

NOVEMBER

This month, *Health is Primary* is focusing on diabetes and highlighting the role of primary care in preventing and managing chronic conditions. We are sharing the facts about the prevalence of chronic conditions in the United States and how primary care-integrated teams can provide better care, better outcomes at lower costs. **Join us and spread the word. #MakeHealthPrimary**

BE A CHAMPION

- **Distribute** patient information materials (tear sheet) on chronic conditions in your primary care practice. You can find these tear sheets on the bottom of the "act" tab in the red tool library.
- **Distribute** chronic condition tear sheets to employers in your community. Offer to have a member of your care team host a "brown bag" for employees to share chronic condition information.
- **Share** the facts about chronic conditions through social media. Post regularly on Twitter and Facebook using the facts listed here. Don't forget to follow the campaign (Facebook and Twitter: @HealthisPrimary). Retweet and share our posts!
- **Share** your stories about how you are innovating to fully integrate chronic condition management in your practice, community or state. Go to www.healthisprimary.org and click on the "stories" tab.



THE FACTS ABOUT DIABETES

- More than 30 million people in the United States have diabetes, and 1 in 4 of them don't know they have it. (CDC)
- More than 84 million US adults — over a third — have prediabetes, and 90 percent of them don't know they have it. (CDC)
- Diabetes is the 7th leading cause of death in the United States (and may be underreported). (CDC)
- Type 2 diabetes accounts for about 90 to 95 percent of all diagnosed cases of diabetes; Type 1 diabetes accounts for about 5 percent. (CDC)
- In the last 20 years, the number of adults diagnosed with diabetes has more than tripled as the American population has aged and become more overweight or obese. (CDC)

MORE FOR YOUR MONEY



NOVEMBER FOCUS: DIABETES

11 | 2018

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
10 2018 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	12 2018 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	30	31	1	2	3
4 ☉ DAYLIGHT SAVINGS TIME ENDS	5	6	7	8	9	10
11	12 VETERANS DAY	13	14	15	16	17
18	19	20	21	22 THANKSGIVING	23	24
25	26	27	28	29	30	1

DELIVERING COMPREHENSIVE, COORDINATED AND CONTINUOUS CARE



CONTINUITY OF CARE, WHICH IMPLIES THAT INDIVIDUALS USE THEIR PRIMARY SOURCE OF CARE OVER TIME FOR MOST OF THEIR HEALTH CARE NEEDS, IS ASSOCIATED WITH GREATER SATISFACTION, BETTER COMPLIANCE, AND LOWER HOSPITALIZATION AND EMERGENCY ROOM USE.¹



AT THE END OF LIFE, GREATER CONTINUITY WITH PRIMARY CARE IS GENERALLY ASSOCIATED WITH REDUCING AVOIDABLE HOSPITALIZATIONS,² LESS EMERGENCY DEPARTMENT USE³ AND INCREASED OUT-OF-HOSPITAL DEATHS FOR PATIENTS WITH A TERMINAL ILLNESS.⁴

¹ Starfield B, Shi L, MacInko J. Contribution of Primary Care to Health Systems and Health. *The Milbank Quarterly*. 2005;83(3):457-502. doi:10.1111/j.1468-0009.2005.00409.x

² Cheng SH, Chen CC, Hou YF. A longitudinal examination of continuity of care and avoidable hospitalization: evidence from a universal coverage health care system. *Arch Intern Med*. 2010;170(18):1671-1677. doi: 10.1001/archinternmed.2010.340.

³ Burge F, Lawson B, Johnston G. Family physician continuity of care and emergency department use in end-of-life cancer care. *Medical Care*. 2003;41(8):992-1001. doi: 10.1097/00005650-200308000-00012.

⁴ Burge F, Lawson B, Johnston G, Cummings I. Primary care continuity and location of death for those with cancer. *J Palliat Med*. 2003;6(6):911-918. doi: 10.1089/109662103322654794.



BROUGHT TO YOU BY AMERICA'S FAMILY PHYSICIANS

TAKE STEPS TO MANAGE YOUR DIABETES

Although diabetes can't be cured, you can still live a long and healthy life. The single most important thing you can do is control your blood sugar level. You can do this by eating right, exercising, maintaining a healthy weight and, if needed, taking oral medicines or insulin.

