

ADA: Ask the Experts Access Live Event Full
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Carla Cox:

Hello, and thank you for joining us. Welcome to the 2023 American Diabetes Association, Living with Diabetes, Ask the Experts Series. Today's topic is Lifestyle Choices Matter: How to Quit Bad Habits. My name is Carla Cox, diabetes care and education specialist, registered dietitian, nutritionist, and your host for today's program.

Our Ask the Expert series is all about answering questions from our listeners. So, start getting your questions ready now. For those of you on the phone, press *3, that's *3 on your keypad and an operator will collect your question and place you in the queue so that you may have the opportunity to ask your question live. To participate online, type in your name and question in the fields below the streaming player. Press the submit question button and your question will come directly to us. Stay with us through the hour and you will learn useful tips to help you live well on your journey with diabetes. In addition, we invite you to provide us with your feedback in a survey at the end of the event, so please stay with us.

Okay. Now a little bit about why we're here today. Because of the link between diabetes and heart health, the American Diabetes Association in collaboration with the American Heart Association has launched Know Diabetes by Heart. With support from founding sponsor, Novo Nordisk, as well as national sponsor, Bayer, the Know Diabetes by Heart Initiative provides tools and resources for people living with type 2 diabetes to learn how to reduce their risk of cardiovascular disease. As part of the initiative, the ADA is holding this free educational Q&A once a month. We'll uncover information and tips to help you take to of your health. When you have diabetes, it increases your risk of heart disease, stroke, and kidney disease. Make sure when you see your doctor, you talk about your risk and works towards prevention. And visit knowdiabetesbyheart.org for more information and resources.

So now I am happy to introduce our guest speaker today, Dr. Leanna Ross. Dr. Leanna Ross is a faculty member in the Division of Cardiology in the Department of Medicine at the Duke University School of Medicine. She received a PhD in exercise science from the University of South Carolina and completed a postdoctoral fellowship at the Duke Molecular Physiology Institute. Her research investigates how different exercise training programs reduce short-term and long-term health benefits. The goal of her research is to enhance precision lifestyle medicine by designing tailored exercise interventions, optimizing the prevention and management of cardiovascular disease and type 2 diabetes. She's a proud member of the American Heart Association and the American College of Sports Medicine and finds great joy in helping others improve their health and wellbeing by developing quality lifestyle habits. So, Dr. Ross, please add a few lines if you'd like.

Leanna Ross:

Great. Thank you so much for having me for this special event. I'm really excited to share some of the tips and tricks that I use not only for myself but with others that I work with through our research studies to try to implement more helpful, beneficial changes with our lifestyle habits that can pay dividends and a great return on investment by taking that time to make those positive changes in our own lives.

Carla Cox:

Thanks. As we're waiting for our callers and online listeners to chime in, I'm going to go ahead and kick off with the first question. Do you recommend people evaluate their own lifestyle choices to see if there are better choices to improve their health?

Leanna Ross:

Absolutely. That's one of the first places that I always start with someone that I'm helping to counsel. Let's figure out where we are from the get-go. So, what are diet patterns looking like? What's our sleep quality like? What's our physical activity look like day-to-day? How are we doing even with our medication adherence? And let's see what are some of the areas that maybe need some improvement versus what are some of the areas that we're doing really well, and we want to continue to maintain that high standard in those other areas? And once we're able to assess where we're at with certain lifestyle factors, then we can identify where we need to start to make those improvements.

Carla Cox:

Thank you. If you're just joining us, welcome to today's Ask the Experts Q&A Lifestyle Choices: How to Quit Bad Habits. As a reminder for these of you on the phone, press *3, *3 on your keypad and an operator will collect your question and place you in the queue so that you can have the opportunity to ask your questions live. To participate online, type in your name and question in the fields below the streaming player. Press the submit question button and your question will come directly to us. Let's remember to focus on today's topic, Lifestyle Choices: How to Quit Bad Habits when asking questions. Now, let's take the first question. And I'm going to go to Robin McCune. Robin is from California. Robin, you're on the line.

Robin McCune:

Hi. I'm actually asking for a family member, but I was wondering if you have any tips to get off of sugar. I would say kind of a sugar addiction type situation.

Leanna Ross:

Great. Well, first of all, it's so great to hear from a family member and a loved one that's involved in the care because diabetes management is something that can be really tricky and there are a lot of different facets that we have to address to try to best manage our diabetes care. And so I think one of the things that we can do is develop almost a mindset of what can we add in that might be a more helpful change, a more healthy alternative as opposed to the fast-acting sugars that can cause that great spike in glucose and then a potential drop in hypoglycemia event. So, for example, maybe there's something that we can add in like what are some great fiber-filled foods that we can have that tastes great. Maybe it's something like an apple and it gives us that sweet sensation, but the fiber that's contained in the apple as well almost helps us to feel that satiety or that sensation of fullness for a little bit longer as opposed to some of the things that are those quick acting carbs.

