

DISTRICT 20W



**DIABETES
EDUCATION & AWARENESS
TOOLKIT**

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For an electronic copy of this Tool Kit and other diabetes resources and information, visit the Lions District 20W website at:
www.tinyurl.com/Lions20WDiabetes



www.facebook.com/LionsDistrict20WDiabetes



Constitutional Area 1 United States of America, Its Affiliates, Bermuda & The Bahamas



Number of active clubs in this region:
11,047

Average number of adults with diabetes per club community:
2,900

Constitutional Area overview	
Adult population 241.1 million	Adults with diabetes 32.0 million
Regional prevalence 13.29%	Undiagnosed diabetes cases 12.1 million
Diabetes-related deaths 194,928	Children with type 1 diabetes (0-19 years) 177,900

Highest adult (20-79 years) diabetes cases	
1 United States of America	31.0 million
2 Puerto Rico	438,700
3 Jamaica	226,500
4 Trinidad & Tobago	121,300
5 Guyana	50,400

Global statistics

- ▶ **1 in 11** adults has diabetes
- ▶ **463 million** people have diabetes; by 2045 this number will reach 700 million
- ▶ **1 in 2** adults with diabetes is undiagnosed (232 million), and at a higher risk of developing complications
- ▶ **374 million** people are at risk of developing type 2 diabetes
- ▶ **Over 1.1 million** children are living with type 1 diabetes
- ▶ **4 million deaths** were caused by diabetes in 2019
- ▶ **87%** of diabetes-related deaths occur in low- and middle-income countries
- ▶ **35%** of diabetes-related health expenditure is spent in low- and middle-income countries
- ▶ **1 in 6** live births (20 million) are affected by diabetes during pregnancy
- ▶ **760 billion** is spent diabetes-related health expenditure

IN PARTNERSHIP WITH



International Diabetes Federation

NEED MORE INFORMATION?

For more ways to serve for this global cause, please visit lionsclubs.org/diabetes

FACT: According to the CDC, 84.1 million American adults, that is more than 1 out of 3, have prediabetes.... 9 out of 10 people with prediabetes don't know they have it.

So, there is a HUGE need for not just education, but AWARENESS!!

What can Lions do?

- ❖ Share the Prediabetes Risk Test from the CDC & ADA
 - Table at other Lions events
 - Libraries
 - Health fairs

- ❖ Share resources where those with prediabetes and diabetes can go for assistance.
 - Insurance Discount programs
 - Price Chopper pharmacy's Diabetes Advantage Program

PARTNERSHIPS!

- ❖ ADCES (Association of Diabetes Care & Education Specialists)
 - Share AADE Tip Sheets
 - Use Diabetes Toolkit (*coming soon!*)
 - Certified Diabetes Paraprofessional on-line program

- ❖ Partner with local hospital, county health department, and/or Certified Diabetes Educators.
 - It's more than just sharing the test and encourage them to share the results with their healthcare provider. An extra step would be to give those who take it "a next step" on where they can go to get their questions answered. *Saratoga Lions have partnered with Saratoga Hospital and their Diabetes Educators. Use of a rack card that has the locations and contact information for the hospital's diabetes programs.*

- ❖ There are Cornell Cooperative Extensions all over NY State.
 - Their Food and Nutrition Educators go out in the community to put on programs related to diabetes prevention such as healthy eating classes or 'Dining with Diabetes' classes that Lions clubs can sponsor.

- ❖ Food pantries are looking for fresh produce.
 - Lions can volunteer to help pick up and transport fresh produce from local farms.
 - Many pantries do not have the proper refrigeration to store fresh produce. Lions clubs can apply for a small club grant to purchase coolers/refrigeration for the pantry.
 - Pantries, in many cases, have limited hours or are not easily accessible in outlying areas. Clubs can work with libraries to develop a program where fresh produce is brought in on certain days of the week (and can have Prediabetes Risk Test available too!). Or, can purchase small glass-front coolers to have placed in the library and keep it stocked and produce rotated.

- ❖ Get Moving!
 - Club programs to encourage the community to get moving!
 - Strides Walk
 - Running or Walking Club

ALSO, VERY IMPORTANT!!!

Make sure members of your Lions club have basic prediabetes/diabetes knowledge.
(See “Diabetes Breakdown”)

DIABETES BREAKDOWN

DIABETES occurs when one of the following occurs:

- When the pancreas does not produce any insulin (Type 1)
- When the pancreas produces very little insulin (Type 2)
- When the body does not respond appropriately to insulin, a condition called “insulin resistance”. (Insulin resistance is not a cause of Type 1 diabetes, but people with Type 1 who are insulin resistant will need higher insulin doses to keep their blood glucose under control than those who are more sensitive to insulin.)

TYPE 1 Diabetes: With Type 1 diabetes, your body does not make any insulin or “keys.” Without the insulin, or “keys”, there is no way to unlock the cells of your body to let in the blood glucose. Because blood glucose cannot move from your blood into your cells, the blood glucose stays in your blood. The blood glucose level in your blood can quickly get very high. This leads to severe problems in your body, putting your life in danger.

