



For more information, Please visit [www.diabetes.org](http://www.diabetes.org)

## Making Healthy Food Choices

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Knowing what to eat can be confusing.



Everywhere you turn, there is news about what is or isn't good for you. Some basic principles have weathered the fad diets, and have stood the test of time.

Here are a few tips on making healthful food choices for you and your entire family. You may also be interested in our book, [\*Healthy Calendar Diabetic Cooking\*](#).

- Eat lots of vegetables and fruits. Try picking from the rainbow of colors available to maximize variety.
- Eat non-starchy vegetables such as spinach, carrots, broccoli or green beans with meals.
- Choose whole grain foods over processed grain products. Try brown rice with your stir fry or whole wheat spaghetti with your favorite pasta sauce.
- Include dried beans (like kidney or pinto beans) and lentils into your meals.
- Include fish in your meals 2-3 times a week.
- Choose lean meats like cuts of beef and pork that end in "loin" such as pork loin and sirloin. Remove the skin from chicken and turkey.
- Choose non-fat dairy such as skim milk, non-fat yogurt and non-fat cheese.
- Choose water and calorie-free "diet" drinks instead of regular soda, fruit punch, sweet tea and other sugar-sweetened drinks.
- Choose liquid oils for cooking instead of solid fats that can be high in saturated and *trans* fats. Remember that fats are high in calories. If you're trying to lose weight, watch your portion sizes of added fats.
- Cut back on high calorie snack foods and desserts like chips, cookies, cakes, and full-fat ice cream.
- Eating too much of even healthful foods can lead to weight gain. Watch your portion sizes.

### For More Information

Our book, [\*What Do I Eat Now? A Step-by-Step Guide to Eating Right With Type 2 Diabetes\*](#), is a great resource to keep in your kitchen as a handy reference guide when it comes time to preparing meals. Also we have a Registered Dietitian [ready to answer your nutrition questions](#).





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## Diabetes Superfoods

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Ever see the top 10 lists for foods everyone should eat to superpower your diet? Ever wonder which will mesh with your diabetes meal plan? Wonder no more. Your list of the top 10 diabetes superfoods has arrived.

As with all foods, you need to work the diabetes superfoods into your individualized meal plan in appropriate portions.

All of the foods in our list have a low glycemic index or GI and provide key nutrients that are lacking in the typical western diet such as:

- calcium
- potassium
- fiber
- magnesium
- vitamins A (as carotenoids), C, and E.

There isn't research that clearly points to supplementation, so always think first about getting your nutrients from foods. Below is our list of superfoods to include in your diet.

### Beans

Whether you prefer kidney, pinto, navy or black beans, you can't find better nutrition than that provided by beans. They are very high in fiber giving you about 1/3 of your daily requirement in just a ½ cup and are also good sources of magnesium, and potassium.

They are considered starchy vegetables but a ½ cup provides as much protein as an ounce of meat without the saturated fat. To save time you can use canned beans, but be sure to drain and rinse them to get rid of as much sodium as possible.

### Dark Green Leafy Vegetables

Spinach, collards, kale – these powerhouse foods are so low in calories and carbohydrates, you can't eat too much.

### Citrus Fruit

Grapefruit, oranges, lemons and limes. Pick your favorites and get part of your daily dose of soluble fiber and vitamin C.

### Sweet Potatoes

A starchy vegetable packed full of vitamin A and fiber. Try in place of regular potatoes for a lower GI alternative.

### Berries

Which are your favorites: blueberries, strawberries or another variety? Regardless, they are all packed with antioxidants, vitamins and fiber. Make a parfait alternating the fruit with light, non-fat yogurt for a new favorite dessert.

## Tomatoes

An old standby where everyone can find a favorite. The good news is that no matter how you like your tomatoes, pureed, raw, or in a sauce, you're eating vital nutrients like vitamin C, iron, vitamin E.

## Fish High in Omega-3 Fatty Acids

Salmon is a favorite in this category. Stay away from the breaded and deep fat fried variety... they don't count in your goal of 6-9 ounces of fish per week.

## Whole Grains

It's the germ and bran of the whole grain you're after. It contains all the nutrients a grain product has to offer. When you purchase processed grains like bread made from enriched wheat flour, you don't get these. A few more of the nutrients these foods offer are magnesium, chromium, omega 3 fatty acids and folate.

Pearled barley and oatmeal are a source of fiber and potassium.

## Nuts

An ounce of nuts can go a long way in providing key healthy fats along with hunger management. Other benefits are a dose of magnesium and fiber.

Some nuts and seeds, such as walnuts and flax seeds, also contain omega-3 fatty acids.

## Fat-free Milk and Yogurt

Everyone knows dairy can help build strong bones and teeth. In addition to calcium, many fortified dairy products are a good source of vitamin D. More research is emerging on the connection between vitamin D and good health.

Some of the above list can be tough on the budget depending on the season and where you live. Look for lower cost options such as fruit and vegetables in season or frozen or canned fish.

Foods that every budget can live with year round are beans and rolled oats or barley that you cook from scratch.

Of course, you probably don't want to limit yourself to just these items for every meal. [The American Diabetes Association's book \*What Do I Eat Now?\*](#) provides a step-by-step guide to eating right.

## Give us your feedback!

What do you think of our diabetes superfoods list? Do you regularly eat many of these? Do you avoid any? Are we missing any on our list? Give us some feedback and discuss with others on our [Eating Right With Diabetes](#) message board!



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## Foot Complications

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People with diabetes can develop many different foot problems. Even ordinary problems can get worse and lead to serious complications. Foot problems most often happen when there is nerve damage, also called neuropathy, which results in loss of feeling in your feet. Poor blood flow or changes in the shape of your feet or toes may also cause problems.