WHAT IS DIABETES?

Diabetes is a disease that occurs when a person's body doesn't make enough of the hormone insulin or can't use insulin properly. There are 2 types of diabetes. Type 1 diabetes occurs when your body's pancreas doesn't produce any insulin. Type 2 diabetes occurs when the pancreas either doesn't produce enough insulin or your body's cells ignore the insulin.

MOVING TOWARDS HEALTH—DIABETES AND EXERCISE

Exercise can help control your weight and lower your blood sugar level. It also lowers your risk of heart disease, a condition that is common in people who have diabetes.

What kind of exercise should I do?

Talk to your family doctor about what kind of exercise is right for you. The type of exercise you can do will mainly depend on whether you have any other health problems. Most doctors recommend aerobic exercise, which makes you breathe more deeply and makes your heart work harder. Examples of aerobic exercise include walking, jogging, aerobic dance or bicycling.

Are there any risks to exercising for people who have diabetes?

Yes, but the benefits far outweigh the risks. Regular exercise makes your body more sensitive to insulin, and your blood sugar level may (over)

KEEPING THE BALANCE—DIABETES AND NUTRITION

What you eat is closely connected to the amount of sugar in your blood. The right food choices will help you control your blood sugar level.



Do I have to follow a special diet?

There isn't one specific "diabetes diet." Your family doctor will probably suggest that you work with a registered dietitian to design a meal plan. A meal plan is a guide that tells you what kinds of food to eat at meals and for snacks. For most people who have diabetes (and those without, too), a healthy diet consists of 40% to 60% of calories from carbohydrates, 20% from protein and 30% or less from fat. It should be low in cholesterol, low in salt and low in added sugar. Choose a variety of fresh fruits, vegetables, whole grains, lean meats and fish.

Can I eat any sugar?

Yes. In recent years, doctors have learned that eating some sugar doesn't usually cause problems for most people who have diabetes—as long as it is part of a balanced diet. Just be careful about how much sugar you eat and try not to add sugar to foods.

get too low (called hypoglycemia) after exercising. You may need to check your blood sugar level before and after exercising. Your doctor can tell you what your blood sugar level should be before and after exercise.

Exercise checklist for people who have diabetes

- ✓ **Talk** to your family doctor about the right exercise for you.
- ✓ **Check** your blood sugar level before and after exercising.
- ✓ **Check** your feet for blisters or sores before and after exercising.
- ✓ **Wear** the proper shoes and socks.
- ✓ **Drink** plenty of fluid before, during and after exercising.
- ✓ **Warm up** before exercising and cool down afterward.
- ✓ **Have** a snack handy in case your blood sugar level drops too low.



HELPING A FAMILY MEMBER WHO HAS DIABETES

It isn't easy for people to hear that they have diabetes. Diabetes is a disease that cannot be cured. It has to be taken care of every day. There are ways to help your loved one who has diabetes.

How can I help my relative who has diabetes?

First, learn all you can about diabetes. The more you know, the more you can help. Encourage your relative to learn about diabetes, also. Second, be sympathetic. It can be scary at first for people to find out they have diabetes. Tell your relative that you understand how he or she feels. But don't let your relative use these feelings as an excuse for not taking care of his or her diabetes.

How can I help my relative make healthy changes?

If you eat meals together, eat the same foods your relative eats. Avoid buying foods he or she isn't supposed to eat. People who have diabetes should generally follow the same advice for healthy eating as everyone else: Eat foods that are low in fat, cholesterol, salt and added sugar. Encourage exercise. You might even want to exercise together.

What else can I do?

Learn how to recognize signs of problems. Learn the symptoms of a high blood sugar level (called hyperglycemia) and a low blood sugar level (called hypoglycemia). Understand that when your relative is very cranky or has a bad temper, his or her blood sugar level may be too high or too low. Rather than arguing, encourage your relative to check the blood sugar level and take steps to correct the problem.