Your body must have insulin in order to live. If your body does not make its own insulin, you need to inject insulin into it. This gives your body the insulin “keys” it needs.

TYPE 2 Diabetes: With Type 2 diabetes, your body does make insulin, but it is not making as much insulin as your body needs or the insulin is not working as well as it should. Your “keys” don’t work very well at opening the locked doors to the cells. To stay healthy with Type 2 diabetes, you must keep your level of blood glucose under control. To control your level of blood glucose, it’s important to watch what you eat and stay physically active. Some people with Type 2 diabetes take medications as well.

- **Glycated hemoglobin (A1C) test.** This blood test, which doesn't require fasting, indicates your average blood sugar level for the past two to three months. It measures the percentage of blood sugar attached to hemoglobin, the oxygen-carrying protein in red blood cells.

The higher your blood sugar levels, the more hemoglobin you'll have with sugar attached.

A1C below 5.7 is considered normal.

A1C between 5.7 and 6.4 percent indicates prediabetes.

A1C level of 6.5 percent or higher on two separate tests indicates that you have diabetes.

- **Fasting glucose tolerance test.** This blood test is the simplest and fastest way to measure blood glucose and diagnose diabetes, after having nothing to eat or drink for 8 hours.

Fasting blood sugar level less than 100mg/dL is considered normal.

Fasting blood sugar level of 100 to 125mg/dL indicates prediabetes.

Fasting blood sugar level higher than 126mg/dL on two separate tests indicates that you have diabetes.

Glucose is the primary energy source for the body's cells. A steady supply must be available for use, and a relatively constant level of glucose must be maintained in the blood. During digestion, fruits, vegetables and other dietary sources of carbohydrates are broken down into glucose; they are absorbed by the small intestine and circulated throughout the body.

Insulin is the hormone made by the pancreas that allows your body to use sugar (glucose) from carbohydrates in the food you eat for energy. Insulin facilitates the transport of glucose into the body's cells. Insulin helps keep your blood sugar level from getting too high or too low.

INSULIN is the key that opens the locks to the cells to allow the glucose to move from the blood to the cell to provide energy.

What is prediabetes?

Prediabetes is a condition that comes before diabetes. It means your blood glucose levels are higher than normal but aren't high enough to be called diabetes.

There are no clear symptoms of prediabetes. You can have it and not know it.

If I have prediabetes, what does it mean?

It means you might get type 2 diabetes soon or down the road. You are also more likely to get heart disease or have a stroke.

The good news is that you can take steps to delay or prevent type 2 diabetes.

How can I delay or prevent type 2 diabetes?

You may be able to delay or prevent type 2 diabetes with:

- Daily physical activity, such as walking.
- Weight loss, if needed. Losing even a few pounds will help.
- Medication, if your doctor prescribes it.

If you have prediabetes, these steps may bring your blood glucose to a normal range. But you are still at a higher risk for type 2 diabetes.

Regular physical activity can delay or prevent diabetes.

Being active is one of the best ways to delay or prevent type 2 diabetes. It can also lower your weight and blood pressure, and improve cholesterol levels. Ask your health care team about activities that are safe for you.

One way to be more active is to try to walk for half an hour, five days a week. If you don't have 30 minutes all at once, take shorter walks during the day.

Weight loss can delay or prevent diabetes.

Reaching a healthy weight can help you a lot. If you're overweight, any weight loss, even 7 percent of your weight (for example, losing about 15 pounds if you weigh 200), may lower your risk for diabetes.



Make Healthy Choices

Here are small steps that can go a long way toward building healthy habits. Small steps add up to big rewards.

- Avoid or cut back on regular soft drinks and juice. Have water or try calorie-free drinks.
- Choose lower-calorie snacks, such as popcorn instead of potato chips.
- Include at least one vegetable every day for dinner.
- Be careful with salad toppings—the calories can add up fast.
- Choose fruit instead of cake, pie or cookies.
- Cut calories by:
 - Eating smaller servings of your usual foods.
 - When eating out, share your main course with a friend or family member. Or take half of the meal home for lunch the next day.
- Roast, broil, grill, steam or bake instead of deep-frying or pan-frying.
- Be mindful of how much fat you use in cooking.
- Avoid foods high in saturated fat, such as butter, lard and shortening.
- Use healthy oils, such as canola, olive and vegetable.
- Start with one meat-free meal each week by trying plant-based proteins such as beans or lentils in place of meat.
- Choose fish at least twice a week.

- Eat lean meats, such as the round or loin cuts, or chicken without the skin.
- Cut back on processed meats that are high in fat and sodium. These include hot dogs, sausage and bacon.
- Eat fewer and smaller portion sizes of desserts and treats, such as ice cream, cake and cookies. Try saving these for special occasions.

Track Your Progress

Write down what and how much you eat and drink for a week. Writing things down makes you more aware of what you're eating and helps with weight loss. Take note of the easier changes you can make to reduce your calories and start there.

