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BLOGS ARTS SHOPPING HOMES WEDDINGS EVENTS NEWSLETTERS GIVING & GALAS

## Diabetes: Sarasota Experts Share What You Need to Know

By: Su Byron

Too much blood sugar isn't that sweet. But you can fight back.



A quiet epidemic is stalking our nation. It's called diabetes. Today, 26 million Americans suffer from it. That's more people than live in Australia.

To Dr. Jesus B. Perez, a board-certified endocrinologist at Sarasota's Intercoastal Medical Group and assistant clinical professor at Florida State University's College of Medicine, this is more than an unpleasant statistic.

According to Perez, 26 million people are only the beginning. "By 2020, the Center for Disease control estimates that 50 million people will have it. That's more than the population of Germany."

Now that we've scared you with statistics, let's define our terms.

### **Know Your Enemy**

What is diabetes? Essentially, it's a metabolic disease in which the body either can't produce insulin—or can't produce enough. Basically, it's a pancreas problem. A healthy pancreas functions like a homeostatic computer that monitors and regulates blood sugar. When there's too much, it secretes insulin; when there's too little, it squirts out glucagon.

Normally, it works like a charm. When it doesn't, the result is an excessively high level of blood sugar, also known as glucose, which can lead to damage of the blood vessels, nerves, heart, kidneys and eyes.

It's a chronic disease—meaning it lasts a lifetime.

According to Perez, diabetes generally comes in two forms. In Type 1 diabetes, the immune system destroys the insulin-producing beta cells in the pancreas. Considered an autoimmune disease, Type 1 diabetes usually emerges in children and teenagers, although adults aren't immune. The cause is probably genetic, although scientists haven't ruled out viruses and other environmental factors. There's no cure—yet. People with Type 1 diabetes must be treated with artificial insulin injections.

Type 2 diabetes usually emerges in adulthood. Here, the pancreas still produces insulin, but not reliably and not enough. This form of diabetes doesn't always require insulin injections, but it does demand lifestyle intervention, close observation and treatment.

Type 2 diabetes is most often linked to unhealthy lifestyle and obesity. In fact, most patients with Type 2 diabetes are overweight or obese. To return to the computer analogy, if you flood your system with carbohydrates and sugars, there's a good chance you'll overload the pancreas and fry its hard drive.

Fifty years ago, Type 2 diabetes mostly affected adults. Today, it's becoming alarmingly prevalent in children and adolescents, especially among such ethnic minorities as African Americans, Hispanic Americans and Native Americans.

Although the percentage of the population with Type 1 diabetes has remained constant, the rate for Type 2 diabetes is skyrocketing.

What's going on here?

According to Perez, the fault is not in our cells but in ourselves. He points out that, although genetic risk factors for diabetes remain relatively constant, the risk factors reflecting human behavior don't. These factors include a sedentary lifestyle and a diet that's high in sugars and fats and low in fiber—a bad diet, and too often known as the American diet. When millions of Americans don't exercise and eat poorly, a national epidemic is born.

The good news is, you don't have to be part of it.

### **Fighting Back**

An endocrinologist at Intercoastal Medical Group, Dr. Wende Kozlow says more than 65 million Americans have pre-diabetes. As the name implies, this is the stage before the full onslaught of Type 2 diabetes develops. If you're in this category, your blood glucose count is above normal, but below the level for a diabetes diagnosis. But you're still at risk for heart disease, stroke and the onset of Type 2 diabetes.

OK, that's not a happy thought. But here's the good news:

Kozlow notes that people with a pre-diabetic condition have a chance to turn it around with three simple steps.

"It's the famous trinity of healthy behavior we often hear and seldom heed," she says. "Eat healthy foods and cut down on sugars and carbohydrates. Get regular exercise. And bring your weight to a healthy level."

Most pre-diabetics who stay faithful to this plan can get their glucose levels out of the danger zone, says Kozlow. And people with Type 2 diabetes can often manage their disease with the same lifestyle changes.

"People often feel defeated after a diagnosis of diabetes. You shouldn't. You've got a host of options to improve your condition," she says. The most important option? Get educated. "Nutrition is key," she says. "The more informed you are, the better you can manage your condition."

A healthy diet includes an abundance of whole grains, vegetables, fruit, lean meats, fish, chicken and beans. Choose foods rich in vitamins, fiber and minerals over processed foods. Keep the fats and sweets at a minimum.

"These are only broad outlines," Kozlow adds. "Healthy diets are never one-size-fits-all. It always depends on the individual. But whatever the diet, common sense is the main ingredient—and maintaining healthy blood sugar levels is always the goal." Kozlow also advises scheduling regular meal times to keep blood sugar levels on an even keel and using online tools and apps that analyze and help manage glycemic indexes and

carbohydrate counts.

