

How to treat low blood sugar?

- Check your blood sugar to see if it is below 70 mg/dl
- Eat or drink something with sugar in it i.e. items that provide 10 to 15 grams of simple carbohydrates. This is the amount of carbohydrate needed to help bring your blood sugar level back up when it gets too low
- Wait about 15 minutes, then check your blood sugar
- If your blood sugar is still too low (or if you don't feel better), eat another 10-15 gram serving of carbohydrate and test again after 15 minutes
- Once your blood sugar begins to return to normal, eat an extra snack. Your snack should include a carbohydrate and a protein (like cheese and crackers or milk)

Foods and drinks with 10 to 15 grams of simple carbohydrates:

- ½ - ¾ cup of fruit juice
- ½ - ¾ cup of soda pop with sugar in it
- 2-3 sugar cubes
- 2-3 glucose tablets
- 2-3 tsp of sugar
- 1 tablespoon of honey

Chronic complications

- **Brain:** The blood flow in the vessels that nourishes the brain can be restricted by deposition of fat and cholesterol. This lack of blood flow to the brain can cause a stroke, paralysis etc
- **Eyes:** Diabetic patients suffer from loss of vision, cataract and glaucoma more often than a nondiabetic person
- **Legs and feet:** Damage to blood vessels in the legs and feet can lead to poor circulation, pain while walking or running, nonhealing ulcer and amputation.
- **Heart:** Diabetic patients suffer from angina (chest pain) and heart attacks, more often than non diabetics.
- **Kidney:** Diabetes can affect various areas of the kidney, leading to leakage of proteins in urine and also altered renal function, with rise in blood urea and serum creatinine.
- **Nerves:** In Diabetes nerves are affected leading to a wide range of problems like numbness, hypersensitivity and pain.

How can one control diabetes?

There are 5 pillars in the optimal control of blood glucose:

- Medication
- Diet
- Exercise
- Monitoring
- Education

How VLCC experts can help you manage your condition?

Well balanced nutritious diet remains a fundamental element of therapy. At VLCC the main goal is to control diabetes especially in type 2 obese cases, by scientific means. This is achieved by close supervision & education of obese patients.

All clients who join VLCC go through a zero session. Here the clients' detailed medical history, lifestyle, past medical & family history are noted. A detailed medical examination is then performed. Following this a Body Composition Analysis (BCA), Body Mass Index (BMI) & waist hip ratio are noted. According to the above parameters medical nutrition therapy is suggested. An individually tailored dietary prescription based upon metabolic, nutritional & lifestyle requirement is made for every client. An exercise programme as per individual's lifestyle is important to expend energy. This is achieved by both passive & active exercise. This is monitored by our physiotherapists, fitness experts & counselors. Exercise increases the effectiveness of insulin & moderate exercise is an excellent means of improving utilization of fat & carbohydrate in diabetic patients.



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What is diabetes?

Diabetes mellitus is a chronic disorder recognized by high blood sugar. It occurs either because of lack of insulin or because of the presence of factors that oppose the action of insulin.

What are the types of diabetes?

Type I diabetes: A disorder in which the body makes little or no insulin at all because of β -cell destruction. It often begins in the first or second decade of life, but may also occur in older adults. Hence, they need regular insulin shots for their treatment.

Type II diabetes: The most prevalent form of diabetes comprising 90.6% of all diabetics. The body makes less insulin or the cells are unresponsive to insulin. The body may have enough insulin and still the insulin response is ineffective because of the blockage of insulin receptors, also termed as insulin resistance. Overproduction of insulin initially exhausts the β -cells production of insulin, consequently leading to less insulin production thereby causing diabetes.

Gestational diabetes: Refers to the diabetes developing during pregnancy. It is important to diagnose and treat gestational diabetes because it severely affects the foetus. Gestational diabetes signals that a person has a higher chance of developing permanent diabetes later particularly if the individual is overweight/obese.

What are the symptoms of diabetes?

- Always tired
- Frequent urination
- Unexplained weight loss
- Always hungry (especially after eating)
- Numbness or tingling of feet
- Blurred vision
- Wounds that don't heal

While many patients with Type II diabetes present with increased urination & thirst, many others have a slow onset of hyperglycemia (high blood sugar) & do not have symptoms initially. This is particularly true in obese patients, whose diabetes may be

detected only after sugar is detected in urine or high blood sugar. Occasionally patients may present with evidence of neurological or cardiovascular complications because of disease present for some time. Most common being pain, numbness & weakness in extremities (more in legs), angina & strokes. Chronic skin infections are also common. Diabetes should always be suspected in those who have delivered large babies (more than 4 kg) pre-eclampsia or unexplained fetal losses. Eye & kidney problems arise frequently & should be dealt aggressively.

Who are at higher risk for diabetes?

Diabetes is more common in people who-

- Are overweight (If a person has body weight classified as overweight and if the waist to hip ratio is more than 0.9 in case of men and more than 0.8 in women, he/she is classified as centrally obese)
- Have a family member with history of diabetes
- Have had high sugar during pregnancy (GDM)
- Have had a baby weighing over 4 kgs
- Are over 40 years of age
- Have sedentary life style
- Have been alcoholic
- History of choric pancreatitis, fatty liver and high triglycerides

Did you know?

- At least 50% of all people with diabetes are unaware of their condition. In some countries this figure may reach 80%
- An increase in BMI by 1 can increase your chances of getting diabetes by upto 20 times
- Upto 80% of Type II diabetes is preventable by adopting a healthy diet and increasing physical activity
- Obesity can lead to gestational diabetes (Pregnancy). This increases the risk for a primary caesarian and pre term birth in all women, so lose weight now
- Obesity and Insulin resistance are reversible, but unchecked weight gain will lead to Type II Diabetes mellitus which is irreversible

What is the normal range of blood glucose control?

- Fasting Sugar: 70-110 mg/100ml of blood
- P.P sugar: 110-140 mg/100ml

What are the complications of diabetes?

Hyperglycemia: - High blood glucose, known as hyperglycemia, is one of the characteristic feature of diabetes. It can lead to acute life threatening condition like diabetic ketoacidosis (commonly known as DKA) in which the blood glucose level rises and ketones in the urine are positive resulting in coma etc.

Hypoglycemia: - It occurs when the glucose level is low in the blood (50-65mg/dl). It results from excess insulin in the body. The common causes are

- Missing and delaying a meal
- Exercising longer or more strenuously than usual
- Not adjusting insulin to accommodate changes in blood glucose level

The signs of low blood sugar may be:

- Fast heartbeat
- Sweating
- Shaking
- Headache
- Chills and cold sweat
- Hunger
- Vision problems
- Feeling sick to your stomach
- Feeling cranky, low or like crying
- Feeling dizzy or lightheaded
- Feeling nervous or anxious
- Feeling weak or tired
- Tingling or a numbness of your lips or tongue