Summing It Up

Diabetes is a common, but serious, disease. You can prevent or delay type 2 diabetes by increasing your activity and losing a small amount of weight.

Get Started

- Be physically active.
- Make a plan to lose weight.
- Track your progress.

Get Checked

If you are at increased risk for diabetes, ask your doctor about getting tested at your next visit. You can take our risk test at diabetes.org/risktest to find out if you are at risk for type 2 diabetes.



The American Diabetes Association® is here to help. For more information, visit us at diabetes.org or call **1-800-DIABETES** (800-342-2383).

Prediabetes Risk Test

1. How old are you?

- Younger than 40 years (0 points)
- 40–49 years (1 point)
- 50–59 years (2 points)
- 60 years or older (3 points)

Write your score in the boxes below

2. Are you a man or a woman?

- Man (1 point)
- Woman (0 points)

3. If you are a woman, have you ever been diagnosed with gestational diabetes?

- Yes (1 point)
- No (0 points)

4. Do you have a mother, father, sister, or brother with diabetes?

- Yes (1 point)
- No (0 points)

5. Have you ever been diagnosed with high blood pressure?

- Yes (1 point)
- No (0 points)

6. Are you physically active?

- Yes (0 points)
- No (1 point)

7. What is your weight category?

(See chart at right)

Height	Weight (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	191-254	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
	You weigh less than the 1 Point column (0 points)		



Total score:

Adapted from Bang et al., Ann Intern Med 151:775-783, 2009. Original algorithm was validated without gestational diabetes as part of the model.

If you scored 5 or higher

You are at increased risk for having prediabetes and are at high risk for type 2 diabetes. However, only your doctor can tell for sure if you have type 2 diabetes or prediabetes, a condition in which blood sugar levels are higher than normal but not high enough yet to be diagnosed as type 2 diabetes. **Talk to your doctor to see if additional testing is needed.**

Type 2 diabetes is more common in African Americans, Hispanics/Latinos, American Indians, Asian Americans, and Pacific Islanders.

Higher body weight increases diabetes risk for everyone. Asian Americans are at increased risk for type 2 diabetes at lower weights (about 15 pounds lower than weights in the 1 Point column).

You can reduce your risk for type 2 diabetes

Find out how you can reverse prediabetes and prevent type 2 diabetes through a **CDC-recognized lifestyle change program** at <https://www.cdc.gov/diabetes/prevention/lifestyle-program>.

Risk Test provided by the American Diabetes Association and the Centers for Disease Control and Prevention.



It's Not Too Late to Prevent Type 2 Diabetes

Tips for Older Adults

Take Your First Step Today

Did you know that as you get older, you have a greater chance of getting type 2 diabetes? It's true. You have a greater chance of getting diabetes if you are age 45 or older, are overweight or obese, or have a family history of diabetes.

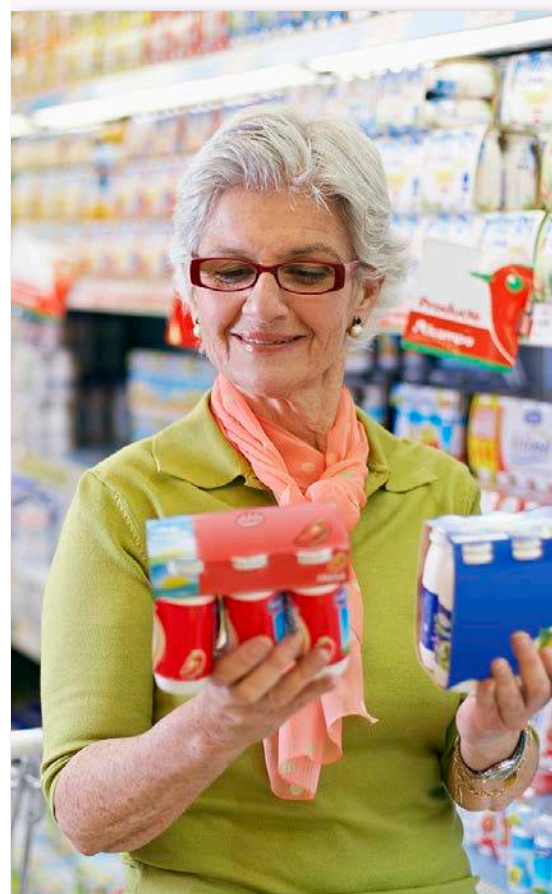
You can take steps to prevent or delay getting type 2 diabetes. If you are overweight, losing a modest amount of weight can help. A modest weight loss for a 200-pound person who wants to prevent or delay type 2 diabetes is about 10 to 14 pounds. Read this tip sheet to find out how.

Step 1: Eat well to help prevent or delay type 2 diabetes.

Taking steps to lose weight can include eating smaller meal portions and choosing healthy foods. Here are a few tips to help you get started with both.

