

DIABETES TYPE 2 SELF-CARE MANAGEMENT

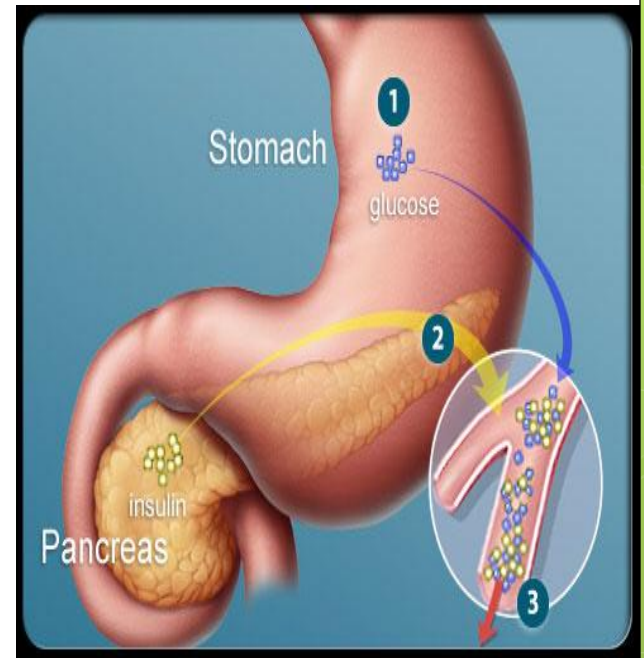
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What is Diabetes ?

- A condition in which sugar levels in the blood are high

Diabetes Type 2

- Your pancreas makes little or no insulin, and/or
- Your body prevents the insulin you make from working right
- The result: the sugar can't get into your cells so it stays in your blood



What are the glycemic targets ?

- Normal Blood Sugar:
Before meals: 80-130 mg/dl
After meals: less than 180 mg/dl
- Low Blood Sugars or Hypoglycemia
Less than 80 mg/dl
- High Blood Sugars or Hyperglycemia
Before meals: more than 130 mg/dl
After meals : more than 180 mg/dl
- A1C: equal or less than 7.0 %



Why do you check your blood sugar?

- It will tell you if your insulin or diabetes medicine is working
- It will tell you how your physical activity and the foods you eat affect your blood sugar
- Because you'll usually feel better and have more energy when your blood sugar stays at or near normal
- Because managing your blood sugar can also reduce your risk of developing problems or complications from diabetes



Signs of Low Blood Sugar or Hypoglycemia

- Sweaty
- Weakness
- Headache
- Sudden change in behavior
- Fatigue, tired
- Shaky, fast heart rate
- Numbness, tingling
- Blurred vision, dizzy
- Hungry
- Nervous, irritable
- Mood swings



Treating your Low Blood sugar

- Check your blood sugar to confirm below 80 mg/dl reading
- When verified, you need a fast form of carbohydrate at least 15 grams

EXAMPLES:

4 oz. of regular juice or 3 tsp of jelly

3 tsp sugar or 6 oz. of regular soda

7-8 lifesavers or 10 oz. nonfat milk

3-4 glucose tablets or 1 tube of glucose gel

- Recheck your blood sugar 10-15 minutes after carbohydrate intake, if still below 80mg/dl REPEAT the treatment



Severe Low Blood Sugars

- If blood sugar is less than 50 mg/dl, double the treatment
- If difficulty swallowing
- Difficult to arouse
- Slurred speech
- Unconscious
- **CALL 911**



What Causes Low Blood Sugars?

- Missed meals
- Eating less or change in diet, alcohol consumption
- Increased activity level or exercises
- Medication adjustment



So what will you do ?

- Monitor and log blood sugar
- Notify or communicate with your provider to address the problem

Signs of High Blood Sugar or Hyperglycemia

- Frequent urination
- Very thirsty
- Dry skin or mouth
- Very hungry
- Blurry vision
- Sleepiness
- Slow-healing wounds or frequent infections



What Causes High Blood Sugars?

- Skipped medications
- Eating more than usual
- Unhealthy diet
- Decreased exercise, less active
- Under stress or sick
- infection
- Surgery

So what will you do ?

- Monitor and log blood sugar
- Follow your diabetes care plan
- Notify or communicate with your provider to address the problem



Extremely High Blood Sugars

- Stuporous, unconscious
- Fruity odor to breath
- Abdominal pain
- Confusion
- Severe dehydration
- Blood sugars >400 mg/dl
- **CALL 911**



What can you do?