Carla Cox:

Great. Thanks. And this is almost a follow-up question, and this question comes from Denise, and Denise is from Pennsylvania. Denise, you're on the line.

Denise:

Hi. I'm also basically the same thing. My husband has diabetes, but I don't. But anytime I get upset, I find myself eating cheesecake and chocolate cake and anything sugary like that. What do I do to try and stop that? And I do take fiber because I have constipation with medications.

Leanna Ross:

Great. So, thank you as well for being someone that's a caretaker and involved and really working as a team. And so, I want to go off of that for a second. So not only is it a patient with diabetes that really

needs to be conscious of the types of foods that they're putting in our bodies, but all of us need to. And so, maybe it's something more of this solution-based problem-solving type attitude that we have and working with each other. And so instead of getting upset with the other person, we work actively together with identifying what's another treat maybe that we could have that's readily available in the house that still satisfies that craving for sweetness, but isn't necessarily something that's potentially is detrimental to our blood glucose as something like a big piece of cheesecake, for example.

Carla Cox:

Great. Thanks. Okay, we have a write-in question, and the write-in question comes from Molly, and she asks, how do you help someone quit smoking that has been diagnosed with diabetes?"

Leanna Ross:

Well, this is an extremely important topic. Smoking cessation counseling is something that we think needs to be implemented as part of our routine care, and that's something that's strongly backed by our American Diabetes Association. And so, we always want to make sure that we're seeking help, whether that's seeking help from our primary care provider or support from a diabetes educator so that we can develop something that's an individualized plan to really help us frame what it is, why is it that we personally want to quit. Even if it's something that we know is bad for us, sometimes just knowing that it's something that's bad for us isn't the right answer to get us to actually maintain smoking cessation. And so, we want to identify what our reasons are for why we want to quit personally. We not only can talk about the risks of continuing smoking and some of those negative consequences of continuing to smoke. But on the flip side of that, we can flip our mindset to really try to identify for ourselves what are those rewards that I can get that are a result of smoking cessation.

We also want to be able to identify our potential barriers or roadblocks that we might foresee that come along with quitting tobacco use, which it can be a very challenging lifestyle behavior change. And so, we want to make sure that we're getting enough support from those healthcare providers as diabetes specialists, as well as family members, friends, someone else that you can really rely on to be your cheerleader especially in those times where urges can be really, really strong.

And finally, I think it's important, whether it's talking about smoking cessation or working in other healthy patterns in our lives that we want to develop is to be able to be kind to ourselves. Our road on these behavior changes and diabetes management are not always going to be easy. Several different factors are always coming into play. So be kind to yourself if your journey in smoking cessation isn't quite perfect.

Carla Cox:

Great answer. Great answer. Okay. So next we have a question coming in from Lisa. And Lisa's from Nashville, Tennessee. Lisa, you're on the line.

Lisa:

Oh yes. I have this struggle with myself and also with patients, and that is that person who's in the place of, "Oh gosh, I want to make a change. I'm invested in this. I do want to make this change, whether it's diet or exercise, whatever," that person has the resources that they need to make that change so there's no barriers in terms of affordability or location or access and that person is really trying, and they are just having a terrible time. They might put things off as well, "I'm going to start that tomorrow or maybe after this certain holiday." Or they might start and get off to a strong start for a couple of days, but then

day three, "Well, I kind of fell off the plan." How do you get that person who's kind of their own worst enemy to make these lifestyle changes?

Leanna Ross:

I think one of the things is going to our personal roots. So, what is it for you or the person that you're helping care for, what is their why? So, a lot of times I'll think about stuff, if it's increasing exercise for example, that's what I do for a living, is trying to increase physical activity and exercise in patients at risk for and with chronic diseases. One of the things we can say is like, "What moves you?" And I mean that in the sense of what is it that you value? What is it that you hope to gain? What are those reasons that you not only want to become physically active but maintain that behavior change? And so, getting down to that root cause of why it's important to you, I think, can be great to not only identify, but maybe that's something that we write down and we post it somewhere that we see it every day.

And so, on those days where maybe we're feeling really tired or overwhelmed and exhausted and it's like, "I don't feel like going on my walk this evening," let's go back, let's take a look back at what is it that we're doing all of these big changes for. Rooting ourselves in that can be really beneficial. And I think too, recognizing and knowing that it's okay that our journeys aren't going to be these straight paths. We're not always going to hit every single goal that we set for ourselves, but knowing that we have that perseverance to keep going and we are resilient creatures and that's in our human nature, so let's try to amplify that. And I think it's always great if we have some extra members in our team, whether that's friends or family, that can be some of your healthcare providers, that can be something like a pet that can even help kind of hold us accountable to trying to make sure that we're hitting our goals as best as we can. It's all about progress, not perfection.