REFERENCES

All information sourced from FamilyDoctor.org, a resource operated by the American Academy of Family Physicians (AAFP)

TOME MEDIDAS PARA CONTROLAR SU DIABETES

Si bien la diabetes no puede curarse, usted puede vivir una vida larga y saludable. Lo más importante que puede hacer es controlar su nivel de azúcar en la sangre. Puede hacerlo al comer correctamente, hacer ejercicio, mantener un peso saludable y, de ser necesario, tomar medicamentos por vía oral o insulina.

¿QUÉ ES LA DIABETES?

La diabetes es una enfermedad que sucede cuando el cuerpo de una persona no produce una cantidad suficiente de la hormona insulina o no puede utilizar la insulina adecuadamente. Existen dos tipos de diabetes. La diabetes tipo 1 sucede cuando su páncreas no produce insulina. La diabetes tipo 2 sucede cuando el páncreas no produce suficiente insulina o las células de su cuerpo ignoran la insulina.

MOVERSE HACIA LA SALUD—LA DIABETES Y EL EJERCICIO

El ejercicio puede ayudar a controlar su peso y reducir su nivel de azúcar en la sangre. También reduce su riesgo de enfermedad cardíaca, una afección que es común en personas con diabetes.

¿Qué tipo de ejercicio debo hacer?

Hable con su médico de familia sobre el tipo de ejercicio que es ideal para usted. El tipo de ejercicio que deberá hacer dependerá principalmente de si sufre otros problemas de salud. La mayoría de los médicos recomienda ejercicio aeróbico que lo haga respirar más profundamente y que haga que su corazón trabaje más duro. Algunos ejemplos de ejercicio aeróbico incluyen caminar, trotar, bailes aeróbicos o montar en bicicleta.

MANTENER EL EQUILIBRIO—LA DIABETES Y NUTRICIÓN

Lo que come está relacionado estrechamente con la cantidad de azúcar en su sangre. Las elecciones alimentarias correctas le ayudarán a controlar el nivel de azúcar en la sangre.



¿Debo seguir una dieta especial?

No existe una “dieta para la diabetes” específica. Su médico de familia probablemente le sugerirá que trabaje con un dietista certificado para diseñar un régimen de comidas. Un régimen de comidas es una guía que le indica qué tipos de alimentos comer a la hora de las comidas y como refrigerios. Para la mayoría de la gente con diabetes (y quienes no la tienen, también), una dieta saludable consiste en un 40 a 60 por ciento de calorías procedente de carbohidratos, 20 por ciento procedente de proteínas y 30 por ciento o menos procedente de grasas. La dieta debe ser baja en colesterol, baja en sales y baja en azúcar añadida. Elija una variedad de frutas y verduras frescas, granos enteros, carnes magras y pescado.

¿Puedo consumir azúcar?

Sí. En años recientes, los médicos han descubierto que comer algo de azúcar no suele provocar problemas a la mayoría de las personas que tienen diabetes, siempre y cuando sea parte de una dieta balanceada. Solo debe ser cuidadoso sobre la cantidad de azúcar que consume e intentar no añadir azúcar a los alimentos.

¿Hacer ejercicio representa algún riesgo para la gente con diabetes?

Sí, pero los beneficios superan por mucho a los riesgos. Hacer ejercicio regularmente hace que su cuerpo sea más sensible a la insulina y su nivel de azúcar en la sangre puede descender demasiado (llamado hipoglucemia) luego de hacer ejercicio. Es posible que deba revisar su nivel de azúcar en la sangre antes y después de hacer ejercicio. Su médico puede decirle cuál debe ser su nivel de azúcar en la sangre antes y después de hacer ejercicio.

Lista de verificación de ejercicio para gente con diabetes

- ✓ **Hable** con su médico de familia sobre el ejercicio ideal para usted.
- ✓ **Revise** su nivel de azúcar en la sangre antes de hacer ejercicio.
- ✓ **Revise** sus pies en busca de ampollas o úlceras antes y después de hacer ejercicio.
- ✓ **Utilice** el calzado y las calcetas adecuadas.
- ✓ **Beba** muchos líquidos antes, durante y después de hacer ejercicio.
- ✓ **Caliente** antes de hacer ejercicio y permita el enfriamiento después.
- ✓ **Tenga** un refrigerio a la mano en caso de que su nivel de azúcar en la sangre descienda demasiado.

