TAKE HEART!

TO CONTINUE OUR DISCUSSION ON DIABESITY / DIABETES PREVENTION, LET'S TALK ABOUT SOME OF THE COMPLICATIONS. THE MOST SERIOUS OF THESE IS CARDIOVASCULAR DISEASE. HEART DISEASE IS QUITE COMMON... STATISTICALLY, ~65% OF FOLKS WITH DIABETES WILL DIE FROM SOME SORT OF HEART DISEASE OR STROKE. THINK OF THIS: WHEN YOU HAVE DIABETES, YOUR RISK OF HAVING A HEART ATTACK IS EQUAL TO THAT OF A PERSON WHO HAS ALREADY SUFFERED A HEART ATTACK.

DIABETES ELEVATES A WOMAN'S RISK OF DEVELOPING HEART DISEASE EVEN MORE SO THAN A MAN'S. HAVING THIS DISEASE INCREASES THE RISK OF A HEART ATTACK BY 150% IN A FEMALE, BUT “ONLY” BY 50% IN A MALE. THEREFORE, IT'S ESPECIALLY IMPORTANT THAT WOMEN WHO ARE DIABETIC CONTROL THEIR RISK FACTORS FOR CV DISEASE – CHOLESTEROL & BLOOD PRESSURE, IN PARTICULAR.

GLYCATION IS THE PROCESS RESPONSIBLE FOR THE DIABETES / HEART DISEASE LINK. IN LAYMAN’S TERMS, WHEN TOO MUCH SUGAR IS CIRCULATING IN THE BLOOD, SOME OF IT WILL ATTACH ITSELF TO PLACES IT DOESN’T BELONG. THIS PROCESS IS CALLED GLYCATION. THINK OF WHAT HAPPENS WHEN FRUIT RIPENS: IT BECOMES SWEETER & SWEETER – THEN AT SOME POINT, IT DETERIORATES & ROTTS. (THAT CANNOT BE GOOD!)

MANY DISEASE PROCESSES INVOLVE INFLAMMATION, & THIS ONE IS NO EXCEPTION! CHRONIC HIGH BLOOD SUGAR CAUSES INFLAMMATION IN THE LARGE BLOOD VESSELS OF THE HEART & BRAIN. (NORMAL, NON-DIABETIC LEVELS FOR BLOOD SUGAR WOULD BE DOWN TO (BUT NOT BELOW) 70 MG/DL, INCLUDING IN THE MORNING AFTER WE'VE SLEPT & FASTED ALL NIGHT. EVEN AFTER CONSUMING A LARGE MEAL, OUR SUGAR SHOULDN'T RISE TO OVER 140 MG/DL.) GLYCATION SWELLS THE ENDOTHELIAL CELLS THAT LINE THE BLOOD VESSELS, EVENTUALLY IMPAIRING BLOOD FLOW TO VITAL ORGANS. IF A PERSON HAS METABOLIC SYNDROME (WITH ELEVATED BLOOD PRESSURE & HIGH CHOLESTEROL) AND/OR THAT PERSON IS OBESE, CV PROBLEMS BECOME EVEN MORE LIKELY.
HARDENING OF THE ARTERIES (ATHEROSCLEROSIS) IS A BUILDUP OF CHOLESTEROL IN THE BLOOD VESSELS THAT SUPPLY OXYGEN & NUTRITION TO THE HEART. THIS IS ANOTHER CAUSE OF HEART DISEASE ASSOCIATED WITH A DIABETES DIAGNOSIS. WHEN THE CHOLESTEROL PLAQUES CAN BREAK APART (RUPTURE), THE BODY TRIES TO REPAIR THE WOUND BY SENDING PLATELETS TO SEAL IT. THESE PLATELETS COULD BLOCK THE FLOW OF BLOOD...YOU CAN SEE HOW THIS CAN BE EXACERBATED BY WHAT I JUST TOLD YOU. (BLOOD FLOW IS ALREADY COMPROMISED!) OBVIOUSLY, THE SAME PROCESS CAN HAPPEN IN ALL ARTERIES OF THE BODY. A LACK OF BLOOD TO THE BRAIN CAN CAUSE A STROKE; A LACK OF BLOOD TO THE EXTREMITIES CAN CAUSE PERIPHERAL VASCULAR DISEASE. (PVD)

IN CASE YOU DIDN'T KNOW THIS: Metabolic syndrome is a cluster of symptoms. If you have 3 or more of these conditions, you could be diagnosed with what's known as metabolic syndrome: high blood pressure, high blood sugar, large waist circumference, high cholesterol, high triglycerides.

