



NEBRASKA
 Diabetes Prevention
 and Control Program

WINTER 2013

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The Nebraska Lions Club helped illuminate the State Capitol in blue in honor of World Diabetes Day on Wednesday, Nov. 14. (Photos by Bill Wiley)

LEARN YOUR RISK FOR DIABETES

By Joshua R. Russo,
 Diabetes Prevention and Control

More than 115,000 children and adults in Nebraska have diabetes. And in recent years, there has been a substantial increase in the number of people diagnosed – up from 60,000 in the year 2000.

With the increase over the past decade, DHHS' Diabetes Prevention and Control Program encourages everyone to learn about diabetes and take the Diabetes Risk Assessment at www.defendagainstdiabetes.ne.gov to see if they are at

risk for Type 2 diabetes.

The assessment test is free, takes less than an minute and serves as a “wake-up call” to people unaware that they may have diabetes or pre-diabetes.

Type 2 diabetes is a chronic disease marked by elevated blood sugar levels caused by the body not producing or properly using insulin. Insulin helps glucose (sugar) leave the blood and go into the body's cells to turn into energy. If not treated, the sugar that builds up in your

blood can damage your heart, kidneys, eyes and blood vessels.

Many Nebraskans also have pre-diabetes, which is when blood glucose levels are higher than normal but not yet high enough to be diagnosed as diabetes. About 76,000 Nebraskans have pre-diabetes, although the total adult population with pre-diabetes—including diagnosed and undiagnosed cases—may be as many as 450,000.

See **RISK** on Page 3

RECIPES

Rice Meatballs

1 cup instant rice
 1/4 teaspoon salt
 1 pound extra-lean ground beef
 1/8 teaspoon marjoram
 1 egg, slightly beaten
 Dash of pepper
 1/4 cup grated onion
 2 1/2 cups low-sodium tomato juice
 1/4 cup grated onion

Mix all ingredients together except two cups of the tomato juice. Form into meatballs. Place meatballs into a skillet. Brown meatballs and drain off any fat. Pour remaining tomato juice over meatballs. Bring to a boil; reduce to medium heat; cover and cook for 15 minutes. Makes six servings.

One serving:

Calories: 241 Carbohydrates: 18 grams
 Protein: 19 grams Fat: 10 grams
 Saturated Fat: 4 grams
 Exchanges: 2 medium-fat meat, 1 carb.
 Cholesterol: 87 mg Fiber: 1 gram
 Sodium: 152mg Potassium: 456 mg
 Calcium: 22 mg

Tabouli Salad

1/2 cup cracked wheat
 1 cup fresh parsley
 3 tomatoes
 1/2 cup lemon juice
 1 green pepper
 1/4 teaspoon salt
 1 medium onion
 2 tablespoons cooking oil
 1 cucumber

Soak wheat in two cups cold water for one hour. Dice tomatoes, green peppers, onion and cucumber; mix together with cracked wheat. Add parsley, lemon juice, salt and oil. Chill and serve cold. Makes eight servings.

One serving:

Calories: 106 Carbohydrates: 17 grams
 Protein: 3 grams Fat: 4 grams
 Saturated Fat: Trace Fiber: 3 grams
 Sodium: 80 mg Cholesterol: 0 mg
 Potassium: 309 mg Calcium: 28 mg
 Exchanges: 1 carb., 1/2 fat

Muffins

1 egg
 2 tablespoons sugar

1 cup skim milk
 3 teaspoons baking powder
 2 tablespoons salad oil
 1/2 teaspoon salt
 2 cups flour

Oil bottom of 12 muffin cups. Beat egg; stir in milk and oil. Mix in remaining ingredients just until flour is moistened. Batter should be lumpy. Fill muffin cups 2/3 full. Bake at 400 degrees for 20-25 minutes, or until golden brown. Remove from pan immediately. Makes 12 muffins.