Carla Cox:

That's great. And I love the idea of a pet. I have a dog that is my happy place. So, if things are not going perfectly, we just go pet the dog because she's always happy to see me. I love that. Okay, I think this is a very excellent question. So, this one comes in from Laura. And Laura's from Pennsylvania. Laura, you are on the line.

Laura:

Hi. I'm a type 2 diabetic. I live in an A1C cycle of up and down. Recently, my insurance approved a Dexcom G7, and I'm trying to figure out how not to be obsessed with my blood sugar numbers to the point that I actually starve myself. I mean, I get up-

Leanna Ross:

Go ahead. You can finish your question.

Carla Cox:

Oh, she's off the phone. Sorry.

Leanna Ross:

Oh, okay. Well, thank you for your question. I totally appreciate that sometimes we can almost feel like we're going a little bit overboard when we have values that are right there at our fingertips and we're able to utilize. So maybe it's something where we're able to set a plan for yourself where instead of constantly checking it, maybe only check it a few times during the day. And maybe you set that as a

scheduled reminder in your phone that, "Okay, I'm going to check it when I wake up. I'll check it after I have my big meal of the day, three hours post meal. And maybe I check it after I go for my evening walk." Something like that, for example. So that way you're taking control and you're the one that's able to help identify those times that it's best to know your numbers but also not go to that extreme end of obsessing about it. And then that healthy behavior of monitoring your blood glucose levels can turn into almost a negative thing where like you said it might lead to something detrimental such as restricting your eating, for example.

So, we want to be able to find that healthy balance. And if that's really something that's challenging for you to try to tackle on your own, I think it's always okay to ask for help. So, you can talk again to your primary provider, your diabetes educator, someone that you trust in order to help get help with some resources that are available to you.

Carla Cox:

Yeah. And I have to state that you're not alone. Lots of people, especially initially, become very intrigued might be the right word with watching those numbers. Remember there's not a lot you can do about whatever it says in the immediate time, right? It's looking at trends and patterns. So, one of the things to do is recognize that if you eat a meal and you go up afterwards, that's natural. Everyone does. You have diabetes, you're going to go a little higher than someone else. But where are you three hours from now? So, you might even look at, "Okay, in three hours I want to know where I am." And if you're still high, meaning over 180, then if that's happening a lot on a regular basis, then talk to your primary care provider about, "Do I need a little bit of help from some medication?" I don't know what you're on right now, but use it as a not absolute number of where I am exactly right now, but really trends and patterns.

And as Leanna said, your diabetes educator team should really be helping to interpret it those values. You can also do an upload in two weeks, and you can look backwards and see what the trends and patterns are, which is what I do as a professional all the time. I'm always looking at children's data and making decisions, but it's not at the moment, which is what a finger stick does. It is looking at it over time. So please reach out to your diabetes team and have someone that's really well versed in the sensor to help you because it is an incredibly valuable tool to learn more about what you're eating, what the response is, and then what you need to do about it. So, thank you for sharing that.

Okay. And this may actually be along the same line in a way. This is coming in, a written question from Anne-Marie, and she says, "How do you handle burnout?"

Leanna Ross:

That's a fantastic question and it's something that I think a lot of us can face. I myself, I go through bouts of feeling burnout especially in times where my workload is extremely heavy. So, it can happen in that sense. It can happen in the sense of us trying to understand how best to manage our diabetes across a wide array of helpful lifestyle habits that we're trying to build and incorporate. And so, one of the things I think first is almost identifying with yourself like, "Okay, what is it that I'm feeling and what are these feelings trending like over time?" And being willing to ask for help and seek some support when you notice that it is a trend that seems to be growing and growing.

Myself, I am someone that I started realizing as I've gotten older that nobody knows that I need help necessarily unless I ask them. And so, seeking that support from someone that's maybe they're able to help you take care of the kids over the weekend so that you can have a moment to yourself to try to do a relaxing activity or to be able to do something that you enjoy, that's just time for you, time to be mindful and kind of allow ourselves that time to rest and reset. And realize too that that feeling of

burnout isn't something that has to continue on. So, whether we're able to alleviate those burnout feelings on our own or if it's something that tends to be a little bit more overwhelming, and again, it might be something where we need to seek out some professional help. Counselors and therapists and other healthcare providers that are associated with your diabetes education and care team can be such great resources in helping you identify some other tools that might be helpful for you to manage that burnout.

Carla Cox:

Thank you. So, we have lots of write-in questions right now. I just want to remind everybody that you can also call in. Write-in questions is great, and I'll ask them, but if you want to call in for those of you on the phone, press *3, that's *3 on your keypad, and an operator will collect your question and place you in a queue so that we can ask your question live. But the write-in questions are great too. So, here's another write-in one. And it's not necessarily breaking old habits or how to do that, but it's an interesting exercise physiology question, so we will ask our exercise physiology expert. And this is coming in from Joshua, and he said, "Would you recommend a focus on strength building exercises or cardio exercises for controlling blood glucose?"

