

Recipes Rich with Omega-3 Fats

Lately, nutrition headlines encourage you to boost your intake of omega-3 fats with food items such as oily fish (salmon, tuna and trout), walnuts and tofu to improve your heart health. And today, the close relationship between type 2 diabetes and heart disease is well known. Consider omega-3 fats one of the good or “healthy” fats. Research shows that sufficient amounts of omega-3 fats can:

- decrease the incidence of an irregular heart beat, which can lead to sudden death from a heart attack or stroke.
- improve artery health.
- prevent formation of blood clots and prevent these blood clots from sticking to artery walls, which helps prevent heart attacks and strokes.
- decrease triglyceride levels in people whose levels are elevated.
- reduce buildup of plaque on artery walls.
- slightly lower blood pressure.



SALMON WITH CILANTRO PESTO FETTUCCHINE

6 servings

PER SERVING:

<i>Calories: 372</i>	<i>Protein (gm): 32.7</i>
<i>% Calories from fat: 30</i>	<i>Carbohydrate (gm): 31</i>
<i>Fat (gm): 12.3</i>	EXCHANGES:
<i>Saturated fat (gm): 2.6</i>	<i>Bread: 2.0</i>
<i>Cholesterol (mg): 126.7</i>	<i>Meat: 3.0</i>
<i>Sodium (mg): 319</i>	<i>Fat: 1.0</i>

6 salmon steaks (about 4 ounces each)
2-3 teaspoons Dijon-style mustard
12 ounces spinach fettuccine, cooked, warm
Cilantro Pesto (recipe follows)

1. Brush salmon with mustard; place on broiler pan. Broil 6 inches from heat source, until salmon is tender and flakes with fork, 10 to 15 minutes, turning once.
2. Toss fettuccine with Cilantro Pesto; arrange around salmon on serving platter.

Cilantro Pesto

makes about 3/4 cup

- 1 1/2 cups packed cilantro leaves
- 1/2 cup packed parsley
- 1 clove garlic, minced
- 1/4 cup grated Parmesan cheese
- 3 tablespoons walnuts
- 1 tablespoon olive oil
- 1 tablespoon lemon juice
- 1/4 teaspoon salt
- 1/4 teaspoon pepper

1. Combine herbs, garlic, parmesan cheese and walnuts in food processor or blender. Process, adding oil and lemon juice gradually, until mixture is very finely chopped. Stir in salt and pepper.

WALDORF SALAD

4 servings

PER SERVING:

<i>Calories:</i> 149	<i>Protein (gm):</i> 3.5
<i>% Calories from fat:</i> 26	<i>Carbohydrate (gm):</i> 26.5
<i>Fat (gm):</i> 4.7	EXCHANGES:
<i>Saturated fat (gm):</i> 0.3	<i>Vegetable:</i> 0.5
<i>Cholesterol (mg):</i> 0	<i>Fruit:</i> 1.5
<i>Sodium (mg):</i> 227	<i>Fat:</i> 1.0

- 2 cups cored, cubed red and green apples
- 1 cup sliced celery
- 1/4 cup raisins
- 1/4 cup coarsely chopped toasted walnuts
- 1/4 cup fat-free mayonnaise
- 1/4 cup fat-free sour cream
- 2-3 teaspoons lemon juice
- 1-2 tablespoons honey
- Lettuce leaves, as garnish

1. Combine apples, celery, raisins and walnuts in medium bowl. Mix remaining ingredients, except lettuce leaves and stir into apple mixture. Serve on lettuce-lined plates.

CURRIED COUSCOUS WITH SMOKED TOFU

6 servings (about 1 cup each)

PER SERVING:

<i>Calories:</i> 328	<i>Protein (gm):</i> 17.3
<i>% Calories from fat:</i> 23	<i>Carbohydrate (gm):</i> 47
<i>Fat (gm):</i> 8.8	EXCHANGES:
<i>Saturated fat (gm):</i> 1.7	<i>Bread:</i> 3.0
<i>Cholesterol (mg):</i> 2.5	<i>Meat:</i> 1.0
<i>Sodium (mg):</i> 318	<i>Fat:</i> 1.0