One serving:

Calories: 117 Carbohydrates: 19 grams
 Protein: 3 grams Fat: 3 grams
 Saturated Fat: Trace Fiber: 1 gram
 Exchanges: 1 carb, 1/2 fat.
 Cholesterol: 16 mg Sodium: 226 mg
 Potassium: 61 mg Calcium: 98 mg

Hot Cocoa

1 cup skim milk
 1 packet artificial sweetener
 2 teaspoons cocoa powder

Heat skim milk. Stir in cocoa and artificial sweetener. Makes one serving.

One serving:

Calories: 101 Carbohydrates: 14 grams
 Protein: 11 grams Fat: 1 gram
 Saturated Fat: 1 gram Fiber: 1 gram
 Sodium: 127 mg Cholesterol: 4 mg
 Potassium: 462 mg Calcium: 306 mg
 Exchanges: 1 carbohydrate

For more recipes, contact Joshua Russo at (402) 471-2648, or Joshua.russo@nebraska.gov for a free copy of the 'Healthy Diabetes Recipes and More' cookbook.

Start Fresh This New Year.

Use these tips to plan for a healthy 2013.

Stay Healthy – See a Doctor



Call a doctor to schedule a checkup.



Make a list of questions for the doctor.



Get important shots.



Start a folder for health information.

Practice Healthy Living – Every Day



Eat a healthy breakfast.



Always buckle up in the car.



Take short breaks at work to stretch.



Get enough sleep.

DEPRESSION, DIABETES LINKED

By the Nebraska Department of Health and Human Services

People with diabetes are twice as likely as the average person to have depression, according to the National Institute of Mental Health.

“Depression is a black hole. It can take the joy out of life,” said Scot L. Adams, director of the Division of Behavioral Health at the Nebraska Department of Health and Human Services. “It can drain energy and motivation and cause feelings of hopelessness. Even worse, depression can make the task of managing diabetes much more difficult.”

“Research shows that people with depression are more likely to skip medications, get little exercise, have an unhealthy diet, and have difficulty managing their weight,” said Dr. Joann Schaefer, Chief Medical Officer and Director of the Division of Public Health. “In addition, chronically high blood glucose levels may worsen depressive symptoms. It’s important to address both the diabetes and the depression for a long-term health gain.”

When combined with diabetes, depression contributes directly to poorer blood glucose control, more frequent hospital visits, higher risk of long-term complications (such as heart disease and retinopathy) and a shorter life span.

Adhering to a nutritional diet, monitoring blood glucose levels and dealing with diabetes complications can be burdensome for people with depression.

Studies have shown that people with diabetes and depression have more severe diabetes symptoms than people who have diabetes alone.

“Too many people never seek treatment for depression,” Adams said. “As a result, they suffer with depression unnecessarily and for far too long.”

“Good treatment for depression leads to good treatment for diabetes,” Dr. Schaefer said. “It will help people with diabetes feel better, have more energy and concentration, and have more motivation to take care of themselves.”

“Good treatment for depression leads to good treatment for diabetes.”

— Dr. Joann Schaefer, Chief Medical Officer and Director of the Division of Public Health



Risk: Continued from Page 1

Nearly one-fourth of those with Type 2 diabetes do not know they have it. Often, diagnosis comes seven to 10 years after the onset of the disease.

Early diagnosis is critical to successful treatment, delaying or preventing complications such as heart disease, blindness, kidney disease, stroke, amputation or death.

DHHS and the American Diabetes Association, along with other diabetes-related organizations, encourage supporters to fight the worldwide epidemic of diabetes by helping to ensure that people with diabetes have access to care, treatment and education. Also, an increase in community awareness of risk factors and symptoms related to diabetes can improve the likelihood that people with pre-diabetes will get the attention they need before developing the disease and its devastating complications.

The Diabetes Prevention and Control Program promoted several events during Diabetes Awareness Month in November. The Program aired ads on Channel 10/11 from Nov. 5-25 to bring awareness to the Diabetes Risk Assessment at www.defendagainstdiabetes.ne.gov

The ads feature a man who lost more than 100 pounds and reversed the effects of diabetes.

Other events and information can be found at the Diabetes Prevention and Control Program webpage at www.dhhs.ne.gov/diabetes.