Leanna Ross:

Well, I am a big believer in the power of the combination of both aerobic and resistance exercise training. By being able to build up to where we're incorporating regular resistance training, maybe two to three times per week, as well as maintaining our aerobic or that more cardiovascular type working physical activity and exercise, it really gives us a big bang for our buck.

And so, the beauty of the body's adaptations to these different forms of exercises, they provide this what we call a eustress to the body. So, it's a good type of stress to the body where aerobic exercise really helps us develop our cardiovascular and pulmonary adaptations to exercise. And then with the resistance training, whether that's something with even utilizing body weight movements through resistance bands or free weights, building up that muscle mass is so important for us. And that has some other benefits to maintaining physical functioning. Maintaining muscle mass as we age is really important. And so together, they not only have these functional benefits that I hope you're able to notice, but also all the way down to the cellular level, the combination of aerobic and resistance training is fantastic for improving our body's ability to uptake and utilize glucose with the working musculature as opposed to being stored in a fat source.

Carla Cox:

Great. Thanks. So, this question once again online is coming from Andrea and she says, "How can I reduce carbs and increase protein in my diet if I prefer not to eat any meat?"

Leanna Ross:

Yeah, great question. I personally am not a licensed dietician nutritionist, but I do know that there are so many alternatives out there that might be plant-based that have some really delicious options that have come out in the past few years. And so, I think there's a lot of opportunity out there to incorporate new types of foods that are able to give you a great source of protein. And for example, there's even on the American Diabetes Association website all the time, they're posting new recipe examples of things that you can try. And so, I totally urge you to consider exploring new foods that you can add in and find what you like.

Carla Cox:

Great. Yeah, I think there are a lot of protein options out there. Some of them are protein substitutes. There are companies that actually make look-alike patties that are soy-based, for example. But cheese is always a great one. Eggs are a good one. If you don't like meat, eggs are a great option. So, I think there... And any kind of legume like a black bean. Even though the black beans are higher carbohydrates, you can subtract the fiber out because that's not going to impact your blood glucose. So those are all really good options. Tofu, if you like to play with that. Generally, that takes on the flavor, the characteristic of the spices that you put with it. So, there's some other options that you can use that might be helpful.

Okay, so this is interesting too. Let's go down here. Okay, so this comes from Sarah. It's a write-in question and Sarah says, "What is the most interesting thing you have noticed about struggling to continue the maintenance phase?" I assume that means weight management.

Leanna Ross:

My goodness. I think this is something that's different for everybody. All of our bodies respond differently during a weight maintenance phase. So, off the top of my head, I honestly don't have any interesting stories for you, and I'm so sorry that nothing's coming to mind. But I do want to encourage you that in your weight maintenance phases, if you're coming across some obstacles or maybe the numbers of your weight are starting to creep up a little bit, not to get discouraged. And I encourage you to stay the course because our bodies do go through some natural fluctuations. And so, I want you to continue to incorporate your healthy diet patterns, continue monitoring your weight, your glucose. I encourage continued physical activity and prioritizing things like your sleep health or what we call our sleep hygiene. All of those things together are allowing us to have a higher probability of success in maintaining weight loss.

Carla Cox:

Thanks. And here's another write-in question from Marcia. Marcia, I guess. "I feel overwhelmed by all the changes I need to make to my diet. Where do you recommend that I start?"

Leanna Ross:

Making a lot of dietary changes is absolutely overwhelming for a lot of us. And so, whether it's diet related or with another, one of our lifestyle habits that we're trying to make more beneficial, is I always go back to the tried-and-true acronym of SMART for setting SMART goals. And so, we want something that's specific and measurable. Attainable is really key in this situation, something that's realistic and time bound. And so here with the attainability, I think it's okay to start small. And so, instead of looking at, "I need to make all of these big changes to my dietary pattern all at once," let's start with one thing that you're motivated to do.

Maybe, for example, that's something about lessening your intake of sugar sweetened beverages, for example. So, what's a goal that we could easily attain that has that time-bound component to it? So maybe for the first few weeks of starting to make these changes, my goal is to replace one sugar sweetened beverage a day with a glass of water instead. And so, I think that's one of the best ways that we can go about it. And then helping us to make sure that we're attaining some of these smaller goals is the importance of self-monitoring. For me, I find it really helpful when I'm writing something down and tracking it. And so that way I can see when the days are that I've been hitting my goals versus when are some of the days that it's been a little bit more difficult for me to hit that goal. And then trying to

identify what are those alternative options I could have to help myself have an increased chance for success.

And working with others too. For example, if you live with family members, maybe it's a goal that not only you're trying to do yourself, but you start implementing that across the family. And so, it's all of you working together to improve your healthy habits.