There are several organizations working together to make the public more aware of the risks. The NDEP (Nat'l Diabetes Education Program) has developed “know your ABCs.” This program emphasizes the importance of the A1C (which we talked about last week), your blood pressure, & your cholesterol level...point being, of course, to not only be aware of these numbers – but to attempt to improve / normalize them!

“A” FOR THE A1C TEST

This shows an average of blood glucose over the last 3 months. The goal for most people is under 7. (Some organizations use below 6.5% as a target, in order to minimize risk of diabetes-related complications). High levels can harm your heart & blood vessels, kidneys, feet, & eyes.

“B” FOR BLOOD PRESSURE

The goal for most people is 130/80.

High blood pressure (hypertension) makes your heart work too hard. You most likely already know that it can cause heart attack, stroke, & kidney disease.
“C” FOR CHOLESTEROL

THE GOAL FOR LDL IS LESS THAN 100.

THE GOAL FOR HDL IS ABOVE 40.

THE GOAL FOR TOTAL CHOLESTEROL IS 100 – 199.

LDL OR “BAD” CHOLESTEROL CAN BUILD UP & CLOG YOUR BLOOD VESSELS. IT CAN CAUSE A HEART ATTACK OR A STROKE. HDL OR “GOOD” CHOLESTEROL HELPS REMOVE CHOLESTEROL FROM YOUR BLOOD VESSELS.

SOME SYMPTOMS OF A HEART ATTACK:

- SHORTNESS OF BREATH
- FEELING FAINT
- DIZZINESS
- EXCESSIVE / UNEXPLAINED SWEATING
- PAIN IN THE SHOULDER, JAW, LEFT ARM
- CHEST PAIN OR PRESSURE (ESPECIALLY DURING ACTIVITY)
- NAUSEA

SOME SYMPTOMS OF PVD:

- CRAMPING IN YOUR LEGS WHILE WALKING (INTERMITTENT CLAUDICATION) OR HIPS OR BUTTOCKS PAIN
- COLD FEET
- DECREASED OR ABSENT PULSES IN FEET OR LEGS
- LOSS OF FAT UNDER THE SKIN OF THE LOWER PARTS OF LEGS
- LOSS OF HAIR ON THE LOWER PARTS OF LEGS

HOW IS HEART DISEASE TREATED IN A DIABETIC?

- ASPIRIN THERAPY (LOW DOSE IN PATIENTS OVER 40, WITH YOUR DOCTOR’S CONSENT)
- DIET!
- EXERCISE!
- MEDICINES
- SURGERY
HOW IS PVD TREATED?

- PARTICIPATION IN A REGULAR WALKING PROGRAM (45 MINUTES PER DAY, FOLLOWED BY REST)
- SPECIAL FOOTWEAR
- AIMING FOR AN A1C BELOW 7%  (BELOW 6.5%?  ASK YOUR DOCTOR!)
- LOWERING YOUR BLOOD PRESSURE TO LESS THAN 130/80
- GETTING YOUR LDL BELOW 100
- ASPIRIN THERAPY (AGAIN, LOW DOSE ASPIRIN IN PATIENTS OVER 40 YEARS OF AGE...CHECK WITH YOUR DOCTOR FIRST)
- MEDICINES
- STOP SMOKING!
- SURGERY (IN SOME CASES)

PREVENTING HEART DISEASE IN A DIABETIC ...OR ANYONE!

- KEEP YOUR BLOOD SUGAR AS NORMAL AS POSSIBLE
- CONTROL YOUR BLOOD PRESSURE
- GET YOUR CHOLESTEROL IN CHECK...THIS MAY TAKE MEDICATION!
- IF WARRANTED, LOSE WEIGHT
- EXERCISE REGULARLY
- EAT A HEART-HEALTHY DIET
- SERIOUSLY!  STOP SMOKING!
- MANAGE YOUR STRESS

OUR “NO!” FOOD FOR THIS WEEK:  (SOB!!!) PIZZA