



AADE7™ SELF-CARE BEHAVIORS MONITORING

Checking your blood sugar levels regularly gives you vital information about your diabetes control. Monitoring helps you know when your blood sugar levels are on target. It helps you make food and activity adjustments so that your body can perform at its best. It takes some time and experience to figure out how your daily activities and actions affect your blood sugar.

Your diabetes educator can help you learn:

- » How to use a blood sugar (glucose) meter.
- » When to check your blood sugar and what the numbers mean.
- » What to do when your numbers are out of your target range.
- » How to record your blood sugar results.

Checking your blood sugar is an important part of diabetes self-care, but monitoring your overall health includes a lot of other things too, especially when you have diabetes. You and your healthcare team will also need to monitor your:

- » Long-term blood sugar control—A1C, eAG
- » Cardiovascular health—blood pressure, weight, cholesterol levels
- » Kidney health—urine and blood testing
- » Eye health—dilated eye exams
- » Foot health—foot exams and sensory testing

DID YOU KNOW?

The American Diabetes Association recommends an A1C target below 7% (an eAG of 154 mg/dl); the American Association of Clinical Endocrinologists recommends less than 6.5% (an eAG of 140 mg/dl).

TRUE OR FALSE?

If you want to see how your body responds to your meal, wait 1-2 hours after eating to check your blood sugar levels.

TRUE. Your blood sugar rises in response to what you've eaten. It takes about 2 hours for the numbers to reflect the full rise.

Word Wall

METER:

A small device that is used to check blood sugar levels

LANCET:

A small needle used to get a blood sample

A1C:

A test that measures your average blood sugar levels during the past 2-3 months

ESTIMATED AVERAGE GLUCOSE (eAG):

The number of the A1C test changed into mg/dl like the blood sugar levels shown on your glucose meter

QUICK TIPS

Wash your hands with soap and water and dry them thoroughly before checking your blood sugar. Substances on your skin (like dirt, food, or lotion) can cause inaccurate results.

When traveling, keep your supplies with you. Advise security personnel that you are carrying diabetes supplies.

If you have trouble affording the test strips, call the toll-free number on the back of your meter to see if coupons are available, or ask your diabetes educator about other resources.



ACTIVITIES

Remember, the way you feel does not always reflect what your blood sugar is doing. The only way you know is to check your numbers!

- » Check your blood sugar levels as directed to share with your doctor or diabetes educator.
- » Follow a schedule, keep a record of your daily levels, and use the numbers to make decisions about your diabetes care.
- » Check your blood sugar levels if you think you're getting sick.

When you check your blood sugar levels:

- » Keep a record and bring it to every health appointment.
- » Try to identify patterns when your blood sugar goes up or down.

If your numbers aren't at goal, don't get down. This is useful information that can help your healthcare provider match your treatment to your needs.

If you develop a regular schedule and follow it closely, you'll learn how your blood sugar levels affect how you feel. You'll start to recognize unhealthy blood sugar trends before they get out of control.

What is your typical day like, in terms of eating, activity, and diabetes medication? *(Record it in the space below)*



	Activity	Eating	Medication
6:00 a.m.			
7:00 a.m.			
8:00 a.m.			
9:00 a.m.			
10:00 a.m.			
11:00 a.m.			
12:00 p.m.			
1:00 p.m.			
2:00 p.m.			
3:00 p.m.			
4:00 p.m.			
5:00 p.m.			
6:00 p.m.			
7:00 p.m.			
8:00 p.m.			
9:00 p.m.			
10:00 p.m.			

Making a Plan

If you're ready to make a change, these questions can help you make a plan. Use your plan to help you reach your goal, step by step.

Print these questions so you can write down your answers. If you have diabetes, share your plan with your health care team.

What's hardest about caring for my diabetes?

Example: I don't have the time to do what I need to do, such as exercising. I often feel guilty.

Why is this important to me?

Example: I know that exercise can help me lose some weight.

Why haven't I made this change before?

Example: I don't have time to exercise.

How can I work around what gets in the way?