Carla Cox:

Great. So, this question is coming in from Theresa. Theresa is from Massachusetts. And Theresa, you are on the line.

Theresa:

Well, good afternoon. My question is I'm a type 2 diabetic. I've been one for 15 years. I just turned 60 this year. And in all honesty, I don't take very good care of myself and I'm feeling like it's too late. Do you have any comments or advice on how to get started after 15 years of being a diabetic?

Leanna Ross:

Well, first of all, it sounds like you have that initial motivation to change, and it is never too late. Anytime that we're able to improve on some of our lifestyle habits is going to have a beneficial change for us. And for example, with something like physical activity and exercise, we get tremendous benefits even when we move from thinking that we're doing nothing or very little to just doing something. And so, allow yourself to have that positive mindset that, "Okay, taking an extra 500 steps per day." Maybe that's a starting goal for you. "I know that that's really going to benefit me." You can do the same thing across trying to work on stress reduction, increasing your healthful dietary patterns. It can go across the board.

One of the other things that I think is really cool about being able to make lifestyle changes is that typically if we're able to improve in one of those lifestyle habits, it usually helps feed off of some of the others. And so, for example, maybe it's something like, "Okay, I've started incorporating more fruits and vegetables into my daily dietary patterns and I'm starting to feel less bloated, more invigorated, a little bit more energy. And because of that, I feel like taking my daily walk outside for 10 to 15 minutes." And then I'm able to increase that physical activity behavior. And one of the great, I'll call it a positive side effect of increasing our physical activity, is that actually can help improve our sleep quality. And so, you get into one of these beneficial cycles that's happening. So, I just strongly encourage you to start somewhere. It's never too late. And start to reap those benefits of making those beneficial changes.

Carla Cox:

Great. Okay. Hannah writes in again, I think she had a question before, but this is a good one. "Do you have any tips on how to help motivate and guide patients who are in the pre-contemplation stage of lifestyle change?"

Leanna Ross:

Thank you for your question. I'm not a behavior change counselor, so I don't quite have a solid expertise in helping transition someone from our pre-contemplation to the contemplation stage. But I think something that's important across the board is something like I mentioned earlier, is helping someone maybe find out and identify what their why is for making sure that whatever this new goal for them and developing that healthy habit is tied to their personal values and beliefs. And that can maybe help start

motivating that transition into contemplation and then eventually action. Carla, do you have anything to add there?

Carla Cox:

Yeah, I think it's hard to move someone... Everybody moves at their own pace, right? But support from others is probably the most important part, where they get positive support, not negative support. Not nagging positive support on, "You know you want to do this." In fact, one of the callers in who is saying, "I haven't done anything for 15 years, is it too late at 60?" Well, no, you're thinking about it, or you wouldn't be calling and asking that question. Now, get some support from others so that you move forward to the next stage. That'd be my basic recommendation.

Okay. So here is an exercise physiology question. Alida writes in and says, "Will increase movement after every meal help with blood glucose levels?"

Leanna Ross:

Yeah. So, our activity that we do after we ingest a meal can also play a role in our body regulating our blood glucose levels. I do want to say though, depending on where you are at with your diabetes management or if you're maybe pre-diabetic or just taking some preventive measures for yourself, it's really best to make sure that you're talking to your primary care provider or someone on your diabetes care team, especially if something like medications or insulin injections are involved. Because some of our situations with exercise after we eat, it can help take some of that blood glucose and pull it into our working musculature. So that can help lower your blood glucose levels. But again, that's something that I want to use caution here in that it can be different for different people depending on the stage that you're at.

Carla Cox:

And the intensity of the exercise, right?

Leanna Ross:

Absolutely. Yes. I do encourage moderate intensity walking. It is one of the greatest things that we can do to improve our metabolic health.

Carla Cox:

Perfect. Here's another write-in question. "What are the three most important lifestyle choices that can lower the risk of developing heart disease and stroke?"

Leanna Ross:

Yeah, so I think the ones that I have to start with is going back to smoking cessation. Tobacco use is extremely detrimental in the development of cardiovascular disease and mortality, unfortunately. So, I would definitely prioritize tobacco cessation. And of course, as an exercise physiologist, I have to say that increasing physical activity is such an incredible way to have beneficial effects on either delaying or preventing or managing cardiovascular diseases that can occur. And then finally, making sure that we're, again, having those healthful dietary patterns because that can feed into all these other areas, whether it's our blood glucose regulation and insulin sensitivity or resistance, as well as our body composition and weight management. So those for me, I think, are the big three.

Carla Cox:

Thank you. We have a question coming in from Anne. Anne is from Washington State. Anne, you're on the line.