- Eating healthy is the first step in controlling diabetes.

- Eat three meals a day, at the same time each day and do not skip meals. Eat about the same amount each day. Meals should be eaten 4-5 hours apart.

- Limit sugar and sweets. Drink beverages such as diet soda, water, Crystal Light®, and unsweetened tea. Use Equal®, Sweet n' Low®, Splenda®, or Truvia® in place of sugar.



What Can You Do?

-It is important to control your carbohydrate (carb) intake as it is the main nutrient that affects blood sugar levels.

-You should eat 45-75 grams of carb per meal based on your weight goals.

-Increase your intake of non-starchy vegetables. Vegetables are low in carbohydrates and calories, and high in fiber. Eat vegetables for variety and to help fill you up.



What Can You Do?

- Eat more fiber or at least five servings of fruits and vegetables a day.
- Choose whole grain bread or cereal, and eat more beans or legumes.
- Limit your intake of alcohol up to two drinks a day for men and one drink a day for women.



What Can You Do?

- Physical activity: regular exercises can help lower your blood glucose levels.
- Losing weight helps improve your glucose control.
- Tight control of cholesterol
- Control your blood pressure
- Stress reduction(Yoga, Tai Chi, Deep breathing)



What Can You Do?

- Alcohol: limit it to one serving per day for women and two servings per day for men.
- One serving of alcohol is 12 ounces of beer, 5 ounces of wine, or 1.5 ounces of hard alcohol.
- STOP Smoking



What Can You Do?

- Be part of your PACT team:
 - Communicate!
 - Talk to your provider about your concerns
 - Be proactive in you care, speak up!
 - Take your medications as prescribed.
 - Schedule and keep appointments



Long Term Complications Of Diabetes

- Heart disease & blood vessel problems
- Vision problems
- Kidney disease
- Nerve disease
- Circulation problems
- Non-healing wounds
- Infections
- Depression
- Gum and dental problems



Cardiovascular Disease Risk

- Most common cause of death in people with diabetes
- Increased risk with coexisting High blood pressures and cholesterol.

What Can You Do?

- Control your Blood Pressures:
Goal SBP <140 mmHg / DBP <90 mmHg
- Control your cholesterol – Saturated Fats (LDL) <100 mg/dL
- Lifestyle modification (low fat, low carb diet and exercises)
- STOP smoking and control stress



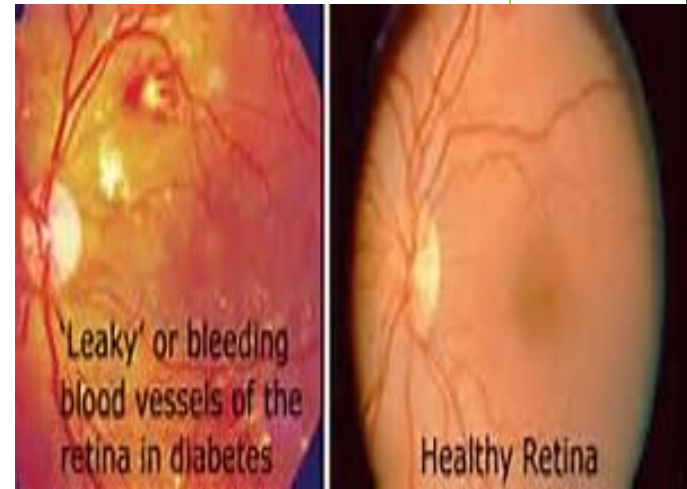
Diabetic Retinopathy

- Occurs when diabetes damages the blood vessels in the eye and can lead to loss of vision.

What can you do

Routine eye and retinal screening:

