

Warning: Diabetes can be a killer as it targets the heart

November 9 2015, by Leslie Mann, Chicago Tribune

His diabetes diagnosis in 1990 was a slap in the face for Robb Ensign, 47, who recalled that "it came out of nowhere; no one in my family had it." From Day 1, though, he decided "to control it instead of letting it control me."

Ensign, of St. Joseph, Mo., began by educating himself about diabetes, which makes him two to four times more likely to develop <u>heart disease</u>. In fact, heart disease is the No. 1 cause of death for people with Type 2 diabetes. Symptoms can be apparent, like angina (chest pain), or silent, like atherosclerosis (narrowing of the arteries).

Diabetes strikes one in 10 Americans, according to the U.S. Centers for Disease Control and Prevention. By 2050, the CDC projects, one in three Americans will have the disease.

Ensign has the most serious form of diabetes, Type 1, so he needs frequent insulin injections. (With Type 1, the pancreas fails to produce enough of the hormone insulin to regulate blood sugar. In Type 2, the body develops insulin resistance, especially because of excess weight and lack of exercise.)

"I have to leave a lot of meetings because it's time for a shot," said Ensign, vice president of a cleaning-products manufacturer. A Type 2 patient doesn't necessarily need insulin. A minority of diabetes victims develop Type 1.5, which has characteristics of Types 1 and 2.



When people are diagnosed with diabetes, "ABC" becomes the acronym they live by. Otherwise, they increase their odds of having heart disease and other <u>diabetes complications</u>, such as vision loss and neuropathy.

"A" is the average glucose level over the last three months, measured by the A1C test. If it's higher than 7 percent, the heart can suffer damage.

"B" stands for blood pressure, which should be 130/80 or lower. If it's too high, the heart has to work harder to pump blood, and the person is more likely to have a heart attack.

If diet and exercise alone do not lower blood pressure, a doctor may prescribe medication.

"C" is for cholesterol. Unchecked, diabetes makes "bad cholesterol," or low-density lipoprotein (LDL), too high. This jeopardizes the heart by clogging arteries with plaque. If a clot forms, a person could have a heart attack or stroke. The goal is to keep LDL under 100 mg/dl.

If diet changes do not lower cholesterol to safe levels, a person may have to take medicine such as Lipitor.

Diabetes complicates Ensign's life, but managing it is his priority.

"I check my glucose 10 to 15 times a day," he said. "I give myself insulin shots five to seven times a day." Because obesity would endanger his heart, he keeps his weight down.

"Even moderate exercise, such as gardening, makes a difference," said Dr. Robert Eckel, professor of medicine at the University of Colorado and spokesman for the American Heart Association. "Exercise can delay the onset of Type 2 diabetes or even prevent it. But, too often, people are sedentary. There's a lot of sittin' going on!"



Doctors urge smokers to kick the habit, whether or not they have diabetes, because smoking taxes the heart.

To help plan a diet, diabetes sufferers should see a registered dietitian who has "certified diabetes educator" credentials. Also, see an endocrinologist, Eckel added, for an individualized plan, because every patient's circumstances are different.

Meals for diabetics should include more fiber and fewer fats, salt, sugar and processed foods. Most of all, diabetes turns a person into a carb counter because carbohydrates greatly affect the disease.

At one time, diabetics went nowhere without their log books, where they recorded their glucose, <u>blood pressure</u> and LDL levels, meals and exercise. Now they can do this electronically.

Jon Meyer, 49, an Arlington, Tex., IT consultant, credits www.retrofitme.com with helping him control his Type 2 diabetes. Since enrolling, he has lost 40 pounds and reduced his needs for insulin and cholesterol-lowering meds.

Through twice-monthly video consultations with Retrofit's physiologist, behavioral coach and dietitian, Meyer learned to keep heart disease at bay by altering his exercise, lifestyle and diet.

A Retrofit-provided scale transmits Meyer's weight electronically to his advisers, while he uses his cellphone to relay his food choices.

"I haven't changed what I eat as much as how much I eat," Meyer said.
"Now I eat half of a restaurant meal and take home the other half for lunch the next day." Meyer can still indulge in his favorite foods - chocolate cake and milkshakes - as long as he has small amounts.



"It's well worth it," said Meyer of Retrofit, which was partially subsidized by his employer. (Individual enrollment costs \$248 a month.) Retrofit also provides online classes and a patient-support group.

Monica Loewi, 77, a retiree from Vancouver, British Columbia, uses an online <u>diabetes-management</u> system called Glooko, which costs \$59.95 for a year's subscription. She consults the Glooko app about sodium, fat and carb content of foods. Like Meyer, she enters her daily data onto her account.

"My endocrinologist loves it because it shows him everything in one place online," Loewi said.

"My father had heart disease, so I didn't want my diabetes to lead to heart problems, too," said Loewi, who manages her Type 1.5 diabetes by eating meals regularly, measuring her glucose every few hours and being religious about her walking and stretching routines.

Loewi and Meyer both use Fitbit activity trackers, which measure steps taken, then transmit this information to their online accounts.

"I always walk for at least an hour before or after work, but wearing the Fitbit reminds me to walk during the day, too," Meyer said. "I'm walking while I'm talking to you now."

Beyond diet and exercise, "new diabetes drugs are promising," Eckel said. "And metabolic (weight-loss) surgery has evolved, so we're more often looking at it as a way to stop the obesity/diabetes/heart disease cycle." But most patients can protect their hearts, he said, by viewing diabetes management as their new part-time job.

"Taking care of my health wasn't even on my top 50 list of things to do before," Meyer said. "Now it's in the top five, along with my family,



faith, work and my volunteer responsibilities."

Don't be shy about bringing in the pros to help, Meyer tells other patients. "We hire people to advise us about other matters, like investing our money," he said. "Why shouldn't we hire people to help us be healthy, too?"

You can resign yourself to die young, Ensign said, or weave diabetes management into your routine. "One man I met through a <u>diabetes</u> fundraiser said, 'I'm going to die anyway,'" he said. "But it doesn't have to be that way. Follow the rules, and you can prolong your life."

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Citation: Warning: Diabetes can be a killer as it targets the heart (2015, November 9) retrieved 20 March 2024 from https://medicalxpress.com/news/2015-11-diabetes-killer-heart.html

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