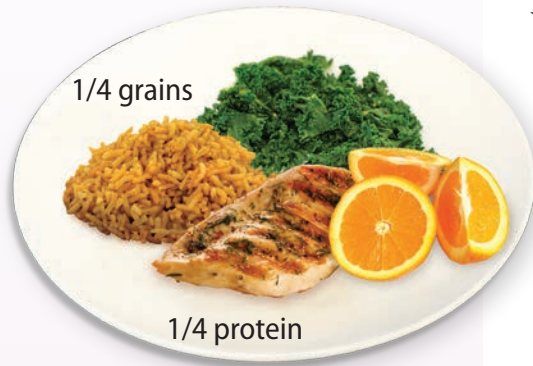
Choose healthy foods. Eat more fruits and vegetables and fewer high-fat foods to help with weight loss.

- Choose whole grain foods such as whole wheat bread, crackers, cereals, brown rice, oatmeal, and barley.
- Eat a mix of colorful fruits and vegetables.
- Choose fish, lean meat, and chicken and turkey without the skin.
- Eat foods that have been baked, broiled, or grilled instead of fried.
- Drink water instead of juice and regular soda.



Choose low-fat or skim milk, yogurt, and cheese.

1/2 vegetables and fruit



Reduce portion sizes and fill your plate like this.

Reduce portion sizes. Eat smaller amounts of food to help with weight loss.

- Fill half of your plate with fruits and vegetables. Fill one quarter with a lean protein, such as chicken or turkey without the skin or beans. Fill one quarter with a whole grain, such as brown rice or whole wheat pasta.
- Share your main dish when eating out or wrap half of it to go.
- Eat a small serving of dessert at the end of a healthy meal, but not every day. Sweets and desserts have a lot of fat and sugar.
- Eat small amounts of heart-healthy fats. Examples include nuts, seeds, and vegetable oils. For most nuts and seeds without the shell, a small amount would be 1 ounce or a small handful.



Stretch after being active.

Step 2: Start now to get moving — and have fun.

Moving more and sitting less can help you lose weight or stay at a healthy weight. It also can help you improve your strength and become more flexible. Ask your doctor how you can safely start to be more active.

Find ways to move more every day. Add more activity each day until you reach at least 30 minutes a day, 5 days a week.

- Get off the couch, turn on the music, and dance!
- Do not sit for long periods of time.
- Stretch and move around during commercial breaks.
- Walk around the house while you talk on the phone.
- Park your car farther away and walk if it is safe.



Go for a brisk walk.

Brisk walking is a great way to be active. During a brisk walk, you walk faster than your normal pace. Here are some tips to get you started:

- Start with 10 minutes a day if you are not active.
- Walk slowly for a few minutes to warm up then increase your speed over time.
- Wear walking shoes that fit your feet and provide comfort and support.
- Walk in safe places. Some good places for brisk walking include indoor or outdoor walking paths, a shopping mall, and community centers.

Remember to warm up and stretch. Before you start any activity, warm up slowly. Shrug your shoulders, swing your arms or march in place for 3 to 5 minutes before. Stretch after you have been active when your muscles are warm. Do not bounce or stretch so far that it hurts.

Step 3: Get your friends and family involved.

Making lifestyle changes can be easier with help from your loved ones.

- Offer fruit instead of cookies and chips when your grandkids, friends, and family visit.
- Show the younger people in your life the dances you enjoy.
- Enjoy a walk with friends or family around a park, museum, or zoo.
- Go for a swim with a friend. Moving around in water is gentle on your joints.

Step 4: Make a plan.

Use this section to plan how you will eat healthy foods and move more. Think about what is important to your health and what changes you are willing and able to make. To get started, choose one goal to work on and decide what steps will help you reach your goal.

Take Your First Steps

What's my goal?

(Example: I want to see if I can walk for 30 minutes, 5 days of the week.)

How will I get started?

(Example: I will walk for 10 minutes after lunch.)

What do I need to get ready?

(Example: I will put my walking shoes where I can see them every day.)

What might get in the way of making this change?

(Example: If it is bad weather, I will walk at the mall.)

How will I reward myself for sticking with my plan?

(Example: If I stick with my plan this week, I will watch a movie.)



Teach your kids or grandkids how to plant and take care of a garden.

Step 5: Find out how insurance coverage can help you prevent type 2 diabetes.

Medicare. Medicare covers all or some of the costs of certain exams, tests, and check-ups for people who have a greater chance of getting diabetes. Medicare will also cover certain weight loss services and programs.

Other health insurance. Other plans may also cover the costs of certain exams, tests, check-ups, and diabetes prevention programs approved by the Centers for Disease Control and Prevention (CDC) for people who have a greater chance of getting diabetes. Ask your doctor or insurance company what your plan covers.