Anne:

Oh, hi. Thank you so much for taking my call. I'm extremely frustrated and discouraged. I have apparently fibromyalgia and I had back surgery in March, 3 level lumbar fusion. Before the surgery, I practically just lived on the couch. And I was looking forward to, after the couch and the surgery, being able to walk. I don't know what I can do to increase my exercise level. I'm still on pain pills if I want to do any kind of standing or walking, but soon I will not have pain pills. I have foot drop and numbness. And I think from, I don't know whether it's the fibromyalgia or the surgery, I also have limited use of my arms putting them in different positions. I'm not sure where to start to increase my exercise and be able to walk, especially with the foot drop and the numbness.

Leanna Ross:

Well, thank you so much for calling in. And thank you for sharing that sometimes it is discouraging for us when we're not able to do the things that we think we're able to do and we feel a little bit limited. But hopefully after hearing some of these tips from today's call, you can feel a little bit more encouraged and hopeful about your ability to move in a way that's beneficial for your health. And so, for example, one of the things is yes, walking is a great form of exercise for a lot of different health benefits, but that's not the only thing that we can do. A lot of times we can do things like implement chair or seated exercises that can still be really beneficial. There could be things like a riding a stationary cycle or geometer or bicycle, that's another great form of exercise. Water aerobics and swimming. If you have access to a pool, those are really great forms of exercise that can have a multitude of benefits as well.

But I want to say that I think one of the great resources that you might be able to utilize is that of a physical therapist. And so, I encourage you to talk to your provider about the possibility of getting a referral for a physical therapist because they're going to be able to work with you, especially for all these different considerations that you have with your health and mobility in order to help prescribe you and teach you different ways that you can incorporate different exercises to really get you going on the right foot with your journey.

Carla Cox:

I think we totally underutilized physical therapists and also pharmacists actually in the works to help you manage your diabetes. Pharmacists are excellent place to go to ask questions about medication. And physical therapists are awesome. If you've got a part of you that doesn't want to move, maybe it's a bad knee or a bad ankle or like you said, foot drop, physical therapists are miracle workers. I totally encourage you to do that.

So, this question comes in from Phil and he says, "My blood sugars consistently rise when I fast and do cardio. Why is that?"

Leanna Ross:

So, without knowing the exact timing of when you're measuring and monitoring your blood glucose, one of the things that when we exercise, our body utilizes glucose is a source of energy. And so, our body is able to kind of think of it as releasing sources of glucose that start to circulate in the blood in order to deliver that energy source to the main muscle groups that are working to be able to power our bodies and move that way. So that's just one example that can happen in that situation.

Carla Cox:

Thank you. Yeah, I think intensity of exercise makes a big difference too. So, if it's someone that's breathing heavy with their cardio, not interval training or something, they might see a rise in glucose versus something that's what you're often recommending as a more moderate approach, which should lower this theoretically, yeah. Dee is calling in. And D is from Atlanta, Georgia. Hi, Dee. You're on the line.

Dee:

Hi. Hi. I wear the Lifestyle Monitor on my arm and I noticed in the nighttime probably like 2:00 or 3:00, I have my alarm set, so if my blood sugar drops 50 or below to notify me. I've been noticing that the alarm goes off several times during the night, probably like 2:00, 3:00 in the morning and I get up and I check, and my blood sugar is probably like 52 or 53. I'm not sure if I'm doing something wrong or if I'm not eating properly prior to me going to sleep or if I'm not eating enough. I just need some advice on what I can do differently. Thank you so much.

Leanna Ross:

Yeah, thank you for your question. Unfortunately, this isn't necessarily my area of expertise. And so, outside of referring you back to your healthcare provider to talk to them about this situation and your concerns is going to be really important. But Carla, do you have anything helpful that you could add?

Carla Cox:

Sure. So, two things to think about. Number one, if you are sleeping on your sensor, like putting pressure on it, because it's monitoring glucose in the interstitial fluid, so if we restrict the fluid, you're going to have a hypoglycemia reading. So, you should do a finger stick check to double check the sensor and see if it's actually going low or if it's merely because you are sleeping on it. So, if you're sleeping on it and that's the cause, then you change where you're putting it. So where on the arm are you not going to lay on the middle of the night? That's number one.

Number two is if you're truly getting into the 50s in the middle of the night, you definitely need to talk to your diabetes team and your healthcare provider. So, it's not that you're not eating the right things. But depending upon what medication you're taking, whether it's oral or with insulin, you need to fix that because you don't want to be below 60, really below 70 even during the night. Below 60 is considered significant hypoglycemia, especially below 54. So, you need to talk to someone. And I would talk to your healthcare provider or your diabetes team to see who they think you should be referred to, but it could be a medication thing. If you're not taking medication, then it's probably laying on your sensor. So hopefully, that helps.

Okay. So, another question coming in that actually relates to that is, "What about getting a decent night's sleep?" And if you're getting interruptions, it's one of the discussions in the literature actually on all this technology we have, which is really cool, but for example, as our last caller, if you're always getting interrupted between 2:00 and 3:00 in the morning, that's not cool and it's interrupting your sleep. So, give us some tips on sleep loss and maybe how to make that better.