PANHANDLE PROGRAM ACTIVELY LOWERS DIABETES RISK

By Joshua R. Russo,
Diabetes Prevention and Control Program;
Tabi Prochazka,
Panhandle Public Health Department;
and the Diabetes Prevention Program

Type 2 diabetes is preventable. According to a research study called the Diabetes Prevention Program, people can reduce their risk of type 2 diabetes by 58% by losing just a little bit of weight.

People in the Panhandle have a program that helps them do exactly that.

“The (Nebraska Diabetes Prevention Program) brings the proven success of the Diabetes Prevention Program research study to communities around the country and we are thrilled to offer classes,” said Tabi Prochazka of Panhandle Public Health Department, which serves Banner, Box Butte, Cheyenne, Dawes, Deuel, Garden, Kimball, Morrill, Sheridan and Sioux counties.

The program is operated through the Panhandle Public Health Department and the Nebraska Department of Health and Human Services’ Division of Public Health. It is a year-long lifestyle change program in which people at risk for Type 2 diabetes meet in a group with a trained lifestyle coach. Participants must have a body mass index (BMI) of 24 or higher, have pre-diabetes, or have been told by a doctor that they are at risk for developing Type 2 diabetes. They must also be older than 17.

Classes started Jan. 17 in Oshkosh, and another will start in February in Alliance. Prochazka said there will be other classes this spring in the Panhandle.

The NDPP focuses on accomplishing two major goals. First, participants must lose 5% to 7% of their starting body weight over the course of the program. Second, they must do at least 150 minutes of physical activity each week.

Aside from the two major goals, the program teaches skills and tools to make changes in life. During the program, participants learn ways to incorporate healthy eating and physical

activity into their lives. They also learn techniques to handle stress and strategies to overcome barriers to a healthy lifestyle. All programs are led by lifestyle coaches who have been specially trained by the Diabetes Training and Technical Assistance Center.

Participants meet weekly for approximately 16 weeks, then monthly for the remainder of the year. During the year, participants keep track of their food intake and physical activity and work with the lifestyle coach and the group to overcome barriers to a healthy lifestyle.

The group interaction is crucial to the program’s success. With a supportive group to cheer their successes and empathize with their setbacks, participants don’t have to make lifestyle changes alone.

In the year it has been implemented in the Nebraska Panhandle, there is already success. People are losing weight and changing their lives.

“The realistic weight loss goal set by the program and the weekly meetings with the lifestyle coach and group support have kept me accountable and focused,” said a participant of the Nebraska Diabetes Prevention Program. “I have lost 23 pounds, exceeding the 7 percent goal, in eight weeks. I still eat the foods I like, just have the tools and am aware of how portion sizes and exercise affect long term success.

“I have been a yo-yo dieter for years, but now, I am in control. I have more energy and the tools to reach my pre-baby weight, after 20 years. I feel confident because of this program. My kids are also reaping the benefits and enjoying being active with me and eating more balanced.”

You can test your risk for diabetes by completing the risk assessment at defendagainstdiabetes.ne.gov, or by tak-



ing the assessment at www.pphd.org/DPP.html. A test to measure your blood sugar can also define risk.

For more information about the program, contact Prochazka at (866) 701-7173, ext. 107, or email tprochazka@pphd.org.

To learn more about the program at the national level, go to the Centers for Disease Control website at www.cdc.gov/diabetes/prevention.

Nebraska Diabetes

Prevention

Program Goals

— Lose 5% to 7% of their starting body weight over the course of the program.

— Do at least 150 minutes of physical activity each week.

EAT HEALTHY DURING WINTER GATHERINGS

Winter is a season of celebrations, football playoffs, and other occasions when family and friends get together over meals and snacks. For people with Type 2 diabetes, it can be especially challenging to stick to a meal plan.