Things to Remember:

- If you are overweight, set a goal to lose a small amount of weight to prevent or delay type 2 diabetes.
- Make healthy food choices and find ways to reduce your portion sizes.
- Let your doctor or health care team know you want to find ways to be active each day. If you have trouble moving, ask about safe ways you can be more active.
- Find out what services your health insurance plan covers to prevent or delay type 2 diabetes.

www.YourDiabetesInfo.org

This material was reviewed for technical accuracy by M. Kaye Kramer, R.N., M.P.H., Dr.PH, C.C.R.C. of the University of Pittsburgh Graduate School of Public Health, Andrea Kriska, Ph.D., M.S. of the University of Pittsburgh Graduate School of Public Health, and Linda M. Siminerio, R.N., Ph.D., C.D.E. of the University of Pittsburgh School of Medicine.

The U.S. Department of Health and Human Services' National Diabetes Education Program (NDEP) is jointly sponsored by the National Institutes of Health (NIH) and the Centers for Disease Control and Prevention (CDC) with the support of more than 200 partner organizations.

By joining a research study, people can help improve their health and the health of others. See www.clinicaltrials.gov and www.cdc.gov/diabetes/projects/index.htm.

To learn more:

National Diabetes Education Program

1-888-693-NDEP (1-888-693-6337)

TTY: 1-866-569-1162

www.YourDiabetesInfo.org

Request a free copy of the *Your GAME PLAN to Prevent Type 2 Diabetes* booklet. It has charts to help you track the foods you eat and how much you move each day.

Diabetes HealthSense: An online library of resources for living well.
www.YourDiabetesInfo.org/HealthSense

Centers for Disease Control and Prevention

1-800-CDC-INFO

(1-800-232-4636)

www.cdc.gov/diabetes

National Diabetes Prevention Program

www.cdc.gov/diabetes/prevention

Centers for Medicare & Medicaid Services

1-800-MEDICARE

(1-800-633-4227)

www.medicare.gov

National Diabetes Information Clearinghouse

1-800-860-8747

www.diabetes.niddk.nih.gov

Weight-control Information Network (WIN)

1-877-946-4627

www.win.niddk.nih.gov



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NDEP-75

The NIDDK prints on recycled paper with bio-based ink.



AADE7 Self-Care Behaviors® HEALTHY EATING

Healthy Eating refers to a pattern of eating high quality, nutritionally dense foods in amounts that lead to better health and wellness. A healthy eating pattern contains a variety of colorful vegetables, fruits, whole grains, dairy, lean sources of protein and oils, while keeping salt, added sugars, saturated and trans fats to a minimum.

word
wall

TRACK YOUR FOOD

Everything you eat or drink can affect your blood glucose (sugar), blood pressure, blood lipids (such as cholesterol) and weight. So how do you make sense of all that? One way is by tracking what you eat, at least for a few days until you start to see patterns that help you decide what changes you might choose to make.

Use mobile apps, paper and pencil logs, or whatever works best for you. You can achieve your weight and wellness goals by finding the right balance of calories and other nutrients to meet your goals. Tracking to identify trends to help reduce your overall calorie intake is the best way to determine how to create that balance.

PARTNER WITH YOUR HEALTHCARE TEAM

You probably have lots of questions about making healthy food choices such as how to include favorite foods and drinks, eating out, preparing healthy meals and snacks, what to eat when exercising, travelling or at family events.

When it comes to healthy eating, no one eating pattern fits everyone. Work together with your diabetes care and education specialist and registered dietitian to come up with a plan that fits what you like and meets your health needs.



Cardiometabolic health:

Keeping your heart and blood vessels healthy and your prediabetes or diabetes well-managed.

Nutritionally dense foods:

Foods that have a large amount of vitamins and minerals in a relatively small quantity of food.

Carbohydrates (Carbs)

include starches, fibers and sugars. Found in milk, fruits/juices, vegetables, rice, grains, bread, beans/lentils, sugar and honey.

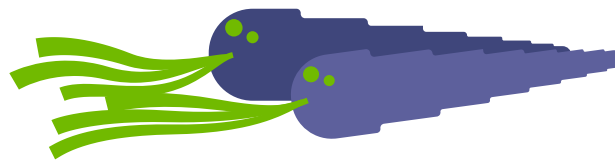
Proteins are made of amino acids which are the building blocks for repair and maintaining a healthy body. Found in milk, cheese, meats, poultry, fish, eggs, nuts and soy.

Fats: Concentrated energy source found in oils, nuts, spreads, olives, avocados, flax seed, peanut butter and salad dressings. Fat has twice as many calories per gram of food as compared to proteins and carbohydrates.



DIABETES CARE AND EDUCATION SPECIALISTS & REGISTERED DIETITIANS CAN HELP YOU:

- Set realistic, achievable healthy eating goals
- Review your food logs for trends and help you determine small changes that can help you meet your health goals
- Develop a meal plan that fits into your daily routine
- Learn about the right portions/serving sizes for you
- Understand how to use the nutrition facts label to make healthy choices
- Learn to count carbohydrates
- Learn about sources of salt and saturated fat in the foods you eat and small changes that can help you meet blood pressure or cholesterol goals
- Adjust meal plan for physical activity, holidays and travel
- Find apps for tracking or looking up food values



Question: Can people with diabetes eat sugar?