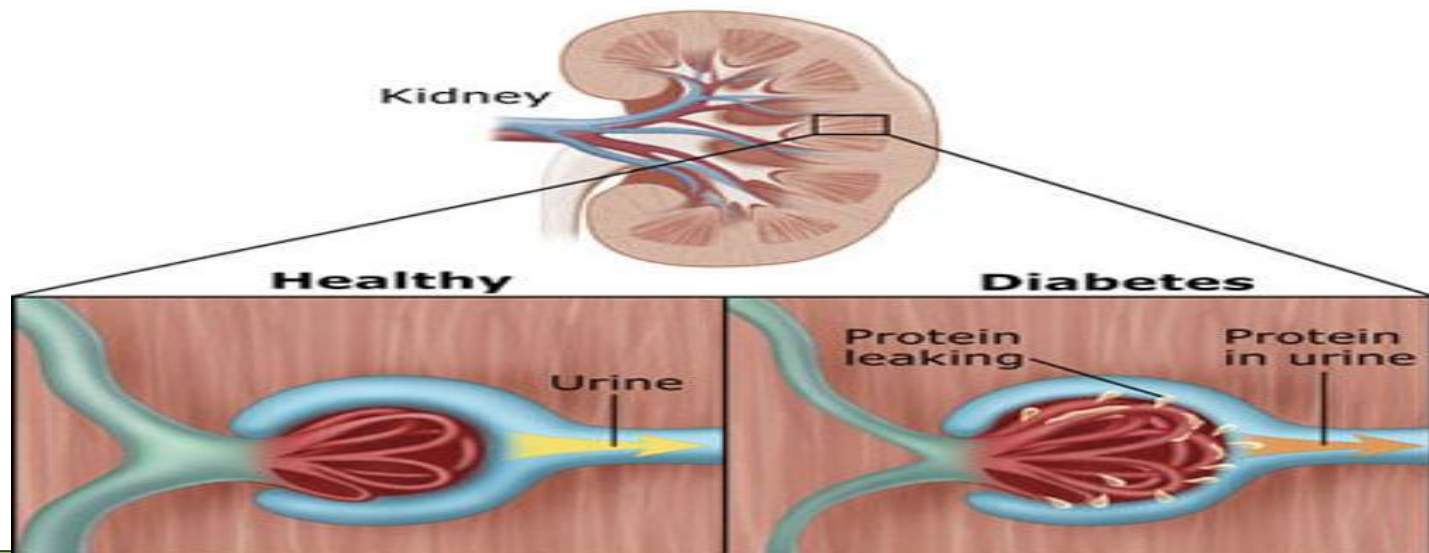
- If **WITH** retinopathy, consider annual examination
- If **NO** retinopathy for ≥ 1 eye exam, consider examinations every 2 years
- Optimize blood sugar and BP control to reduce the risk or slow the progression of retinopathy



Nephropathy or Diabetic Kidney Disease

- Occurs in 20-40% of patients with diabetes
- leading cause of end-stage renal disease (ESRD)
- Persistent increased urine albumin is a marker for the development of diabetic kidney disease and increased cardiovascular disease risk.

Diabetes Affects the Kidney



What can you do?

- Lowering A1C to approximately 7% or less
- Optimize blood pressure control to reduce the risk or slow progression of diabetic kidney disease
- Yearly check labs (urine albumin and eGFR)



Diabetic Peripheral Neuropathy

- nerve damage as a result of persistent high blood sugar level
- results: numbness or loss of feeling, burning or pain often worse at rest or at night, tingling and feeling light touches as bothersome or painful.



The pain of Diabetic Peripheral Neuropathy

What can you do?

- Tight glucose control to slow the progression of neuropathy
- Screening for diabetic peripheral neuropathy (monofilament exam):
 - annual foot exams thereafter
 - every visit for all patients with insensate feet, foot deformities or history of foot ulcers
- STOP smoking !



Diabetic Foot Care

- Inspect your feet daily and should take special care of your feet to prevent ulceration, infection, and amputation:
 - Avoid going barefoot, even in the home.
 - Test water temperature before stepping into a bath.
 - Trim toenails to shape of the toe; remove sharp edges with a nail file. Do not cut cuticles.
 - Wash and check feet daily.
 - Shoes should be snug but not tight and customized if feet are misshapen or have ulcers. Socks should fit and be changed daily.



Gum and Dental Problems

- Diabetes increase the risk for:
 - Gum diseases
 - Caries
 - Oral abscess

What can you do?

- Regular dental check-ups
- Self-inspection of oral cavity
- Good oral hygiene
- Take control of your blood sugar



Depression in Diabetes

- Depression occurs at a higher rate in older patients with diabetes
- Depression has been associated with poor blood sugar control and with accelerated rates of coronary heart disease (CHD) in diabetic patients

What can you do?

- Medication list should be kept current and reviewed at each clinic visit
- Take control of your blood sugar
- Get family support
- Help is available, talk to your provider



References

- American Diabetes Association (2015). Standards of medical care in diabetes 2015. Diabetes Care Journal of Clinical and Applied Research and Education. Retrieved from www.diabetes.org/diabetescare