Exercise is another important weapon. It reduces blood pressure, boosts mood, burns sugar, keeps blood circulating to the extremities and, as an added bonus, jump-starts insulin sensitivity at a cellular level. "The best exercise is the one you enjoy doing," says Kozlow. "Pick a workout plan you enjoy and do it."

Ultimately, a healthy lifestyle is a good insurance plan. But regular testing for diabetes is the best insurance of all. Diabetes isn't always obvious.

"The symptoms of diabetes include fatigue, excess urination, unexplained weight loss, increased thirst and blurred vision," says Perez. "But even if you don't have those symptoms, that doesn't mean you're in the clear. Diabetes can be asymptomatic—which means you could have it and not know it. If you have Type 2 diabetes, you definitely need to start a course of treatment. You need to be screened and find out. You and your doctor need to know where you stand."

Who should be tested for diabetes? The American Diabetes Association's list includes anyone with a body mass index higher than 25, regardless of age. It also includes people with such additional risk factors as high blood pressure, a sedentary lifestyle, a history of heart disease, high cholesterol levels, women who have delivered a baby weighing more than nine pounds, and anyone with a close relative with diabetes. On top of that, anyone older than 45 should also have a fasting blood glucose level and/or a non-fasting hemoglobin A1c (glycated hemoglobin) test.

Diabetes is a progressive disease. Left untreated, it always gets worse. Pre-diabetes, if untreated, turns into Type 2 diabetes. People with Type 2 diabetes, if left untreated, might eventually become insulin dependent. But it's not just about controlling blood sugar. "It's also about controlling the secondary complications that diabetes can create," says Kozlow.

Those complications are a smorgasbord of diseases, including heart and blood vessel disease, nerve, kidney and eye damage, osteoporosis—even Alzheimer's disease.

Perez notes that, thanks to a better understanding of the cause of diabetes, we are not only able to control the secondary risk factors but to treat this disease better than ever. "We have a full arsenal of medications to safely bring blood sugar levels closer to healthy levels," he says.

Some medications stimulate the pancreas to produce more insulin; some decrease glucose absorption at the intestines and at the kidneys, which in turn lowers glucose levels in the blood; and other medications improve the sensitivity of fat cells and muscles to insulin. In addition, insulin can be administered to replace the lack of insulin production by the pancreas. Perez adds that a combination of medications is often needed to effectively control blood sugar.

The course of treatment for diabetes can get complicated. But ignoring the condition can get deadly. Don't.

First, find out what your numbers are. If you're pre-diabetic, make the lifestyle changes you need to turn it around. If you're in the Type 2 category, make the same lifestyle changes and work with your doctor to get on a course of treatment. Get regular testing and glucose monitoring.

"The weapons are there," says Kozlow. "Work with your doctor and fight back. Get in the fight—and stay in the fight. Don't blame yourself or feel like you've failed if you need medication or insulin to control the disease process. If you want to win, it's up to you."

*Resources: Gulf Coast Diabetes Association: 2100 Constitution Blvd., (941) 957-5099 [gulfcoastdiabetesfoundation.org](http://gulfcoastdiabetesfoundation.org); Sarasota Memorial Hospital Diabetes Treatment Service: 700 S. Tamiami Trail, (941) 917-7468 or (941) 917-7777*



## GoCARB

An app for smartphones automatically calculates the carbohydrate content of a meal. The program, called "GoCARB," enables diabetics to better plan their meals and to control their blood glucose more easily.



## Risk Busters

**Move it!** Regular exercise lowers your risk of diabetes.

**Lose it!** If you're overweight, lose weight. As a rule of thumb, a healthy body mass index ranges from 18.5 to 24.9. Think of that as a target weight. Even a 5 percent weight loss cuts your diabetes risk by 50 percent.

**Get Tested:** A blood screening lets you know where you stand. Don't put

it off, especially if you have any risk factors.

**Eat Healthy:** Think low-fat, low-carb. Whole grains and fruits and veggies are your friends. Processed foods aren't.

**Kill your TV:** The plug-in-drug puts you at risk. The more you sit and watch, the more at risk you are. Keep it down to two hours a day. Or install an exercise bike in your TV room.

**Speak Up:** Talk to your doctor.

**Listen:** Take your doctor's advice.

Take a quick test to see what your risk is. [diabetes.org/are-you-at-risk/diabetes-risk-test](http://diabetes.org/are-you-at-risk/diabetes-risk-test)

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