



ODPCP

OHIO DIABETES PREVENTION & CONTROL PROGRAM
BUREAU OF HEALTH PROMOTION & RISK REDUCTION

Governor's Appalachian Diabetes Initiative Kick-off Event Held in Chillicothe



Governor Bob Taft with ODPCP Director Thomas Joyce and ODH Director J. Nick Baird, M.D. (More pictures in center section)

"Too many people in Ohio's Appalachian counties are developing type 2 diabetes," Taft said. "And too many people, including many who don't even know they have diabetes, are not receiving the tools and information they need to control the disease."

Citing statistics that show a growing number of Appalachian Ohioans are contracting diabetes, Governor Bob Taft unveiled a new effort (a collaboration between the Ohio Diabetes Prevention and Control Program [ODPCP] and Healthy Ohioans) to prevent, and manage the disease. Taft announced the Appalachian Diabetes Initiative at Family HealthCare, Inc. 1049 Western Ave., Chillicothe on Dec. 7, 2005.

Appalachian counties report the highest poverty rates in the state and studies show that people with lower levels of income and education are stricken with diabetes at much higher rates.

According to the Ohio Department of Health (ODH), approximately 110,000 Ohioans in Appalachian counties have been

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Fat FACTS

Research indicates persons with diabetes are two-four times more likely to develop heart disease than persons without diabetes. One way to reduce the risk of heart disease is to consume the appropriate types and amounts of fats and oils.

Fats occur naturally in many foods and play an important role in nutrition. Fats and oils provide a concentrated source of energy for the body. Fats are used to store energy in the body, insulate body tissues, add to a feeling of satiety and transport fat-soluble vitamins (A, D, E and K) through the blood. They also play an important role in food preparation by enhancing flavor, adding mouth-feel, making baked products tender and conducting heat during cooking.



Fats and oils are made of basic units called fatty acids. Each type of fat or oil is a mixture of different fatty acids:

- ★ **Saturated Fatty Acids** are found chiefly in animal sources

such as meat and poultry, whole or reduced-fat milk and butter. Some vegetable oils such as coconut, palm kernel and palm oil are saturated. Saturated fats are usually solid at room temperature.

- ★ **Monounsaturated Fatty Acids** are found mainly in vegetable oils such as canola, olive and peanut. They are liquid at room temperature.

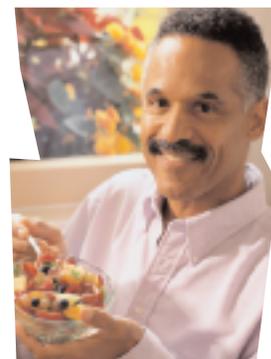
- ★ **Polyunsaturated Fatty Acids** are found mainly in vegetable oils such as safflower, sunflower, corn, flaxseed and canola. Polyunsaturated fats are also the main fats found in seafood. They are liquid or soft at room temperature. Specific polyunsaturated fatty acids, such as linoleic acid and alpha-linoleic acid, are called essential fatty acids. They are necessary for cell structure and hormone production. Essential fatty acids must be obtained through the food we consume.

- ★ **Trans Fatty Acids** are formed when vegetable oils are processed into margarine or shortening." Other sources of trans fats in the diet include snack foods and baked goods made with "partially hydrogenated vegetable oil" or "vegetable shortening." Trans fatty acids also occur naturally in some animal products such as dairy products.

Blood (serum) cholesterol and dietary cholesterol are two different types of cholesterol. Dietary cholesterol is found in food of animal origin such as egg yolks, organ meats and full-fat dairy

products. Blood cholesterol is a waxy substance that occurs naturally in our bodies.

It is used to make estrogen, testosterone and bile. If the level of cholesterol in the blood is too high, cholesterol and other fats can stick to the artery walls. Because blood cholesterol is waxy and cannot dissolve in water, it is carried through the blood in packages called lipoproteins. High density lipoproteins (HDL) are "good packages" for cholesterol and low density lipoproteins (LDL) are "bad packages" for cholesterol. HDL cholesterol gathers up excess cholesterol in the blood and carries it to the liver. The liver reprocesses or excretes the excess cholesterol. HDL may also help remove some of the cholesterol deposited on the artery walls.



Excess LDL cholesterol can increase the risk of heart disease because it is LDL cholesterol that builds up on the artery walls. The type of fats and oils consumed helps control LDL levels.

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Research says:

- * Eating too many foods high in saturated fat may increase blood levels of LDL and total cholesterol. High blood levels of LDL and total cholesterol are risk factors for heart disease.
- * Eating foods high in monounsaturated fatty acids may help lower LDL cholesterol levels and decrease the risk of heart disease.
- * Trans fatty acids act like saturated fats and raise LDL cholesterol levels. They may also lower HDL cholesterol in the blood.

The guidelines for fat intake are well known: consume **no more than** 30 percent of total calories from fat. The 30 percent guideline means:

- * Seven-10 percent of total calories from saturated fats.
- * About 10-15 percent of total calories from monounsaturated fats.
- * About 10 percent from polyunsaturated fat.