Example: I can try to find some time in my day to get out for a walk.

What's my goal?

Example: I want to see if I can work up to getting 30 minutes of walking in a day, at least 5 days out of the week.

What's my plan to get started to reach my goal?

What will I do, and when will I do it?: Example: I'll start by walking for ten minutes at lunch time.

What do I need to get ready?:

Example: I need to take walking shoes to work. I also need to choose a good time to walk and put it on my calendar.

What might get in the way of making this change?

Example: Being too busy. Also, in bad weather, I won't want to walk outside. I can walk inside instead.

How will I know if my plan is working?

Example: It might take a little time before I see any weight loss, but I might enjoy my walks and find that I have more energy. I can also check my blood glucose before and after my walk to see if it improves.

How will I reward myself?:

Example: If I stick with my plans this week, I'll watch a movie.

Remember:

- You can make a plan that works for you.
- Make changes one at a time.
- Ask for support from family, friends, and your health care team.
- Celebrate your hard work!

Make A Move: Set a Goal

You cannot get some place you want to be if you do not know the way! Having a goal is like using a map, it's a good tool for staying on the right track. But, if you don't look at your map you can get lost. So, use this tool like a map to help you stay on course! **Check yourself and ask, "How am I doing with my goal this week?"** It will help you be in the driver's seat and get where you want to be when it comes to taking care of your diabetes.



Who? **YOU!** Name _____



What? I will _____



When? I will do it _____ (time of day/days of week)



How much? I will do it for _____ each time



Where? I will do it at _____



Why? I want to do this because _____



This will be hard for me because _____



This will be easy for me because _____



If I need a little help I can _____



I feel I am going to do what I said

0 1 2 3 4 5 6 7 8 9 10

Not at all

Maybe

Likely

For sure



When I finish I will treat myself by _____

How You Can Help Your Loved One with Diabetes

Diabetes is tough. When you have diabetes, you need to eat healthy food, stay active, control your weight, take your medicine, and check your blood glucose (sugar) to see how you are doing. And that's on top of handling all the other things in life! No wonder a person with diabetes can feel stressed out and afraid.

Good diabetes care also means controlling the **ABCs of diabetes** to avoid having a heart attack, a stroke, or other diabetes

problems. **A is for the A1C test** that measures blood glucose control, **B is for blood pressure**, and **C is for cholesterol**.

You want the best for your loved ones with diabetes—whether they are family members or friends. Maybe you are looking for ways to ease the pressure your mother feels. Or maybe you would like to help your husband take better control of his diabetes. It's a hard disease to handle alone. You can make a big difference in how well your loved one copes with diabetes.

Use these tips to get started today.

tip 1 Learn about diabetes.

There is a lot to learn about living well with diabetes. Treatment is changing and we are learning more every day. You can use what you learn to help your loved one.

- Attend a class.
- Look on the Internet.
- Ask the doctor or nurse how you can learn more.

tip 2 Understand your loved one's diabetes.

Each person's experience with diabetes is different. What things are hard for your friend to manage? What things are easy?

tip 3 Find out what your loved one needs.

Try asking these three questions.

- What do I do that helps you with your diabetes?
- What do I do that makes it harder for you to manage your diabetes?
- What can I do to help you more than I do now?

tip 4 Talk about your feelings.

Diabetes affects you, too. Telling your loved one how you feel can help both of you.

tip 5 Offer practical help.

Instead of nagging, find ways to be helpful. Ask what would help your loved one most.

- Offer to go to the doctor with your father or mother.
- Take a walk with your wife.
- Cook a tasty and healthy meal for a friend.

tip 6 Try a new approach.

When things aren't going right, try something new. Find one thing that works and build from there.

tip 7 Get help.

Many people can help you help your loved one with diabetes.

- Find a diabetes support group in the health section of your newspaper or on the Internet.
- Ask your health care provider about ways to get help if your loved one is sad or depressed.
- See the resource list for groups to contact.

Continued on the reverse.

Get started today.

I will take these three actions to help my loved one:

By When:

- ① _____
- ② _____
- ③ _____

Where to go for help.