Leanna Ross:

Yeah, that's a difficult question for me to answer because our previous caller was just talking about the ability to monitor our glucose levels while we sleep is a really cool thing, but it can also cause these disruptions in our sleep. And our sleep health is really important for our overall health as well. I can't think of any tips, I'm so sorry, in regard to that though.

Carla Cox:

Once again, it's good to talk to your healthcare provider if you are lacking sleep. There is lots of literature supporting that poor sleep is related to worse glucose. Plus, we don't care about managing our glucose because we're so tired, right? So definitely talk to your healthcare provider if you're losing sleep.

Okay, this is a very global question, but Leanne, I think you're a good person to answer it. The question comes in from Sarah and she says, "How do you see lifestyle medicine making changes in healthcare or being incorporated over the next decade?"

Leanna Ross:

Fantastic question. I am very hopeful that we get more and more incorporation of healthy lifestyle programs that are incorporated. And that can be based within clinic settings that can be better utilization and more deployment of fantastic community programs that we have that are available, as well as hopefully getting more and more backing from insurance companies that are recognizing the importance of really promoting these healthy lifestyle behaviors. And that can relate to fantastic financial benefits in addition to the multitude of health benefits that come along from developing these healthy lifestyle habits. So that's one area that I see.

Another area that I see is hopefully continuing to strengthen the link between our primary care providers and our diabetes health educators. And for me the link to exercise physiologists, I think that's another underutilized type of practitioner that we have that can just provide so much expertise and help to our patients. And so, I know that there's been a big push lately in trying to understand how we can be able to get insurance billing available for exercise physiologists in different settings. So, I'm very hopeful on that front within the next decade.

And then finally for myself and my personal research interests, I'm hoping that we can continue to understand the different types of exercise that can be most beneficial for a certain type of patient. And so, really being able to customize our ability to prescribe exercise, whether or not that's with a weight loss component or not, to really tailor that to the individual instead of these generalized recommendations that sometimes we fall prey to, and really being able to maximize our ability to prescribe the best exercise for someone so that they can get the biggest benefit across a multitude of health outcomes.

Carla Cox:

Great. Thanks. This question comes in from Rachel and she says, "I was diagnosed with type 2 diabetes last year and I'm struggling to reduce my A1C. Are continuous glucose monitors recommended to help identify how your body responds to certain foods?" And I think with our topic today, it's good because by looking at them, does that help you do you think to make possibly the forward motion for behavior change?

Leanna Ross:

Yeah, absolutely. I think that ability that is provided by continuous glucose monitors to self-monitor is something that's going to be really beneficial as more and more people have access to be able to utilize those. And so, using that as a beneficial tool for us, as Carla mentioned earlier, to try to track trends in our blood glucose levels and being able to start to monitor ourselves. What were some of the activities or foods you ate that day that related to what your blood glucose levels were trending like? So that self-monitoring piece in tracking for ourselves helps hold us accountable and helps us identify areas that we

might need extra help with to improve upon so that it can even do things like allow us to better direct our questions that we ask for from our providers in order to get specific needs taken care of.

Carla Cox:

Yeah, I think that's really good advice. Okay, so we're winding down. We don't have a lot of time left. We still have our survey questions to ask. So, another question is, written in, "We all have habits that we would like to change, but it seems hard to make that change. What is the first step?" And I think you alluded to this earlier, but let's just confirm it. What would be the first step?

Leanna Ross:

Yeah, for me, the first steps are kind of twofold. One, assessing where we are with that habit that we're hoping to improve upon. And two, if you're already aware of that habit that you're wanting to work on, finding out what your reason why is. And so that way you have that grounded sense of value that you're relating developing these habits to. And so, I think those are my two big things. Another really important item to address is making sure that you're able to have a team of support people in your life that are there to continue to cheerlead you, support you, help you identify ways to come up with a solution when we don't quite meet our goals that we're setting out to achieve. And having that team of people around you are just shown across the board, across a multitude of lifestyle habits that that social support is really important for us to ensure our success.

Carla Cox:

Very true. Very true. So, this wraps up our last question for this session. And a few items before we close the day, but I think you really just did that which you captured what are the most important things to take home from today. Are there any things you'd like to add?

Leanna Ross:

Yeah, I guess just to reiterate a little bit from earlier is, one, making sure that we set SMART goals for ourselves. So as a reminder, our SMART acronyms stand for a specific and measurable, attainable, realistic, and timely goal. And that can help us to feel not quite so overwhelmed when we're looking at all of these changes that we might have to make in several lifestyle factors. But starting with one, making that smart goal, achieving that goal, and that helps us gain our confidence in knowing that we can achieve the next goals that we set for ourselves.