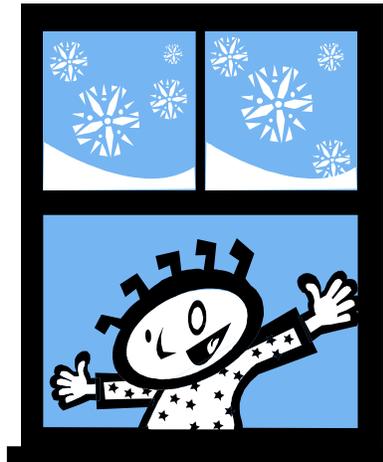
Mouth-watering options such as honey-baked ham, buttery mashed potatoes, and sweet yams are popular for festive dinners, while chicken wings, cheesy nachos, and chips are among the favorites at football playoffs and other gatherings. However, you don't have to completely sacrifice all of your favorite foods. The key is to make a variety of healthy food choices and limit portion sizes.

Follow these tips from the National Diabetes Education Program to help you eat healthy during gatherings throughout the winter:

- **Eat a healthy snack.** Eating a healthy snack prior to leaving home can prevent overeating at a party.
- **Plan ahead.** Check out the party food options before you begin eating, and make a mental note of what and how much you will eat. Your food choices should fit into your meal plan.
- **Bring a dish.** Share your healthy dish with family and friends.
- **Move away from the buffet.** Fix your plate, and then step away from a table of finger foods to avoid grazing while chatting.
- **Savor the flavor.** Eating slowly reduces your chances of overeating.

Follow these tips from the National Diabetes Education Program to help you eat healthy during gatherings throughout the winter:

- **Drink H₂O.** Water is a healthy, no-calorie beverage. Drink plenty of it.
- **Easy on the toppings.** Lighten your recipes by using reduced-fat or fat-free mayonnaise, butter, sour cream, or salad dressing.



- **Increase fiber.** Serve whole grain breads, peas, and beans as part of your meals.
- **Bake it. Broil it. Grill it.** Consider healthy alternatives to traditional meats. Choose skinless meat or poultry and avoid fried dishes.
- **Focus on fruits.** Serve fresh or canned fruits instead of ice cream, cake, or pie. Transform high fat, high-calorie desserts by replacing whole milk or whipped cream with 1 percent or nonfat milk.
- **Serve low-calorie beverages.** Offer your guests sparkling water or diet beverages.
- **Party hard.** Focus on family, friends, and activities rather than food. Stay active by participating in games or dancing.
- **We're all in this together.** Support your family and friends by encouraging them to eat healthy during the winter months and throughout the year.

To find out more information about the *Control Your Diabetes. For Life.* campaign and to order free materials and resources, go to <http://www.YourDiabetesInfo.org> or contact the National Diabetes Education Program at 1-888-693-NDEP (6337).

TIPS TO DEAL WITH LONELINESS

Winter can be a lonely time, especially for those who are unable to travel to be with their family, who don't have a family, or who may have recently lost a close family member or friend.

Tips for the winter:

Help others. A strong remedy for loneliness is taking the focus off yourself to help others. Do you have an elderly neighbor who is alone and needs shopping done? Is there a soup kitchen in your community? What about the Red Cross, the homeless or battered women's shelters? Volunteering can help you have a sense of meaning and purpose.

Stay in touch. If you can't be with family and friends because you're not able to travel, reach out to them on e-mail, Facebook or Twitter. Set up a Skype call with family or friends. Maybe you have a friend to spend time with. Talk about getting together and celebrating.

Reach out. If you feel isolated, seek out community, religious or other social events. They can offer support and companionship. Or visit a nursing home. You will find people there who may have no one to spend time with. Spending time caring about another lonely person will go a long way toward eliminating your own loneliness.

Celebrate your solitude: This is your time to do what you want to do. Make a favorite treat. Read, play music, and watch your favorite movies.

Don't drink. Alone and drunk is not a good combination. Chances are that you'll become emotional or depressed. Have some hot cider instead.

Behavioral health resources can be found at the Network of Care at www.dhhs.ne.gov/networkofcare. The Nebraska Family Helpline is another resource that is answered 24/7 at 1-888-866-8660. Support for people with behavioral health conditions is available to help.

Call the DHHS Office of Consumer Affairs weekdays 8 a.m. to 5 p.m. to get information on peer support at 1-800-836-7660.

