



On July 24th, I had the pleasure of interviewing Tanya Miller R.N. and Diabetes Program Coordinator about diabetes.

Here's what she had to say:

What is diabetes?

TM: In the easiest terms to understand, diabetes is when the body is not able to use all the sugar that is eaten or put into it, it just floats around in the blood. The body is either not making enough insulin or not making any at all.

What are the treatments?

TM: When the doctor or nurse decides that a person has diabetes, they may give them a pill or a shot to take daily. On occasion, they may also suggest using a pump, if someone understands carbohydrate counting and is willing to monitor their blood sugar 5-6 times a day. They will decide which medication is best. The pill tells the body to produce more insulin. The shots are actually made of insulin. The person is then told that they need to test their blood sugar everyday, no matter if they are taking pills or shots. This is important. Although sometimes it may be suggested that the person can control their diabetes simply by exercising daily and following a healthy diet plan given by a dietitian. Everyone is different, which is why it is important that a person sees a doctor or nurse if they think they may have diabetes.

Who is at risk for diabetes?

TM: People have a higher chance of developing diabetes if they are overweight; if someone in their family has diabetes; if they had gestational diabetes when they were pregnant; if they do not exercise. Native Americans also have 2-3 times higher chance of developing diabetes compared to the rest of the American population. This is very high, and doctors and researchers still do not know why this happens. It has been estimated that about 15% of the Penobscot Tribe have diabetes.

How do you know if you have diabetes?

TM: Some symptoms that tell you that you might have diabetes are:

- ◆ You are thirsty often.
- ◆ You have to urinate frequently or sweat a lot.
- ◆ A high, random blood glucose test result.
- ◆ Results from a glucose tolerance test that are not normal.

What do diabetics have to do to take care of themselves?

TM: Diabetics should follow their diet, exercise and medication plan that their doctor, nurse or dietitian has given them. Diabetics have to test their blood sugar as often as they are told to. Some only test a couple of times per week if they do not need medication, but others test five times a day. Testing is so important to prevent late complications. When a diabetic has frequent high blood sugars over a long time, this can cause permanent damage to the eyes, kidneys, nerves, feet, or heart.

Every 3 months, a diabetic needs to go in for a check-up with their doctor or nurse. At this check-up, a blood test is usually done that can tell what the average blood sugar has been for the last 3 months. This is called a Hemoglobin A1C test. Besides having the blood test, the doctor or nurse needs to do a physical exam. The diabetic should also have an eye exam once every year and a dental exam once every 6 months. Most women should also have a pap smear test done once a year.. They should have a yearly flu vaccine, a tetanus shot every 9 years and have a TB test once in their lifetime. This 3-month check-up can decrease their chances of developing complications.

What can happen if diabetics do not take care of themselves?

TM: If diabetics do not take care of themselves, they can develop complications. These complications can be the following:

- Blindness
- The collapse of small veins
- Numbness and pain of the hands and feet.
- Kidney problems.
- Wounds that do not heal.
- Loss of feeling from nerve damage in all parts of the body.