



Ways to Avoid Denial:

Denial is human. It's bound to crop up from time to time. When it does, you can recognize what's going on and fight back. Speak with your diabetes team. **TOGETHER** you can come up with solutions.

Tell your friends and family how they can help. Let them know how they can encourage you in your goals to have a healthier lifestyle. Encourage them to adopt some of your healthy habits.

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Diabetes Education

***DENIAL** is that voice inside that says: "Not me" or "I don't believe it. There must be some mistake." This reaction is so common that some doctors think it's part of the process of accepting a diagnosis for diseases such as diabetes. The trouble comes when you keep on denying your diabetes. Long-term denial stops you from learning what you need to know to keep yourself healthy.*



Mental Health

Hidden Dangers:

Because denial can creep into any aspect of diabetes self-care, it can be dangerous. **ANY** denial can interfere with your health care.

Here are Some Ways that this May Happen:

- ✓ **Not testing:** You may decide you "know" what your blood glucose is by how you feel. But a meter is a much better measure of blood glucose than are feelings.
- ✓ **Ignoring your meal plan:** Changing eating habits and food choices is tough. Some of these thoughts may have crossed your mind: I can't ask my family to change what they eat. I can't afford to eat healthy. There's no place to buy healthy food where I work.
- ✓ **Forgetting your feet:** You know you should check your feet each day, but it takes too much time. Or you forget. Washing and checking your feet for signs of trouble every day is essential to avoid serious injury. This is true no matter what type of diabetes you have.
- ✓ **Smoking:** You might tell yourself, "I only smoke 1 or 2 cigarettes a day." You may say, "Smoking keeps me from eating too much" or "If I quit, I'll gain weight." Smoking and diabetes are a deadly duo. Smoking increases your risk for complications.



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Did You Know?

At any given time, *MOST* people with diabetes **DO NOT** have depression. But studies show that people with diabetes have a greater risk of depression than people without diabetes.

Know Your ABC's of Diabetes:

(Reach Your GOALS)

- A** ✓ EVERY 3-6 MONTHS
 - **A1c:** Below 7%
 - B** ✓ EVERY VISIT
 - **Blood Pressure:** Below 130/80mmHg
 - C** ✓ ONCE A YEAR
 - **Cholesterol:**
 - LDL: Below 100mg/dL
 - HDL: Above 40mg/dL for Men & Above 50mg/dL for Women
-
- Ⓞ Blood Glucose Targets:**
 - Fasting, 90-130mg/dL
 - 2 Hours after eating, Less Than 180mg/dL

Depression:

Feeling down once in a while is **NORMAL**. But some people feel a sadness that just won't go away. Life seems hopeless. Feeling this way most of the day for two weeks or more is a sign of serious depression.

The stress of daily diabetes management can build. You may feel alone or set apart from your friends and family because of all this extra work. The diabetes complications can add to feelings of losing control.

Just like denial, depression can get you into a vicious cycle. It can interfere with good diabetes self-care. If you are depressed and have no energy, chances are you will find self care tasks such as regular blood sugar testing and checking your feet too much. Of course, this will affect your blood sugar levels.

Feeling down once in a while is NORMAL.



Quitting is one of the BEST things you can do for your health.

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Quit Smoking Today:

- Look at when you smoke. There are several ways to decrease the number of times you light up.
- Some people have to quit altogether.
- For others it's better to start with the easiest times they can stop lighting up. And gradually **DECREASE** from there.

Reasons to Quit:

- ✓ Save lots of money
- ✓ Your loved ones will be comforted knowing you are taking care of your health
- ✓ **LESS** coughing
- ✓ Sense of smell improves and food tastes better

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1 First Step - Recognizing Depression:

Spotting depression is the first step. Getting help is the second. If you have been feeling really sad, blue, or down in the dumps, check for these symptoms:

- **Loss of pleasure.** You are no longer interested in doing things you used to enjoy.
- **Change in sleep patterns.** You have trouble falling asleep, you wake often during the night, or you want to sleep more than usual, including during the day.
- **Early to rise.** You wake up earlier than usual and cannot go back to sleep.
- **Change in appetite.** You notice that you suddenly eat more or less than you used to, resulting in a quick weight gain or weight loss.
- **Trouble focusing.** You can't watch a TV program or read an article because other thoughts or feelings get in the way.
- **Loss of energy.** You feel tired all the time for no known reason.
- **Nervousness.** You always feel so anxious you can't sit still or focus.
- **Guilt You feel.** "Everything you do is wrong" and worry that you are burdening others with your diabetes.
- **Morning sadness.** Morning feelings are the worse than they are the rest of the day.
- **Suicidal thoughts.** You start thinking about ways to end your life, or are thinking about ways to hurt yourself.



If you have **THREE OR MORE** of these symptoms, OR if you have just one or two but have been feeling bad for two weeks or more, it's time to get help.



Continue taking your medication:

UNTIL your doctor recommends otherwise, continue taking your medication. This will help the physician determine if a physical problem is at the root of your sad feelings.

If you and your doctor rule out physical causes, your doctor will most likely refer you to a mental health specialist such as a psychiatrist, psychologist, psychiatric nurse, licensed clinical social worker, or professional counselor.

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2 Second Step - Getting Help:

If you are feeling these symptoms, talk them over with your doctor to determine if there are other causes for your symptoms. You can also seek help from any one of the following people:

Speak with a supportive family member, friend or clergy member:

Someone who knows you well and who supports your efforts to take care of yourself, can help you keep perspective on the importance of continuing to take care of yourself.

See Your Doctor:

Health problems that have similar symptoms to depression are:

- High or low blood sugars
- Alcohol or drug abuse
- Thyroid problems
- Side effects from some medications

Seeing a Behavioral Health Specialist:



Psychotherapy with a well-trained therapist can help you look at the problems that bring on depression. It can also help you find ways to relieve the problem. Therapy can be *SHORT* term or *LONG* term. You should be sure you feel at ease with the therapist you choose. If you don't, ask your doctor to refer you to someone else.

Psychiatrists (*mental health physician*) are the **ONLY** mental health professionals who can prescribe medication and treat physical causes of depression. If you opt to try an antidepressant drug, talk to the psychiatrist and your primary care provider about side effects, including how it might affect your blood sugar levels.

If your health care provider cannot refer you to a mental health professional, contact your local psychiatric society or psychiatry department of a medical school, or the local branch of organizations for psychiatric social workers, psychologists, or mental health counselors.

Your local **American Diabetes Association** may be a helpful resource.

If you have symptoms of depression, don't wait too long to get help.

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