— Nebraska Department of Health and Human Services

QUIT TOBACCO WITH THE TOBACCO FREE NEBRASKA'S QUITLINE

By Joshua R. Russo,
Diabetes Prevention and Control
Program

A rural Nebraskan was a heavy smoker of cigars and cigarettes. He tried to quit smoking several times before, but was unsuccessful. Eventually, he went to a medical center with heart issues and he continued to smoke.

That was before he called the Nebraska Tobacco Quitline.

After placing the call, determining a course of action – and with individual support from a health department – he was able to quit smoking. After three smoke-free months, he was happy to share his story.

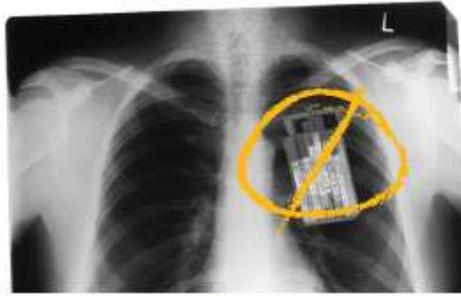
“He was very excited because it was something he could not do alone,” said Shirley Deethardt, a Community Health Educator with the Health Promotion Unit, Nebraska Department of Health and Human Services. “When you are a smoker, you have to change your behavior. It was hard (for him) to go more than six hours (without a cigarette).”

The Quitline is sponsored by the Tobacco Free Nebraska Program. The toll-free Quitline – 1-800-Quit-Now (1-800-784-8669) – gives Nebraska residents free access to counseling and support at any hour. It has more than 3,000 callers a year, and many of which are low-income and have a chronic disease, such as asthma or COPD.

The Quitline averages 250 to 280 calls a month. The need was great for the current Quitline when it was created in 2005, and there continues to be a need.

About 276,000 Nebraska adults are smokers, which equates to 20 percent of the adult population.

“The Quitline is a wonderful way



Picture Your Life Without Tobacco

QuitNow.ne.gov | 1-800-QUIT-NOW

for every smoker to get support and resources free of charge, because the Nebraska Tobacco Quitline is open to all of the residents of the state of Nebraska,” Deethardt said.

While all people are encouraged to quit smoking, people with diabetes should be especially concerned about tobacco’s effects.

Quitting smoking leads to better blood sugar control and better blood pressure. Smoking raises blood glucose and blood pressure. A smoker’s blood pressure has been shown to drop 20 minutes after quitting.

There is also less of a risk of blindness. Smoking raises the risk of diabetic eye disease, one of the leading causes of blindness. Quitting also leads to better foot circulation, lessening chances of a foot ulcer which could lead to amputation. One of the best reasons to quit is a lower risk of heart attack or stroke, and the risk of renal failure is higher for smokers.

The health benefits from quitting are both long- and short-term. Within 12 hours, the carbon monoxide level in a person’s blood drops to normal. Within two weeks to three months, circulation improves and lung function increases.

Within one year, a person’s risk of coronary heart disease will be half

that of a continuing smoker’s.

The Quitline is relatively easy for callers, Deethardt said. Calls to the Quitline are answered by trained cessation counselors/coaches at Alere WellBeing. During the first call, a person is given a choice of services, including telephone counseling, self-help materials, referrals to community programs, or a combination of these.

If a person chooses counseling, they are immediately offered a brief counseling session and given the option to enroll in proactive counseling as well; in which counselors call the person at a time that fits their schedule.

“Once you contact the Quitline, they will connect with you,” said Deethardt, who added that there are also follow-up calls after seven months and 13 months after the quit date. The quit rate – those who continue to be tobacco-free – after 13 months is currently between 25 percent and 27 percent.

The counselor or coach on the phone then tries to understand the caller’s pattern and history of smoking. The caller is asked to set goals and an eventual quit date. The second call with the Quitline is the day after the established quit date.

Web coaching and online support is also available through the Quitline. The website, QuitNow.ne.gov, connects to other resources and cessation sites including a text messaging option. Callers also have access to self-help guides, brochures and quit guides.

