor.

With type 2 diabetes, first line treatment typically involves a combination of lifestyle change and sometimes medication. If a prescription drug is part of your treatment plan, it’s very important to clearly understand your doctor’s instructions about how, when and how much to take.

*Read more about medications at* [*https://diabetes.org/healthy-living/medication-treatments*](https://diabetes.org/healthy-living/medication-treatments)*.*

Newsletter Article Copy: Diagnosed with pre- and type 2 diabetes

Option #2

The A-B-Cs of Managing Diabetes

People who are able to effectively manage their type 2 diabetes can live a long and healthy life. Want to learn more? Why not start with your A-B-Cs.

**A**sk your doctor about blood sugar monitoring.

Checking your blood sugar is a good way to know how the food you eat, the activity you do and the medicine you take (if any) impact your blood glucose levels. If your doctor wants you to monitor your blood sugar at home, it’s important to work carefully with your diabetes care team so you understand when, how and how often to do this. Here are a few tips:

* Talk with your doctor or other health professional involved with your care to help you choose a blood sugar monitor that meets your needs and is covered by insurance. Most are available at your local drug store.
* Make sure you learn how your meter works. It’s important to know exactly when, how and how often to test your blood sugar.
* Keep track of the date, time and blood glucose number each time you check. You can share this with your doctor during your visits.

*Read Checking Blood Glucose from the ADA at* [*https://diabetes.org/healthy-living/medication-treatments/blood-glucose-testing-and-control/checking-your-blood-sugar*](https://diabetes.org/healthy-living/medication-treatments/blood-glucose-testing-and-control/checking-your-blood-sugar)*.*

**B**alance the food you eat and get regular physical activity.

Healthy eating and regular exercise can help you control your blood sugar, lose weight or maintain a healthy weight, prevent problems related to diabetes, and have more energy.

Day to day, you need a healthy eating plan that helps you control your blood sugar.

* It’s important to understand how food impacts your blood sugar level. What, how much and when you eat all play a role in this.
* In the long term, a healthy and balanced diet will help prevent complications of diabetes such as nerve, kidney and heart damage.
* A registered dietitian or certified diabetes educator can help you create a healthy meal plan that meets your specific needs.

Regular physical activity improves your body’s sensitivity to insulin and can be as powerful as medication in helping to manage your blood sugar levels.

* If you take insulin, be sure to monitor your blood sugar before, during and after you exercise to determine how the type of activity you choose affects your blood glucose level.
* Try to get 30 minutes of moderate to vigorous physical activity five days each week. This can be as simple as a brisk walk. Include strength training to round out your exercise routine.
* If you haven’t exercised in a while or have other health conditions, check in with your doctor before starting any exercise program.

*Learn more at* [*https://diabetes.org/healthy-living/*](https://diabetes.org/healthy-living)*.*

**C**reate a supportive environment around you.

* Educate family and friends about diabetes. If you want help, tell your loved ones exactly what that looks like – maybe you need an exercise buddy or support as you switch to a healthy diet.
* Reach out to resources within your community, including a diabetes educator, pharmacist, social worker, exercise physiologist, psychologist, foot care specialist, eye care specialist. Seek out and talk with people who have diabetes for help coping with the challenges of managing the disease.
* Get help if you feel depressed. Studies show that people with diabetes have a greater risk of depression than those without the disease. Depression can have a major impact on an individual’s motivation and ability to self-manage the condition. So talk with your doctor if you think you’re experiencing depression.

*To learn more about how to support a loved one with diabetes, read 8 Tips for Caregivers at* [*https://diabetes.org/diabetes/loved-ones*](https://diabetes.org/diabetes/loved-ones)*.*

Newsletter Article Copy: Diagnosed with pre- and type 2 diabetes

Option #3

Make Your Visit Count!

If you’ve been diagnosed with diabetes, you may feel overwhelmed by all of the things you need to remember especially when it’s time to visit the doctor. Whether it’s your first diabetes-related visit or a follow-up, good communication with your health care provider is critical. While it’s easy to feel powerless after a diabetes diagnosis, you can take control by being an active participant in your care – including speaking up during appointments.

To maximize the short amount of time you have during your visit, prepare ahead of time. Write down important discussion topics like:

* Symptoms you’re experiencing
* Medications you are taking, including over-the-counter medications and vitamins/supplements
* Any test results you have
* Questions and concerns in order of importance. This way if you run out of time your most pressing questions will be covered.

Here are some questions you may have:

* Do I need any tests (cholesterol, A1C, urine test to check for kidney problems)? How should I prepare these tests?
* Should I monitor my blood sugar? If so:
* How and how often?
* What type of meter should I buy?
* Should I write the results down?
* Do I need to take medication? If so:
* When, how much and how often?
* Are there side effects?
* What if I miss a dose?
* Is there a generic alternative?
* What restrictions do I need to follow?
* Should I avoid certain foods? Where can I get help with meal planning?
* Can I exercise? What are the guidelines I should follow?
* Should I see a dietitian or diabetes educator?
* Are there other things I can do to manage my diabetes?
* Where can I learn more about diabetes? What websites do you recommend?
* Are there any tools I can use to track things like food intake, exercise, blood sugar and medication (if any)?
* I have other health conditions. How can I best manage these conditions together?