- 1/2 cup finely chopped onion
- 1/2 cup chopped red or green bell pepper
- 1 1/2 teaspoons minced garlic
- 1 tablespoon olive oil
- 1 1/2 teaspoons curry powder
- 1 1/4 cups vegetable broth
- 1 package (10 ounces) couscous
- 2 packages (6 ounces each) smoked tofu, cubed
- 1 can (11 ounces) Mandarin orange pieces, drained
- Salt and pepper, to taste
- 6 tablespoons (1 1/2 ounces) crumbled reduced-fat feta cheese

1. Sauté onion, bell pepper and garlic in oil in large saucepan until tender, about 5 minutes. Stir in curry powder; cook 1 to 2 minutes longer, stirring constantly. Add broth to saucepan; heat to boiling.
2. Stir in couscous and tofu; remove from heat and let stand, covered, 5 minutes. Stir in orange segments; season to taste with salt and pepper. Spoon couscous mixture into individual serving bowls; sprinkle each portion with cheese.

GREEN ON GREEN STIR-FRY WITH TOFU

6 servings

PER SERVING:

<i>Calories:</i> 275	<i>Protein (gm):</i> 11.9
<i>% Calories from fat:</i> 5	<i>Carbohydrate (gm):</i> 54
<i>Fat (gm):</i> 1.5	EXCHANGES:
<i>Saturated fat (gm):</i> 0.2	<i>Vegetable:</i> 3.0
<i>Cholesterol (mg):</i> 0	<i>Bread:</i> 2.0
<i>Sodium (mg):</i> 194	<i>Meat:</i> 1.0

- Oriental-flavored vegetable cooking spray
 - 3 cups sliced leeks
 - 1 cup sliced celery
 - 1 teaspoon minced garlic
 - 1 teaspoon minced ginger root
 - 1/2 teaspoon crushed red pepper
 - 4 cups sliced bok choy
 - 4 cups snow peas, trimmed
 - 1 cup chopped green bell pepper
 - 2 cups vegetable broth
 - 2 tablespoons cornstarch
 - 2 teaspoons reduced-sodium tamari soy sauce
 - 1 package (10 ounces) firm tofu, cubed
 - 4 cups cooked rice, warm
1. Spray wok or large skillet with cooking spray; heat over medium heat. Stir-fry leeks, celery, garlic, ginger root and crushed red pepper 2 to 3 minutes. Add bok choy and stir-fry 1 minute; add snow peas and bell pepper and stir-fry 2 to 3 minutes.
 2. Combine broth, cornstarch and soy sauce; stir into wok and heat to boiling. Boil, stirring constantly until thickened, about 1 minute. Gently stir in tofu; cook 1 to 2 minutes longer. Season to taste with salt and pepper. Serve over rice.

Diabetes & Sex: an Unspoken Complication

By Joseph B. Nelson M.A., Licensed Psychologist

Diabetes, if not controlled properly, is a major cause of sexual difficulties for both men and women. However, like so many of the complications related to diabetes, these difficulties can be preventable through proper management of the condition.

The onset of sexual problems related to diabetes is usually gradual and is connected with nerve damage. For men, it can cause the loss of the ability to have an erection. This is known as erectile dysfunction or ED. They may also experience low testosterone levels that result in a loss of interest in sex and a condition known as retrograde ejaculation where semen goes into the bladder. For women, the sexual problems of diabetes can cause complications with loss of sensation, difficulty with lubrication and delayed orgasm.

Early diagnosis of diabetes and proper treat-

ment once it is diagnosed are critical in preventing sexual problems. Once problems arise, they are likely not reversible.

While it is important to prevent these problems if possible, communication is the key to resolving the problems if you start to have any of the conditions mentioned in this article.

Some people may find it difficult to talk openly about sexual matters, but it is a necessity to determine whether some type of corrective treatment is needed. Your doctor, Walgreens pharmacist or diabetes educator are accustomed to listening to your most sensitive concerns, so discussing sexual matters is welcomed and acceptable. A wide range of effective treatment options to address sexual problems are available today, and by communicating openly with a health care professional, the right course of action can be determined.