The next thing that I would also talk about is reminding you to be kind to ourselves. Just like words that we hear from others can be really powerful influences, the ones that we tell ourselves in our head are just as powerful. And so, you can try to maybe catch yourself if you're finding yourself doing this negative self-doubt and things that maybe like, "Oh, I can't do this, or I didn't do this." Well, let's frame it. "How can I do this better tomorrow?" There's always another chance to try again. And making sure that we're supporting ourselves just like we would want to do for a loved one with kind words.

And final reminder is that our journeys aren't going to be straight. There might be some imperfections along the way, but remember that progress is what we're after and not perfection. So, seek help if you need it. It's always okay to ask for help. And I hope that all of you have a wonderful team of people around you and more that you're able to incorporate as time goes by to help you achieve your goals. And for all of us, to live the healthiest life that we can.

Carla Cox:

Great. To help you feel confident about your ability to manage your diabetes and heart health and kidney disease, we encourage you and your loved ones to talk to your doctor and dietician about your risk for heart disease, stroke, and kidney disease. Go to knowdiabetesbyheart.org and learn more. Register for the next event at diabetes.org/experts and sign up for the diabetes education program near you. Links to these resources can be found on our registration webpage diabetes.org/experts.

Thank you for all of the great questions you've called and wrote in with. If you have questions about this event, you are welcome to contact us at askada@diabetes.org or by calling 1-800-DIABETES, which is 1-800-342-2383. Please stay on the line for our survey to help us with future planning for events. Thriving with diabetes takes an entire team, and we're here to support you. Special thanks to our expert, Dr. Ross. I'm Carla Cox. And on behalf of the ADA team, we want to thank you for joining us today and we look forward to connecting with you at our next events. Join us for more KDBH events on September 12, Healthy Eating When Juggling More than Diabetes. And October 10, Trouble Sleeping at Night? Lack of Sleep Can Impact Your Health. Please visit our website for more information at diabetes.org/experts and register today. If you have any questions about this event, please email askada@diabetes.org. Include Ask the Experts Q&A in your subject line. And thank you for joining ATE today.

And now let's go to our survey. Thank you for participating in the American Diabetes Association's Ask the Experts event. We hope you can stay online for the next five to seven minutes to share your honest and valuable feedback to help us improve upcoming events. All responses are confidential. Please let us know your level of agreement with these statements.

Question 1. "This event met my expectations today." For yes, press 1. For no, press 2. And for unsure, press 3. Once again, "This event met my expectations today." For yes, press 1. For no, press 2. And for unsure, press 3. If you feel you could use some support for managing or diabetes, check out the diabetes.org website. There are lots of links to information that can help you on your diabetes journey.

Okay, question number 2. "I will attend another Ask the Experts event." For yes, press 1. For no, press 2. For unsure, press 3. Again, question 2. "I will attend another Ask the Experts event." For yes, press 1. For no, press 2. And for unsure, press 3. You can find delicious and healthy recipes and menu. To enhance eating. Check out the website, www.diabetesfoodhub.org.

Okay. Knowledge test question. Question 3. "This event improves my knowledge of how to change bad habits." For yes, press 1. For no, press 2. And for unsure, press 3. Again, question number 3, "This event improves my knowledge of how to change bad habits." For yes, press 1. For no, press 2. And for unsure, press 3. Did you know there are approximately 37 million people with diabetes? You are certainly not alone.

Okay. Question number 4. "I intend to use the knowledge I gained in my loved one's next appointment with a healthcare professional." For yes, press 1. For no, press 2. And for unsure, press 3. Again, question number 4, "I intend to use the knowledge I gained in my loved one's next appointment with a healthcare professional." For yes, press 1. For no, press 2. And for unsure, press 3. Keep your glucose within target range of 70 to 180 milligrams per deciliter. 70% or more of the time is the international recommendation for diabetes management. Consider asking your provider about getting a continuous glucose monitor to help you monitor your glucose.

Question number 5. "Before this event, I felt confident talking to a healthcare professional about mine, my loved one's increased risk of heart disease and stroke." For yes, press 1. For no, press 2. And for unsure, press 3. Again, question 5. "Before this event, I felt confident talking to a healthcare professional about mine, my loved one's increased risk of heart disease and stroke." For yes, press 1. For two, press no. And for unsure, press 3. Check out the heart disease risk calculator at <https://www.cvriskcalculator.com> and discover if you are at risk for heart disease.

And our final question, question number 6. "After this event, I feel confident talking to a healthcare professional about mine, my loved one's increased risk of heart disease and stroke." For yes, press 1. For no, press 2. And for unsure, press 3. Once again, our last question, question 6. "After this event, I feel confident talking to a healthcare professional about mine, my loved one's increased risk of heart disease and stroke." For yes, press 1. For no, press 2. And for unsure, press 3.

We sincerely appreciate your time and look forward to engaging with you on a future Ask the Experts event. Please visit diabetes.org/experts to learn about more events. Thank you.