Cholesterol consumption should be limited to 300 mg. each day.

Women and Heart Disease

Did you know that most women list their greatest medical fear as breast cancer? Yes, it's true. The scary fact however, is that more women die from heart disease than from ALL cancers combined. As a matter of fact; a half million women die each year from heart disease. That's nearly one in two women. Women with diabetes are as much as 10 times more likely to have heart disease than women who do not have diabetes.

Surprised? Wait, there's more. A woman's heart attack signs are also often very different than a man's. Women can experience the powerful chest pain that men do, but many never experience chest pain at all. Rather, pain in the shoulder or jaw may occur, which many women brush off as normal aches and pains. While many women having heart attacks never experience chest pain, most doctors consider chest pain to be the most important heart attack symptom, regardless of gender.

A recent study by the National Institutes of Health found women often experience symptoms as much as a month or more before their heart attack. The most common of these symptoms were unusual fatigue, sleep disturbances and shortness of breath.

Here are some typical symptoms prior to and during an attack. Please remember these are just some of the symptoms; one or

more may be present or you may experience no warning at all. Take these symptoms very seriously-call 911 and get to a hospital immediately. A woman's chance of survival increases dramatically when medical intervention is received early.



Prior to a heart attack:

- Burning sensation in chest, often mistaken for heartburn
- Unusual feeling or mild discomfort in your back or chest
- Unusual fatigue, weakness, body ache and overall feeling of illness
- Sleep disturbance
- Shortness of breath
- Indigestion

Anxiety

During a heart attack:

- Chest pain
- Shortness of breath
- Weakness
- Unusual fatigue
- Cold sweat
- Dizziness
- Nausea vomiting
- Pounding or racing heart
- Pain in shoulder, back, arm or jaw



Governor's Appalachian Diabetes Initiative Kick-off Event Held in Chillicothe *continued...*

diagnosed with diabetes and an additional 30,000 remain undiagnosed.

Taft said the funding for the program will come from three grants, totaling almost \$500,000. The three Appalachian initiative recipients include:

1. The Appalachian Rural Health Institute at Ohio University.

The funds will be used to develop a diabetes care and outreach safety network in the following 11 Appalachian counties: Athens, Hocking, Jackson, Meigs, Morgan, Perry, Pike, Scioto, Vinton, Ross and Washington.

2. Five Federally Qualified Health Centers (FQHCs) will receive funding to provide diabetes education, equipment and supplies to help persons with diabetes self manage their disease. The self management tool kit- distribution project

includes a glucometer to test blood sugar, testing strips, lancets, a lancing device, alcohol wipes, a "Take Charge of Your Diabetes" educational manual and a pedometer to encourage physical activity.

The FQHCs participating in the distribution project are:

- Family HealthCare, Inc. (Ross County).
- Community Action Agency of Columbiana County Health Centers.
- Community Action Committee of Pike County-Family Health Centers.
- Community Action Organization Family Medical Centers of Ironton and Lawrence County.
- Ohio Hills Health Services (Belmont County).

3. The Ohio State University will conduct the Get Active program to teach high school students in selected Appalachian communities the skills necessary to develop and maintain an active exercise program.



Other speakers for the event included Thomas Joyce (director, ODPCP), Dr. J. Nick Baird (director, ODH), Anne Pope (Appalachian Regional Commission Federal Co-chair) and Al Travis (person with diabetes).

The ODPCP would like to thank Mark Bridenbaugh and the staff of Family HealthCare, Inc. for hosting this important event.





Diabetes Initiative Helps Ohioans



Al Travis-Chillicothe resident with diabetes



Al Travis, a Chillicothe resident and a person with diabetes spoke at Governor Bob Taft's Appalachian Diabetes Initiative kick-off event in early December. Al told the audience, "I've been around diabetes all my life." The disease has left him with glaucoma in one eye, past kidney infections, a sister who lost a limb and a brother who lost his life from diabetes complications.

"It's a very devastating disease," said Travis, who was diagnosed five years ago. "I want to lose weight and get off of this medication. I don't like it and I'm tired of not feeling good." He also stated that "education for younger people is important and when people know the symptoms and know what to do, it'll be better for them.

"It's a step in the right direction," Travis said.



Pneumonia Shots

People with diabetes are about three times more likely to die of flu and pneumonia than those who do not have the disease. Yet only one-third of them ever get a simple and safe pneumonia shot. A pneumonia shot is recommended for anyone aged 2 or older who, because of chronic health problems (such as diabetes) or age, has a greater chance of getting and dying of pneumonia. A pneumonia shot can also protect those at risk from other infections caused by the same bacteria. Consider the risks everyone faces:

- One out of 20 adults who get pneumonia (a lung infection) will die.
- Two out of 10 adults who get infections of the blood (bacteremia) will die.
- Three out of 10 adults who get an infection of the covering of the brain (meningitis) will die

About 40,000 people die each year because of these bacterial infections. A pneumonia shot; however, can help protect you against getting these illnesses. In fact, it is about 60 percent effective in preventing the most serious pneumonia, meningitis, bacteremia and death.