Blood Glucose Log Sheet

Blood sugar	Breakfast	After breakfast	Lunch	After lunch	Dinner	After dinner	Bedtime	Night	Notes: (extra readings, special events, illness, activities, etc.)
Monday									
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									
Sunday									

Reference Chart	Average Target Blood Sugar Levels*	Your Blood Sugar Goals*
Before breakfast	90 to 130 mg/dL	
Before meals	90 to 130 mg/dL	
Two hours after meals	180 mg/dL or less	
At bedtime	100 to 140 mg/dL	

*Work with your doctor to establish your glucose goals.

Medication Table

Name of medication	Strength	Directions for use	Time of day
			<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime
			<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime
			<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime
			<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime
			<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime

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Fast Foot Facts:

Take the Foot Care Quiz

1. People with diabetes should inspect their feet daily. (T) (F)
2. It is OK to go barefoot if you have diabetes. (T) (F)
3. Toenails should always be cut straight across. (T) (F)
4. It is fine to remove calluses, corns and warts by yourself. (T) (F)
5. You should be measured and fitted properly each time you buy a new pair of shoes. (T) (F)
6. All people with diabetes will have a lower extremity amputation. (T) (F)
7. Only people who use insulin suffer from foot complications related to diabetes. (T) (F)
8. Controlling your blood sugar level will decrease your chance of foot complications. (T) (F)

Test Your Knowledge About Diabetes
 Take Our Diabetes Quiz Online



www.walgreens.com/diabetesquiz

4. **False.** The lack of sensation in the feet, poor vision and the wrong tools are among the reasons you should not remove calluses, corns and warts by yourself. Only a podiatrist should perform such removals.
5. **True.** Foot size can change over a lifetime, and wearing shoes that are too small is bad for your feet. To avoid buying shoes that are the wrong size, go shoe shopping in the afternoon, when your feet are at their largest.
6. **False.** Thirty-two percent of people with diabetes have amputations. With proper foot care and preventative examinations, you can greatly lower the risk of amputation.
7. **False.** All people with diabetes can suffer foot complications related to diabetes.
8. **True.** The 10-year Diabetes Control and Complications Trial studying people with diabetes demonstrated that proper management of blood glucose levels decreases the risk of foot complications. Increased blood glucose levels lead to higher risk of infections and other complications.

1. **True.** It is important to inspect your feet daily. Numbness can develop, and if feet are not inspected daily, minor injuries that could lead to serious problems could go undetected. Early diagnosis greatly improves the effectiveness of treatment.
2. **False.** People who have diabetes should never go barefoot. Doing so increases the possibility of sustaining minor injuries, which could lead to infection and possibly amputation.
3. **True.** The corners of the toenails should be visible after trimming.

Source: *The American Podiatric Medical Association*



Understanding Nutritional Supplements

By Belinda O'Connell, MS, RD, LD, CDE

The use of nutritional supplements, such as vitamins, minerals and herbs, has grown steadily in the United States during the past decade. Today, nearly half of all Americans take these products on a regular basis. If you are like them, you probably have questions about whether you should take nutritional supplements, which ones are best and how diabetes affects your nutritional needs.

Vitamins and minerals are essential compounds found in foods. They are used by the body to perform basic functions, such as building bone and muscle. It is well known that the best way to meet your nutritional needs for vitamins and minerals is by eating a balanced diet rich in fruits, vegetables, whole grains and low-fat dairy foods. These foods supply a variety of nutrients and other compounds that supplements can not duplicate. People who eat a wide variety of foods and meet the minimum number of servings recommended in the food pyramid (five or more servings of fruits and vegetables, two to three servings of dairy, six servings of grains, limited heart-healthy fats and approximately six ounces of lean meats or protein equivalents) on most days should be able to meet their nutritional requirements without nutritional supplements.

Even if you fall into the group of people who try to eat well, but sometimes falls short of the mark, you might also want to take a multivitamin. This is like an extra bit of health insurance. Some researchers have suggested that all Americans should take a basic multivitamin supplement to ensure they meet their daily nutritional needs. People with diabetes also may have risk factors that can increase the possibility of developing nutrient deficiencies. Use your answers to the following questions to evaluate your risk for nutritional deficiencies and help determine whether you should be taking nutritional supplements.

Do you often have blood glucose levels over 200-250 mg/dL?

High blood glucose levels increase urination and loss of water-soluble vitamins such as the B vitamins and some minerals such as magnesium. High blood glucose levels also may increase requirements for antioxidant nutrients like vitamin E.