Answer: Yes, in moderation. Sugars are a type of carbohydrate counted as part of your total carbohydrate grams. Foods and drinks such as milk, fruit and starchy vegetables (like peas, corn and potatoes) that have natural sugars give you more than just calories. They contain nutrients that are healthier than chips or cookies. Added sugars are different and are listed under total sugars in the Nutrition Facts label. They include sugar that was added to the food during processing.

MAKING HEALTHY CHOICES: GETTING STARTED

EAT THESE FOODS MORE OFTEN		LIMIT THESE FOODS	
NONSTARCHY VEGETABLES	leafy greens, green beans, cucumbers, carrots, cauliflower, brussel sprouts and more.	ADDED SUGAR	candy, calorie containing drinks, baked goods and desserts.
LEAN PROTEIN	fish (salmon, tuna, cod, catfish, sardines, trout and others), chicken, turkey, eggs, nuts and soy foods	HIGH FAT MEATS	beef, skin from poultry, ribs, bacon, sausage, deli and processed meats like salami, bologna and hot dogs.
HEALTHY FATS	plant-based oils like vegetable, olive or canola.	FOODS HIGH IN SATURATED FAT	butter, lard, tropical oils (coconut, palm) ice cream and desserts.
FRUIT	small piece like apple, orange, peach or pear. small cup of berries.	SALTY SNACKS	potato chips, french fries, pickles, canned soups and table salt.

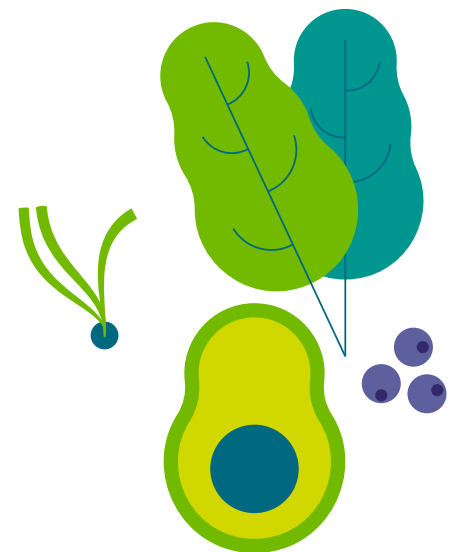
LEARN TO READ A NUTRITION FACTS LABEL

The Nutrition Facts label can help you make healthy eating and drinking decisions. Learn to read the food label to guide your choices by comparing similar foods and choices. Consult with your diabetes care and education specialist and your registered dietitian nutritionist for guidance.

Nutrition Facts	
8 servings per container	
Serving size	2/3 cup (55g)
Amount per serving	
Calories	230
% Daily Value*	
Total Fat 8g	10%
Saturated Fat 1g	5%
Trans Fat 0g	
Cholesterol 0mg	0%
Sodium 160mg	7%
Total Carbohydrate 37g	13%
Dietary Fiber 4g	14%
Total Sugars 12g	
Includes 10g Added Sugars	20%
Protein 3g	
Vitamin D 2mcg	10%
Calcium 260mg	20%
Iron 8mg	45%
Potassium 240mg	6%
<small>* The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.</small>	

This label shows that one serving is 2/3 cup. However, it has 8 servings per container. If you eat the whole container, you would have to multiply all the values by 8 to see the right totals for all the components.

The total carbohydrate amount takes into account the sugars and fiber. If you are carb counting, this is the number to pay attention to.



What you eat, how active you are and the medications you take work together to help you reach your diabetes care goals. Healthy eating has a big impact on your diabetes management and involves important skills, such as:

- measuring foods to get familiar with your portions
- determining the correct portions for you
- reading labels
- timing meals with medications
- being aware of or counting the carbohydrate foods you eat to better understand their impact on your blood glucose

Diabetes self-management education and support (DSMES) services teach these skills to their participants. Registered dietitian nutritionists also have this expertise and can help you. Ask your provider for a referral so that you can create your own personalized healthy eating plan to best manage your diabetes. You deserve it!

To learn how a diabetes care and education specialist can help you, visit DiabetesEducator.org/LivingWithDiabetes.

For more on this and other behaviors for better diabetes management, visit DiabetesEducator.org/AADE7.

SPEAKING THE LANGUAGE OF DIABETES:

Language Guidance for Diabetes-Related Research, Education, and Publications

How we talk to and about people with diabetes plays an important role in engagement, conceptualization of diabetes and its management, treatment outcomes, and psychosocial well-being. For people with diabetes, language has an impact on motivation, behaviors, and outcomes.

A task force, consisting of representatives from the American Association of Diabetes Educators (AADE) and the American Diabetes Association (ADA), convened to discuss language in diabetes care and education and developed a joint paper, which provides recommendations for enhancing communication about and with people who have diabetes.