Calls to the Quitline are completely confidential. Once a person registers, demographic information about the caller is collected; however, no names are collected.

For more information about the Quitline, go to QuitNow.ne.gov.

UPCOMING CONFERENCES AND EVENTS

New Perspectives in Managing Diabetes

*7 a.m. to 4 p.m., Friday, March 15, 2013
Holiday Inn Hotel and Conference Center — Kearney*

The Nebraska Association of Diabetes Educators is sponsoring its annual symposium for professionals. The target audience for the symposium is nurse practitioners, RNs, LPNs, nursing assistants, pharmacists, dietitians, social workers and others who work with diabetes and persons with diabetes in a variety of settings.

At the conclusion of the program, participants will be able to:

- Describe the current prevalence of childhood obesity, the concept of energy balance and the health environment our children are living in today;
- Discuss how childhood obesity is measured, BMI tracking and pediatric obesity treatment programs;
- Explain the difference between diabetes and pre-diabetes;
- List treatments used for pre-diabetes to decrease risk of developing diabetes;
- Describe the nutrition guidelines for diabetes management;
- Identify motivational interviewing processes for facilitating change in clinical encounters.
- Discuss patient stages of readiness for adopting self-care skills and strategies to enhance motivation toward positive self-care.
- Discuss tools to help patients manage diabetes with nutrition and lifestyle change; among other topics.

The meeting will provide healthcare professionals with an interactive experience in working and living with diabetes. Registration information will be sent in January, and continuing education credits will be offered to the participants.

For more information, contact Cindy Polich at cpolich@nebraskamed.com.

Free Family Workshop

*2 p.m. to 4 p.m., Sunday, April 7,
Nebraska History Museum*

This workshop at the Nebraska History Museum will focus on how health care has changed throughout history, and there will be information available about diabetes in Nebraska.

Helping Your Patients Thrive with Diabetes

*8 a.m. to 3:30 p.m., Saturday, April 13, 2013
Ramada Plaza Omaha Hotel Convention Center — Omaha*

The conference, hosted by the Diabetes Education Center of the Midlands, is an opportunity to update healthcare providers with the specific treatment options to achieve targets in diabetes care.

The sessions are designed for RNs, LPNs, dietitians, pharmacists, and other health care professionals who care for patients with diabetes.

At the end of the conference, participants will be able to:

- Explain the role of incretin hormones versus insulin and when each is appropriate for diabetes management.
- Identify strategies for helping patients with diabetes balance difficult schedules.
- Explain the role of exercise on blood glucose control and management.
- Describe Mindful Eating Concepts and how utilizing these concepts in your practice can help patients learn when, what, and how much to eat without following rigid rules.
- Describe the effects of untreated or poorly treated diabetes on oral health and the periodontium.

General registration, which includes lunch, is \$80. Walk-in registration is \$95 and will be accepted based on space available. The pre-registration deadline

is April 8. Breakfast will not be served.

For more information or to register, call (402) 399-0777, ext. 217.

Dream Gala

*Saturday, May 11, 2013
Location to be determined*

The Premier Gala in Lincoln — sponsored by the Heartland Chapter of the Juvenile Diabetes Research Foundation — is a black tie optional evening of auctions, dining, and fun while raising money to find a cure.

The 2013 theme is “A Mother’s Wish.”

Tour de Cure Nebraska

*Saturday, June 1, 2013
Sарy County Fairgrounds in Springfield, Neb.*

The Tour de Cure is more than just a cycling event. It’s a life-changing event. A day full of fun and excitement in which riders of all levels join forces in the fight to stop diabetes and raise critical funds for diabetes research, education and advocacy in support of the American Diabetes Association.

The Tour is a ride, not a race. Whether you are an occasional rider or an experienced cyclist, there is a route just for you. All route information is available once you register. Contact Amy Bellows at abellows@diabetes.org for more information.