Do you take prescription medications on a regular basis?

Many medications interfere with the absorption or metabolism of nutrients. The diabetes medication metformin can decrease folate and B12 absorption. Many blood pressure and heart disease medications also can interact with nutrients.

Do you smoke or drink regularly?

Smoking increases vitamin C requirements, and high alcohol intake can interfere with the absorption and utilization of many nutrients.

Are you eating fewer than 1,200 calories a day, or do you avoid eating foods from a particular food group?

If so, you are more likely to miss important nutrients. Vegetarians who eat no animal products may require supplemental zinc, calcium and vitamin B12 and vitamin D.

Are you over 55 years of age?

Many people with diabetes fall into population groups with increased nutritional needs either due to growth (pregnant women, children and adolescents) or decreased absorption and utilization (older people). Older people are more likely to have deficiencies of zinc, vitamin D, calcium, vitamin B12, folate and B6. A daily intake of 1,000 mg to 1,500 mg of calcium and 400 IU of vitamin D is recommended. Pregnant women

and those women who have not reached menopause may need supplemental iron and should be taking 400 micrograms of supplemental folic acid each day.

If you answered yes to any of these questions, you could have low vitamin and mineral levels. One way to improve your nutritional health is to meet with a dietitian to review your individual eating plan and learn about how you can eat healthier. A dietitian and your other health care providers also can help you determine whether you should be taking any nutritional supplements. Some people may need individual vitamins or minerals, such as folate or calcium, but in most cases, a basic multivitamin supplement that provides 100 percent of the daily value for most nutrients, is all you need.

Learn more about nutrition at



www.walgreens.com/nutrition

Heal That Wound

By Joy Pape RN, BSN, CDE, WOCN

You may think, “it is no big deal, it is just a little sore,” but in the back of your mind, you know that if you have diabetes, even a little sore can cause major problems. You may have heard stories about people who had a small cut or scratch that turned into something bigger. Your health care provider may have told you about the importance of taking care of your feet to prevent infection. But what if you have just a cut, a scratch or a sore somewhere else on your body? What can you do?

While it is true that people with diabetes have a higher risk for problems like infections and non-healing wounds, a few simple strategies can help you to prevent these problems.

1 Keep your blood glucose in good control. The American Diabetes Association recommends your blood glucose level before meals should be between 90 to 130 mg/dL and two hours after the start of a meal less than 180 mg/dL. A hemoglobin A1C level of less than 7 also is considered good control. When your blood glucose is higher, it is more difficult for wounds to heal, and it increases your risk for infection.

2 Nutrition. Nutrition is important for wound healing. Think of it as healing from the inside out. Choose foods that help keep your blood glucose levels in control and eat a variety of healthy foods. Increase your intake of fluids, especially water. A multiple vitamin that includes zinc and some extra Vitamin C may also help.

3 Watch closely. Keeping an eye on your wound is very important. Besides basic wound care, watch for signs of infection. If any of the following occur, contact your health care provider:

- Redness, warmth, swelling or increased pain around the wound. Not all people who have diabetes can feel pain, so this is not

always a reliable indicator of a problem.

- Drainage or a change in the color of drainage, especially if it turns a green color.
- Temperature.
- A red streak from the wound. This means get help right away.

Wound Care

General wound care means inspecting, cleaning, treating and covering your wound. Inspect your wound and surrounding area at least once a day. Report any changes as noted in steps one to three. You should clean your wound gently once or twice a day with a mild soap and warm water. Make sure to rinse well and allow the area to dry. Do not use alcohol, hydrogen peroxide or iodine. These products can delay healing.

Treat your wound by covering it with a dressing that absorbs drainage, but does not cause your wound to dry out. Some people find an ointment like petroleum jelly or an antibiotic ointment helpful because it keeps the wound moist. Do not use the antibiotic ointment for more than two or three days on minor cuts and sores.

Protect your wound by covering it with a dressing to keep out dirt and prevent reinjury. Do not leave your wound open to air to dry out. A dry wound forms a scab, which can increase infection and scarring.

Many people have wounds that do not heal because they wait too long to get help. They think they are bothering their health care providers by speaking to them about a sore or wound. My advice to you is to bother your health care providers. You'll both be happy you did.