Four principles guided this work and served as a core set of beliefs for the paper:

- ▶ Diabetes is a complex and challenging disease involving many factors and variables
- ▶ Stigma that has historically been attached to a diagnosis of diabetes can contribute to stress and feelings of shame and judgment
- ▶ Every member of the health care team can serve people with diabetes more effectively through a respectful, inclusive, and person-centered approach
- ▶ Person-first, strengths-based, empowering language can improve communication and enhance motivation, health and well-being of people with diabetes

Health care professionals, writers, researchers, and the general public are invited to join a language movement by considering and adopting the following five recommendations:

Use Language That...

- ▶ Is neutral, non-judgmental, and based on facts, actions, or physiology/biology
- ▶ Is free from stigma
- ▶ Is strengths-based, respectful, inclusive, and imparts hope
- ▶ Fosters collaboration between patients and providers
- ▶ Is person-centered

For additional resources, including the full list of word suggestions, [click here](#) or visit diabeteseducator.org/language



Problematic	Preferred	Rationale
<p>Diabetic (<i>as an adjective</i>) diabetic foot diabetic education diabetic person</p> <p><i>"How long have you been diabetic?"</i></p>	<p>Foot ulcer; infection on the foot Diabetes education Person with diabetes</p> <p><i>"How long have you had diabetes?"</i></p>	<ul style="list-style-type: none"> • Focus on the physiology or pathophysiology. • "Diabetic education" is incorrect (education doesn't have diabetes). • Put the person first. • Avoid using a disease to describe a person.
<p>Diabetic (<i>as a noun</i>)</p> <p><i>"Are you a diabetic?"</i></p>	<p>Person living with diabetes Person with diabetes Person who has diabetes</p> <p><i>"Do you have diabetes?"</i></p>	<ul style="list-style-type: none"> • Person-first language puts the person first. • Avoid labeling someone as a disease. There is much more to a person than diabetes.
<p>Non-diabetic; normal</p>	<p>Person who doesn't have diabetes Person without diabetes</p>	<ul style="list-style-type: none"> • See above. • The opposite of "normal" is "abnormal"; people with diabetes are not abnormal.
<p>Compliant/compliance/ non-compliant/ non-compliance</p> <p>Adherent/non-adherent/ adherence/non-adherence</p>	<p>Engagement Participation Involvement Medication taking</p> <p><i>"She takes insulin whenever she can afford it."</i></p>	<ul style="list-style-type: none"> • Compliance and adherence imply doing what someone else wants, i.e., taking orders about personal care as if a child. In diabetes care and education, people make choices and perform self-care/self-management. • Focus on people's strengths – what are they doing or doing well and how can we build on that? • Focus on facts rather than judgments.
<p>Control (<i>as a verb or an adjective</i>) controlled/uncontrolled, well controlled/poorly controlled</p>	<p>Manage</p> <p><i>"She is checking blood glucose levels a few times per week."</i></p> <p><i>"He is taking sulfonylureas, and they are not bringing his blood glucose levels down enough."</i></p>	<ul style="list-style-type: none"> • Control is virtually impossible to achieve in a disease where the body no longer does what it's supposed to do. • Use words/phrases that focus on what the person is doing or doing well. • Focus on physiology/biology and use neutral words that don't judge, shame, or blame.
<p>Control (<i>as a noun</i>) glycemic control; glucose control; poor control; good control; bad control; tight control</p>	<p>A1C Blood glucose levels/targets Glycemic target/goal Glycemic stability/variability</p>	<ul style="list-style-type: none"> • Focus on neutral words and physiology/biology. • Define what "good control" means in factual terms and use that instead.

PATIENT ASSISTANCE PROGRAMS

Most pharmaceutical companies offer financial assistance programs to persons who have trouble affording their diabetic medications or diabetic supplies.

Each program has specific criteria that must be satisfied in order for an individual to be considered eligible for a financial assistance program.

Contact Information for Pharmaceutical Companies:

INSULIN

Eli Lilly and Company (Insulin)

Lilly Diabetes Solutions Center
833-808-1234

www.lilly.com/diabetessolutioncenter

Humulin (insulin)

The Lilly Cares Foundation, Inc.
800-545-6962

www.lillycares.com

Novo Nordisk Pharmaceuticals, Inc. (Insulin)

800-727-6500

www.ada.cornerstones4care.com

Sanofi-Aventis Pharmaceuticals, Inc.

Patient Assistance Connection
888-847-4877

www.sanofipatientconnection.com

Insulins Valyou Savings Program

833-813-0190

www.insulinsvalyou.com

INSULIN SYRINGES

BD (Becton, Dickson and Company)

BD Insulin Syringe Assist Program
866-818-6906

www.bd.com

PRESCRIPTION MEDICATIONS

Pfizer

Drugs: Glucotrol (glipizide) and Glucotrol XL (glipizide extended release)
Connection to Care, Pfizer Helpful Answers

800-707-8990

www.phahelps.com

DISCOUNT PROGRAMS & DATABASES

BLINK HEALTH

Offers discounted prices for many medications.