Individuals can get a pneumonia shot any time during the year. For most people, one shot is enough protection for a lifetime. People under 65 who have a chronic illness or a weakened immune system should ask their doctor about getting another shot 5-10 years after the initial injection.

Prevent Blindness Ohio Receives Prestigious Award

Prevent Blindness Ohio received a **Best Practice Award** for its role in initiating *Ohio's Aging Eye Public Private Partnership (AEPPP)*. Prevent Blindness Ohio facilitated the creation of the Partnership and coordinates its administrative and project activities. The AEPPP mission is to develop a strategic plan of action to address issues relating to vision care public policy, vision care services, vision education and vision research that impact the quality of life for Ohio's seniors now and in the future.

The award was presented to Prevent Blindness Ohio from Prevent Blindness America during the annual meeting in November 2005 in Chicago.

More Ohioans than ever are facing the threat of blindness from age-related eye disease. The number of Ohio seniors affected by these diseases is expected to double over the next 30 years as the Baby Boomer generation ages, largely resulting from the eye diseases of diabetic retinopathy, cataract, glaucoma and age-related macular degeneration. More than 2.5 million Ohioans will be affected.



The creation of AEPPP grew from Prevent Blindness Ohio's Ohio's Vision . . . Awaken to the Challenge Conference on April 28, 2003, where more than 100 policymakers, government officials, social service agencies and others gathered for a day of learning and discussion regarding many of the vision health challenges that will face Ohio seniors and their caretakers over the next three decades. The formation of the AEPPP and its on-going work is supported by a proclamation from Governor Bob Taft.

Prevent Blindness Ohio, founded in 1957, is Ohio's leading volunteer, nonprofit public health organization dedicated to preventing blindness and preserving sight. It serves all 88 Ohio counties, providing direct services to more than 600,000 Ohioans annually and educating millions of consumers about what they can do to protect and preserve their precious gift of sight. Prevent Blindness Ohio is an affiliate of Prevent Blindness America, the country's second-oldest national voluntary health organization. For more information visit the web site at www.pbOhio.org or call 800-301-2020.



Dr. Kwame Osei Named 2005 Distinguished Internist of the Year

Dr. Kwame Osei of The Ohio State University (OSU) Medical Center was recently named the 2005 Distinguished Internist of the Year by the National Medical Association (NMA).



Dr. Kwame Osei, M.D.

Osei received the top honor for his contributions to the development of a national model for high-risk diabetes patients seeking

one-stop treatment within their localities.

The focus of Osei's program is early detection and prevention of serious health complications related to diabetes. Osei and fellow endocrinologists from OSU visit community health centers and provide information on diabetes monitoring and self-management to local physicians and patients.

Osei conducts research related to diabetes and nutrition financed by several National Institutes of Health grants. He is also an expert in type 2 diabetes, endocrinology and metabolism.

The NMA is the largest and oldest organization in the United States representing more than 35,000 African-American doctors and the patients they serve.

Diabetes is a pandemic. In 2003, 194 million people worldwide, ranging in age from 20 to 79 years, had diabetes. By 2025, this number is projected to increase by 72 percent to 333 million, and nearly 80 percent of these cases will be in poorer, industrializing countries.

Importance of Daily Shoe Inspections

Daily shoe inspections are critical for persons with diabetes, especially if they have lost the feeling in their feet. Inspections should be completed by:



- Looking and feeling for any pebbles or foreign objects such as nails and/or tacks that may be coming through the soles.
- Looking for cracked uppers or rough seams that might cause a blister.
- Replacing or resoling shoes with worn heels and soles so proper foot support is available.
- Looking over tops and soles of each shoe, shaking them out and feeling inside.

SugarBytes

Detecting and treating diabetic eye disease with laser therapy can reduce the development of severe vision loss by an estimated 50 percent to 60 percent.

Useful Web Site Addresses

- American Association of Diabetes Educators
<http://www.aadenet.org>
- American Diabetes Association
<http://www.diabetes.org>
- Centers for Disease Control and Prevention
<http://www.cdc.gov/diabetes>
<http://www.cdc.gov/nchs>
- Centers for Medicare and Medicaid Services
<http://cms.hhs.gov>
- Department of Veterans Affairs
<http://www.va.gov/health/diabetes/>
- Health Resources and Services Administration
<http://www.hrsa.gov>
- Indian Health Service
<http://www.ihs.gov>
- Juvenile Diabetes Research Foundation International
<http://www.jdrf.org>
- National Diabetes Education Program, a joint program of NIH and CDC
<http://www.ndep.nih.gov>
<http://www.cdc.gov/team-ndep>
<http://www.cdc.gov/diabetes>
- National Institute of Diabetes and Digestive and Kidney Disease of the National Institutes of Health
<http://www.niddk.nih.gov>
- U.S. Department of Health and Human Services, Office of Minority Health
<http://www.omhrc.gov>



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If you would like to contribute an article for the next newsletter or if you are aware of other upcoming educational opportunities and internet resources, please send us your ideas.

****DEADLINE - for submitting news for the Spring Newsletter is: March 1, 2006**

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