■ American Association of Diabetes Educators

1-800-338-3633 or www.diabeteseducator.org

Find the name of an educator and resources in your community to help you learn about diabetes.

■ American Diabetes Association

1-800-DIABETES or www.diabetes.org

Ask for information about diabetes care.

■ American Dietetic Association

1-800-877-1600 or www.eatright.org

Find a dietitian to help you and your loved ones eat healthy foods.

■ Juvenile Diabetes Research Foundation International

1-800-JDF-CURE or www.jdrf.org

Find out about type 1 diabetes.

■ National Diabetes Education Program

1-888-693-NDEP (6337), TTY: 1-866-569-1162 or www.YourDiabetesInfo.org

Call or visit the website for information about diabetes prevention and control.

■ National Institute of Diabetes and Digestive and Kidney Diseases

National Diabetes Information Clearinghouse

1-800-860-8747 or www.diabetes.niddk.nih.gov

Find out more about diabetes self-care.

■ Centers for Disease Control and Prevention

Division of Diabetes Translation

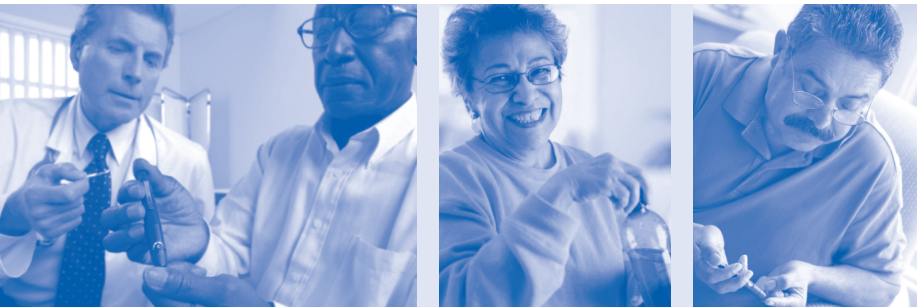
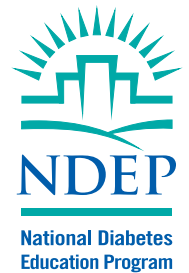
1-877-232-3422 or www.cdc.gov/diabetes

Click on "State-based Programs" for information on government contacts in your state.



American Association
of Diabetes Educators

Know Your Blood Sugar Numbers



If you have diabetes, keeping your blood glucose (sugar) numbers in your target range can help you feel good today and stay healthy in the future.

There are two ways to measure blood glucose.

- 1** The A1C is a lab test that measures your average blood glucose level over the last 2 to 3 months. It shows whether your blood glucose stayed close to your target range most of the time, or was too high or too low.
- 2** Self-tests are the blood glucose checks you do yourself. They show what your blood glucose is at the time you test.

Both ways help you and your health care team to get a picture of how your diabetes care plan is working.

About the A1C test

Why should I have an A1C test? The A1C tells you and your health care team how well your diabetes care plan worked over the last 2 to 3 months. It also helps decide the type and amount of diabetes medicine you need.

What is a good A1C target for me? For many people with diabetes, the A1C target is below 7. You and your health care team will decide on an A1C target that is right for you. If your A1C stays too high, it may increase your chances of having eye, kidney, nerve, and heart problems.

How often do I need an A1C? You need an A1C at least twice a year. You need it more often if it is too high, if your diabetes treatment changes, or if you plan to become pregnant.

What if I plan to become pregnant? Talk with your doctor before you get pregnant. Your doctor can help you reach an A1C target that allows a healthy baby to develop. If you are already pregnant, see your doctor right away.

About self-tests for blood glucose

Why should I do self-tests? Self-tests can help you learn how being active, having stress, taking medicine and eating food can make your blood glucose go up or down. They give you the facts you need to make wise choices as you go through the day.

Keep a record of your results. Look for times when your blood glucose is often too high or too low. Talk about your results with your health care team at each visit. Ask what you can do when your glucose is out of your target range.