### Neuropathy

Although it can hurt, diabetic nerve damage can also lessen your ability to feel pain, heat, and cold. Loss of feeling often means you may not feel a foot injury. You could have a tack or stone in your shoe and walk on it all day without knowing. You could get a blister and not feel it. You might not notice a foot injury until the skin breaks down and becomes infected.

Nerve damage can also lead to changes in the shape of your feet and toes. Ask your health care provider about special therapeutic shoes, rather than forcing deformed feet and toes into regular shoes.

### Skin Changes

Diabetes can cause changes in the skin of your foot. At times your foot may become very dry. The skin may peel and crack. The problem is that the nerves that control the oil and moisture in your foot no longer work.

After bathing, dry your feet and seal in the remaining moisture with a thin coat of plain petroleum jelly, an unscented hand cream, or other such products.

Do not put oils or creams between your toes. The extra moisture can lead to infection. Also, don't soak your feet — that can dry your skin.

### Calluses

Calluses occur more often and build up faster on the feet of people with diabetes. This is because there are high-pressure areas under the foot. Too much callus may mean that you will need therapeutic shoes and inserts.

Calluses, if not trimmed, get very thick, break down, and turn into ulcers (open sores). Never try to cut calluses or corns yourself - this can lead to ulcers and infection. Let your health care provider cut your calluses. Also, do not try to remove calluses and corns with chemical agents. These products can burn your skin.

Using a pumice stone every day will help keep calluses under control. It is best to use the pumice stone on wet skin. Put on lotion right after you use the pumice stone.

### Foot Ulcers

Ulcers occur most often on the ball of the foot or on the bottom of the big toe. Ulcers on the sides of the foot are usually due to poorly fitting shoes. Remember, even though some ulcers do not hurt, every ulcer should be seen by your health care provider right away. Neglecting ulcers can result in infections, which in turn can lead to loss of a limb.

What your health care provider will do varies with your ulcer. Your health care provider may take x-rays of your foot to make sure the bone is not infected. The health care provider may clean out any dead and infected tissue. You may need to go into the hospital for this. Also, the health care provider may culture the wound to find out what type of infection you have, and which antibiotic will work best.

Keeping off your feet is very important. Walking on an ulcer can make it get larger and force the infection deeper into your foot. Your health care provider may put a special shoe, brace, or cast on your foot to protect it.

If your ulcer is not healing and your circulation is poor, your health care provider may need to refer you to a vascular surgeon. Good diabetes control is important. High blood glucose levels make it hard to fight infection.

After the foot ulcer heals, treat your foot carefully. Scar tissue under the healed wound will break down easily. You may need to wear special shoes after the ulcer is healed to protect this area and to prevent the ulcer from returning.

## Poor Circulation

Poor circulation (blood flow) can make your foot less able to fight infection and to heal. Diabetes causes blood vessels of the foot and leg to narrow and harden. You can control some of the things that cause poor blood flow. Don't smoke; smoking makes arteries harden faster. Also, follow your health care provider's advice for keeping your blood pressure and cholesterol under control.

If your feet are cold, you may be tempted to warm them. Unfortunately, if your feet cannot feel heat, it is easy for you to burn them with hot water, hot water bottles, or heating pads. The best way to help cold feet is to wear warm socks.

Some people feel pain in their calves when walking fast, up a hill, or on a hard surface. This condition is called *intermittent claudication*. Stopping to rest for a few moments should end the pain. If you have these symptoms, you must stop smoking. Work with your health care provider to get started on a walking program. Some people can be helped with medication to improve circulation.

Exercise is good for poor circulation. It stimulates blood flow in the legs and feet. Walk in sturdy, good-fitting, comfortable shoes, but don't walk when you have open sores.

## Amputation

People with diabetes are far more likely to have a foot or leg amputated than other people. The problem? Many people with diabetes have artery disease, which reduces blood flow to the feet. Also, many people with diabetes have nerve disease, which reduces sensation. Together, these problems make it easy to get ulcers and infections that may lead to amputation. Most amputations are preventable with regular care and proper footwear.

For these reasons, take good care of your feet and see your health care provider right away about foot problems. Ask about prescription shoes that are covered by Medicare and other insurance. Always follow your health care provider's advice when caring for ulcers or other foot problems.

One of the biggest threats to your feet is smoking. Smoking affects small blood vessels. It can cause decreased blood flow to the feet and make wounds heal slowly. A lot of people with diabetes who need amputations are smokers.

# My Diabetes Care Record

Record your targets and the date, time, and results of your tests. Take this card with you on your health care visits. Show it to your health care team to remind them of tests you need.

A1C — At least twice each year						Usual goal: below 7		My Target: _____	
Date									
Result									
Blood Pressure (BP) — Each visit						Usual goal: below 130/80		My Target: _____	
Date									
Result									
Cholesterol (LDL) — Once each year						Usual goal: below 100		My Target: _____	
Date									
Result									
Cholesterol (HDL) — Once each year						Usual goal: above 40		My Target: _____	
Date									
Result									
Triglycerides — Once each year						Usual goal: below 150		My Target: _____	
Date									
Result									
Weight — Each visit						My Target: _____			
Date									
Result									

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# My Diabetes Care Record

	Date	Result
<b>Each visit</b>		
Foot check		
Review self-care plan		
Weight check		
<b>Once a year</b>		
Dental exam		
Dilated eye exam		
Complete foot exam		
Flu shot		
Kidney check		
<b>At least once</b>		
Pneumonia shot		

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