AYUDAR A UN FAMILIAR QUE TIENE DIABETES

No es fácil para las personas escuchar que tienen diabetes. La diabetes es una enfermedad que no se puede curar. Es necesario darle atención todos los días. Siempre hay maneras de ayudar a un ser querido que tiene diabetes.

¿Cómo puedo ayudar a un familiar que tiene diabetes?

Primero, aprenda todo lo que pueda sobre la diabetes. Mientras más sepa, más podrá ayudar. Recomiende a su familiar aprender más sobre la diabetes también. Segundo, sea comprensivo. Las personas se pueden sentir atemorizadas inicialmente cuando se enteran de que tienen diabetes. Dígale a su familiar que entiende cómo se siente. Pero no deje que su familiar utilice estos sentimientos como excusas para no cuidar su diabetes.

¿Cómo puedo ayudar a mi familiar a realizar cambios saludables?

Si comen sus alimentos juntos, coma los mismos platillos que come su familiar. Evite comprar alimentos que él o ella no debe comer. La gente que tiene diabetes en general debe seguir los mismos consejos de alimentación saludable que cualquier otra persona: Coma alimentos bajos en grasas, colesterol, sal y azúcar añadida. Aliéntelo a hacer ejercicio. Incluso podrían hacerlo juntos.

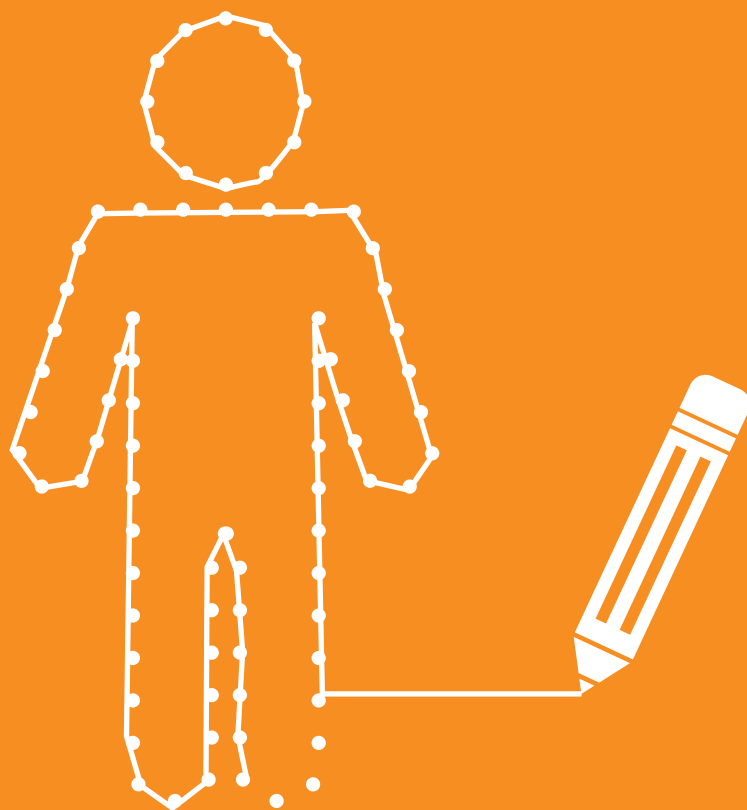
¿Qué más puedo hacer?

Aprenda cómo reconocer las señales de problemas. Conozca los síntomas de un nivel de azúcar en la sangre alto (llamado hiperglucemia) y un nivel de azúcar en la sangre bajo (llamado hipoglucemia). Comprenda que cuando su familiar está irritable o tiene mal humor, su nivel de azúcar en la sangre puede encontrarse muy elevado o muy bajo. En lugar de discutir, aliéntelo a que revise su nivel de azúcar en la sangre y corrija el problema.

REFERENCIAS

Toda la información se obtuvo de FamilyDoctor.org, un recurso operado por la American Academy of Family Physicians (AAFP)

DOTS CONNECTED



WHERE HEALTH IS PRIMARY.



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America's Family Physicians

A growing body of evidence shows that chronic medical conditions are best managed in a primary care setting. That's because patients with access to coordinated, comprehensive care have better outcomes.

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