



E-Book

Pre-Diabetes: Your Second Chance at Health

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PRE-DIABETES: YOUR SECOND CHANCE AT HEALTH

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CHAPTER ONE

Welcome to Pre-Diabetes: Your Second Chance at Health. My name is Gretchen Scalpi and I am a Registered Dietician (RD), a Certified Diabetes Educator (CDE) and I'm a nutrition and wellness coach. I have a private nutrition and wellness practice, and most of the people that I work with have pre-diabetes or diabetes. My goal with this e-book is to provide you with information that can help you manage or reverse your pre-diabetes.

The information covered in this e-book will include general information about pre-diabetes, such as symptoms and risk factors. You will learn how pre-diabetes is diagnosed, tips on managing pre-diabetes, how to start a weight loss plan, what to do about exercise, what you can eat, organizing your kitchen and pantry, how to manage dining out and much, much more. At the end of the e-book I will walk you through creating a weekly action plan to put everything in place. Along the way you'll receive helpful tips and links to resources.

Let's get started. What exactly is pre-diabetes? The definition of pre-diabetes is the state between what is considered normal blood sugar and type 2 diabetes. In earlier times, physicians used to refer to pre-diabetes as "you have a touch of sugar," "you have borderline diabetes," or "there's a little sugar in your blood." We don't use these terms anymore. Researchers and physicians have defined exactly what pre-diabetes means.

If you are diagnosed with pre-diabetes, your fasting blood sugar is somewhere between 100 and 125 milligrams per deciliter. Fasting blood sugar is when you have not had anything to eat for a period of ten to twelve hours. You might get up in the morning and before you have breakfast, you go to a lab and they draw some blood. That would constitute a fasting blood sugar.

Your physician may also make the determination that you have pre-diabetes based on a random glucose test taken as a finger stick in his or her office during the middle of the day, after you've eaten a meal. If the glucose measures between 140 to 190 milligrams per deciliter, that would also put you into the realm of pre-diabetes. If you have gotten readings like that, the readings should be repeated a second time to see if the result is still the same. So, one time is probably not going to give you a firm diagnosis of pre-diabetes. If it happens a second time where your fasting reading is above 100 milligrams per deciliter, that would be a good confirmation that you have pre-diabetes.

What makes pre-diabetes different from type 2 diabetes? First, you must realize when you get this diagnosis; it means that you may very well be on your way to developing type 2 diabetes. You're not there yet because you're at an in-between stage, but without treatment you may develop type 2 diabetes. The good news—if there is good news in getting a pre-diabetes diagnosis—is that it can be potentially reversible. So many people are really devastated to get this diagnosis, but it can be a blessing in disguise because it's telling you, "Hey, I need to act; I need to do something to make this situation better." If you take action at a reasonably early stage in the pre-diabetes, it is potentially reversible. That's different from type 2 diabetes.

Once you have crossed that threshold and you actually have full-blown type 2 diabetes it is not reversible. Some people erroneously think that their type 2 diabetes has gone away when they have some lab work done and it shows that the blood sugar is now much closer to a normal range. They may interpret that to mean that the diabetes has actually gone away. That isn't what it means. If blood sugar levels are lower in somebody with type 2 diabetes, or even if they're near the normal range, it means that their type 2 diabetes is being well-controlled. So once you have type 2 diabetes, you have it.

What are risk factors you have to keep in mind? A person who's aged 45 or older has a higher risk for pre-diabetes than the younger person. Anyone with a family history of type 2 diabetes has an increased risk for developing it. Being overweight or obese is an increased risk factor for both pre-diabetes and type 2 diabetes. A person who's very inactive and has a sedentary lifestyle has an increased risk. A woman who's had a history of gestational diabetes where she had a form of diabetes during one or all of her pregnancies is at increased risk. A woman with polycystic ovarian syndrome (PCOS) also has increased risk for either pre-diabetes or type 2.

Another risk factor that many people don't ever consider is inadequate sleep. Someone who is consistently getting 5.5 hours or less sleep on a regular basis has an increased risk factor for diabetes. Many people who have very busy lifestyles tend to view their sleep as a somewhat disposable commodity. Unfortunately, sleep is not something that we should minimize in order to get other things done. The average adult needs six, seven or even eight hours of sleep per night. When we don't get enough sleep that increases different stress hormones in the body which may predispose us to pre-diabetes or type 2 diabetes.

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