How do I check my blood glucose? Blood glucose meters use a small drop of blood to tell you how much glucose is in your blood at that moment. Ask your health care team how to get the supplies you need. They will also show you how to use them.



"I bring my self-test record when I visit my doctor. We talk about what makes my blood glucose go up or down and what to do about it."

Tips to Help You Stay Healthy



Taking action to manage your diabetes can help you feel good today and stay healthy in the future.

Work with your doctor and other health care team members to make a diabetes care plan that works for you. Follow these four steps.

Step 1:

Learn About Diabetes

Diabetes means that your blood glucose (sugar) is too high. Diabetes is serious because it can damage your heart, blood vessels, eyes, kidneys, and nerves. But you can learn how to manage it and prevent or delay health problems.

- Take a class and join a support group about living with diabetes. Check with your health care team, hospital, or area health clinic.
- Read about diabetes online.
Go to www.YourDiabetesInfo.org.
- Ask your diabetes health care team how you can learn more.

Step 2:

Know Your Numbers

Ask your doctor what diabetes target numbers are best for you. They may be different from the numbers below.

- A1C measures your average blood glucose level over the past 2 to 3 months. The A1C target for many people is below 7.
- LDL, or bad cholesterol, builds up and clogs your arteries. The LDL target is below 100.
- High blood pressure makes your heart work too hard. The blood pressure target for most people is less than 130/80.

Step 3:

Manage Your Diabetes

Your diabetes care plan should help you to:

- **Keep track of your diabetes numbers.**
- **Learn how and when to check your own blood glucose.**
 - See what makes your blood glucose go up or down.
 - Go over the test results with your health care team. Use them to manage your diabetes.
 - Ask how to prevent low blood glucose.
- **Be active for 30 to 60 minutes** on most days of the week. Brisk walking is a great way to be active.
- **Stop smoking.**
Call 1-800-QUIT-NOW (1-800-784-8669).
- **Eat healthy foods such as:**
 - fruits, vegetables, fish, lean meats and poultry, dried peas or beans, lentils, and low-fat or skim milk and cheese
 - whole grain foods such as whole wheat bread and crackers, oatmeal, brown rice, and cereals
 - food prepared with little added fat, oil, salt, or sugar
 - smaller servings of meat, fish and poultry
 - larger servings of fruits and vegetables.

- **Seek help if you feel down.** Talking with a counselor, friend, family member, support group, or a religious leader may help you feel better.
- **Take your medicines even when you feel good.** Ask if you need to take low-dose aspirin to prevent a heart attack or stroke.
- **Check your feet every day.** Call your health care team if a cut, sore, blister, or bruise on your feet or toes does not begin to go away after 2 days.
- **Brush your teeth and floss every day** to prevent problems with your mouth, teeth, or gums.
- **Tell your health care team if your eyesight changes.**

Step 4: Get Regular Care

- Contact your health care team if you have any questions or problems as you manage your diabetes, medicines, or supplies.
- Use “My Diabetes Care Record” on the last page to track your diabetes numbers and checkups with your doctor or health care team.
- Talk to your doctor if you plan to get pregnant.
- Ask what diabetes services are covered by Medicare and other insurance. To learn more about Medicare go to: bit.ly/mc-diabetes.

Set goals you can reach. Break a big goal into small steps. Maybe you could start with a goal to walk half a mile each day. Then increase the distance each week or so until you are walking two or more miles each day. Give yourself a healthy reward for doing well.

Take action to be healthy and control your diabetes for life. Write down: *One or more reasons I have to manage my diabetes:*

One or more things I will work on over the next 3 months to carry out my diabetes care plan:

People who can help me do these things are:



HHS' NDEP is jointly sponsored by NIH and CDC with the support of more than 200 partner organizations.

www.YourDiabetesInfo.org
 or **1-888-693-NDEP**
(1-888-693-6337)
TTY: 1-866-569-1162

Sandra Parker, R.D., C.D.E., American Dietetic Association representative to the NDEP, reviewed this material for technical accuracy.