(Works with Eli Lilly and Company)

www.blinkhealth.com

GOOD RX

Provides a searchable database of current prices and discounts for medications.

www.goodrx.com

Inside Rx

Offers discounted prices for many medications.

www.insiderx.com

Rx Assist

Provides a comprehensive database of pharmaceutical assistance programs.

www.rxassist.org

ACCU-CHEK

DISCOUNT PROGRAM/COUPONS FOR METERS & SUPPLIES

<https://www.accu-chek.com/microsites/free-medicare-blood-glucose-meter>

PRICE CHOPPER DIABETES ADVANTAGE PROGRAM

Receive free diabetes medication, supplies, and GE glucose meter. \$14.99 test strips (#50 GE)

Free Diabetes Medication:

- Glimepiride
- Glipizide
- Glipizide XL
- Glyburide
- Metformin
- Metformin ER

Free Diabetes Supplies:

- FREE GE Glucose Meter - \$11.99 50ct. GE Test Strips
- Lancets
- Lancet Device

MEDICARE GUIDELINES FOR DIABETIC SUPPLIES:

Medicare Part B Covers:

- Blood sugar (glucose) test strips
- Blood glucose monitors, lancet devices and lancets
- Glucose control solutions for checking the accuracy of test strips and monitors
- Insulin ONLY IF you are using a medically necessary insulin pump

There are coverage limits on the quantity and frequency you can get these supplies.

- If insulin dependent, may be able to get up to 300 test strips and 300 lancets every 3-6 months.
- If non-insulin dependent, may be able to get up to 100 test strips and 100 lancets every 3-6 months.
- If the physician says it is “medically necessary”, Medicare will allow additional test strips and lancets.

Medicare Part B Does Not Cover:

- Insulin (unless used with a medically necessary pump)
- Insulin pens, syringes, or needles
- Alcohol swabs or gauze

For specific information on what Medicare covers for diabetic supplies, visit:

<https://tinyurl.com/medicare-diabetes-coverage>

If you have Medicare prescription drug coverage (Medicare Part D), insulin and certain medical supplies used to inject insulin may be covered through the drug plan.

Generally, a consumer pays 20% of the Medicare-approved amounts for diabetic supplies. Those with a supplemental insurance, in addition to Medicare, may be able to have the 20% billed to that supplemental insurance.

Must get supplies from a pharmacy or supplier that is a “Medicare Provider”, enrolled in Medicare. If they are not, Medicare will not pay, and the consumer will have to pay the entire bill. All Medicare-enrolled pharmacies and suppliers must submit claims for diabetic testing supplies. A consumer cannot send in the claim themselves.

Need to ask pharmacy or supplier if:

- They are enrolled in Medicare
- They accept assignment

Contact Medicare to find participating pharmacies/suppliers:

- Medicare.gov/supplier
- 800-MEDICARE (800-633-4227)



PROJECT IDEAS DIABETES

LEARN

- Work with a healthcare professional to organize an educational talk about diabetes, pre-diabetes, prevention and management at your club or district meeting.
- Facilitate a discussion about diabetes to encourage club members to share their personal connections to the disease.
- Visit/explore the website of your national diabetes association and other organizations to learn more about diabetes.
- Share a low glycemic index snack at your club meeting and ask a nutritionist or diabetes educator to teach club members and their families about interpreting food labels.
- Sign-up for MyLION and learn how Lions and Leos are getting involved in diabetes service.
- Download an app that educates and encourages healthy lifestyle choices. Invite club members to participate in a healthy lifestyles related challenge.

ACT // BEGINNER

- Donate a diabetes magazine subscription or diabetes-related books to your local library.
- Invite a role model with diabetes to a local school to talk about healthy lifestyle choices.
- Sponsor a child to attend a diabetes camp and/or supply a camp with needed supplies.
- Post monthly notices on your club or district website and social media accounts, sharing available community resources for people with or at risk of diabetes.
- Write about healthy lifestyle choices in your community or school newspaper.
- Organize a Strides: Lions for Diabetes Awareness event in your community.
- Develop a list of patient resources and services and distribute them to Lions and the public.

ACT // INTERMEDIATE

- Partner with healthcare professionals to organize a screening for diabetes, diabetic retinopathy and diabetic foot.
- Promote diabetes prevention through social media campaigns or radio announcements.
- Volunteer for a day at a diabetes camp. Visit www.diabetescamps.org to find a camp near you.
- Sponsor a healthy cooking demonstration for people with diabetes and pre-diabetes.
- **Organize a weekly walking club at your place of work and share a healthy snack afterwards.**
- Bring fresh fruits or vegetables to an elementary school classroom to encourage children to try a variety of healthy foods.
- Collaborate with a healthcare professional to organize a physical activity and promote exercise.
- Donate needed exercise equipment to a community center or school.

ACT // ADVANCED

- **Organize a community support group for people diagnosed with diabetes and their families.**
- Work with a healthcare professional to organize a mentorship program, pairing a younger person with diabetes with an older mentor.
- Organize a school or community vegetable garden to encourage healthy eating.
- Establish a fitness room or ongoing fitness classes at a community center or school.
- Sponsor a training program for community healthcare workers to learn about screening, community support programs and prevention of diabetes complications.