Father of the Year Awards Ceremony Gala

*5 p.m. to 7 p.m., Thursday, June 13, 2013
Hilton Omaha, 1001 Cass Street, Omaha*

Made possible by a partnership of local volunteers, the Father’s Day Council, and the American Diabetes Association, the Father of the Year Awards Gala recognizes men who stand tall as pillars of Nebraska and Western Iowa.

Proceeds from this event fund advocacy, education and research for Type 1, Type 2 and gestational diabetes.

Contact Aaron Dauel at adauel@diabetes.org or (402) 571-1101, Ext. 6887, for more information.

*Diabetes Prevention and Control Program
 Nebraska department of Health and Human Services*

301 Centennial Mall South
 Lincoln, NE 68509

Phone: 402-471-2101

Fax: 402-471-6446

E-mail:

DHHS.DiabetesPreventionandControl@nebraska.gov

Kathy Goddard, RD, LMNT, CDE
 Nebraska Diabetes Program Manager

Bryan Rettig, MS
 Epidemiologist

Andrea Riley, RN, BSN
 Community Health Nurse

Joshua Russo, BA
 Community Health Educator, Newsbeat Editor

We're on the Web!

www.dhhs.ne.gov/diabetes

Diabetes is:

- *The leading cause of kidney failure, non-traumatic lower-limb amputations, and new cases of blindness among adults in the United States.*
- *A major cause of heart disease and stroke.*
- *The seventh-leading cause of death in the United States.*

The Nebraska Diabetes Prevention and Control Program is committed to improving the health of the citizens of Nebraska at risk or with diabetes by:

- *Facilitating statewide partnerships with health care systems, communities and other partners and stakeholders.*
- *Coordinating statewide efforts to improve quality of care.*
- *Collecting and disseminating diabetes surveillance and evaluation data for program development and policy guidelines.*
- *Facilitating efforts to address health disparities in high-risk populations.*
- *Developing and promoting population-based community interventions.*
- *Developing and promoting culturally appropriate health communications.*

LOOK AT YOUR FAMILY'S PAST TO PREVENT TYPE 2 DIABETES

Like drama at the holiday dinner table, in many ways your health is influenced by your family—for better or for worse. This year, why not start a conversation that benefits everyone? Gather your family health history.

Why It's Important

Family history of disease is an important part of understanding your risk for developing a number of serious diseases, including Type 2 diabetes. Diabetes is a serious disease that, if left untreated, can lead to serious health problems including blindness, loss of limb, kidney failure, heart disease, and early death.

In fact, most people with Type 2 diabetes have a family member — such as a mother, father, brother, or sister — with the disease.

The National Diabetes Education Program encourages all families to gather their family health history this holiday season and help prevent or delay Type 2 diabetes in future generations.

Questions You Should Ask

The answers to these key questions could help you prevent Type 2 diabetes in your future.

- Does anyone in the family have Type 2 diabetes? Who has Type 2 diabetes? Has anyone in the family been told they might get diabetes?
- Has anyone in the family been told they need to lower their weight or increase their physical activity to prevent Type 2 diabetes?
- Did your mother get diabetes when she was pregnant? This condition is also known as gestational diabetes.

If the answer to any of these is yes, or you have a mother, father, brother, or sister with Type 2 diabetes, you could be at an increased risk for developing Type 2 diabetes.

Your History Affects Your Child's Future

While you're gathering your family's history, you need to take your own into consider-

ation as well. Gestational diabetes is a type of diabetes that occurs during pregnancy and affects about two percent to 10 percent of pregnancies. If you had gestational diabetes when you were pregnant, you and your child have a lifelong risk for getting diabetes.

- Women with a history of gestational diabetes have a 35 to 60 percent chance of developing diabetes in the next 10 to 20 years after delivery.
- The children of pregnancies where the mother had gestational diabetes are also at increased risk for obesity and Type 2 diabetes.

For a free tip sheet on gestational diabetes, including steps to reduce the risk of developing diabetes, call the National Diabetes Education Program (NDEP) at 1-888-693-NDEP (1-888-693-6337), TTY: 1-866-569-1162 or visit its website at www.YourDiabetesInfo.org.

— National Institutes of Health