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

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My Diabetes Care Record

	Date	Result	Date	Result	Date	Result
Each visit						
Blood pressure My target is:						
Foot check						
Review self-care plan						
Weight check My target is:						
At least twice a year						
A1C: My target is:						
Once a year						
Cholesterol-LDL My target is:						
Complete foot exam						
Dental exam						
Eye exam (with drops in your eyes)						
Flu Shot						
Kidney check						
At least once						
Pneumonia shot						

DIABETES IN THE UNITED STATES



DIABETES

29.1
MILLION

29.1 million people have diabetes



That's about 1 out of every 11 people

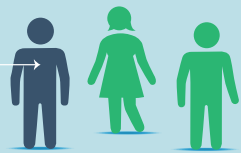


1 OUT OF **4**

do not know they have diabetes

PREDIABETES

86
MILLION



86 million people — more than 1 out of 3 adults — have prediabetes



9 OUT OF **10** do not know they have prediabetes



Without weight loss and moderate physical activity

15–30% of people with prediabetes will develop type 2 diabetes within 5 years



COST



\$245
BILLION

Total medical costs and lost work and wages for people with diagnosed diabetes

Risk of death for adults with diabetes is



50% HIGHER



than for adults without diabetes

Medical costs for people with diabetes are **twice as high**

\$\$



\$

as for people without diabetes

People who have diabetes are at higher risk of serious health complications:



BLINDNESS



KIDNEY FAILURE



HEART DISEASE



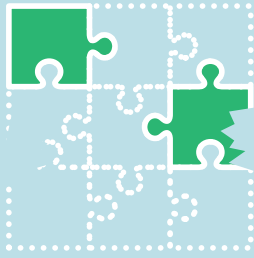
STROKE



LOSS OF TOES, FEET, OR LEGS

TYPES OF DIABETES

TYPE 1



BODY DOES NOT MAKE ENOUGH INSULIN

- Can develop at any age
- No known way to prevent it

More than **18,000 youth** diagnosed each year in 2008 and 2009

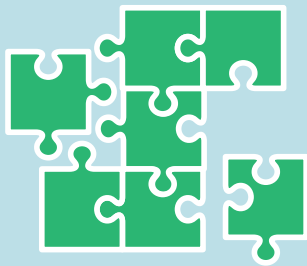


In adults, type 1 diabetes accounts for approximately

5%

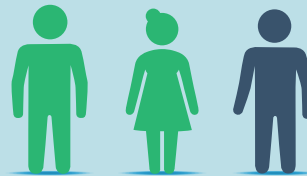
of all diagnosed cases of diabetes

TYPE 2



BODY CANNOT USE INSULIN PROPERLY

- Can develop at any age
- Most cases can be prevented



Currently, at least **1 out of 3** people will develop the disease in their lifetime



More than **5,000 youth** diagnosed each year in 2008 and 2009

RISK FACTORS FOR TYPE 2 DIABETES:

1.7
MILLION

People **20 years** and older diagnosed in 2012



BEING OVERWEIGHT



HAVING A FAMILY HISTORY



HAVING DIABETES WHILE PREGNANT (GESTATIONAL DIABETES)



WHAT CAN YOU DO?

You can **prevent** or **delay** type 2 diabetes



LOSE WEIGHT



EAT HEALTHY



BE MORE ACTIVE

LEARN MORE AT www.cdc.gov/diabetes/prevention
OR SPEAK TO YOUR DOCTOR

You can **manage** diabetes



WORK WITH A HEALTH PROFESSIONAL



EAT HEALTHY



STAY ACTIVE

LEARN MORE AT www.cdc.gov/diabetes/ndep
OR SPEAK TO YOUR DOCTOR

REFERENCES

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Tuomilehto J, Lindstrom J, Eriksson J, et al; Finnish Diabetes Prevention Study Group. Prevention of type 2 diabetes mellitus by changes in lifestyle among subjects with impaired glucose tolerance. N Engl J Med 2001; 344:1343-1350.

CDC's Division of Diabetes Translation works toward a world free of the devastation of diabetes.