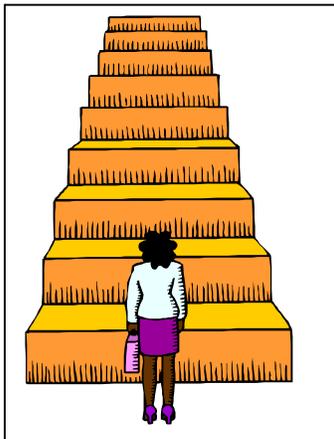


Coping with Diabetes

When you have diabetes you may feel unwell and have to deal with the fact that you have a life long disease. You also have to learn about taking care of yourself.

You play an active part in controlling your diabetes. Your provider or diabetes teacher will ask you to tell 9+63the ways you can change your behavior to improve your health. This will include the way you eat, sleep, control your weight and exercise all at the same time!



Coping with your diabetes will be the most important thing you can do for yourself and the people who care about you. You will find benefits in every step you take!
Being sick only makes you feel worse when you do not help yourself.

Here are a few ideas to help you cope and get through this learning period:

1. Let your friends and family help you. They may want to learn with you. Coping may mean you will ask people close to you to change the way they shop and cook.



2. Set small goals (such as losing five pounds or walking around the block three times a week) and work to meet your goals. Start by taking small steps to build your confidence.

3. **Do not feel guilty** if you slip up. Expect to slip up sometimes. The important thing is to keep trying.

4. When you reach a goal **congratulate yourself** on doing a good job. You can control your diabetes—don't let it control you!



5. Do not try too hard. Do not look at all the things you "should" do. If you try to do everything at once, you might feel overwhelmed and give up.

6. If you are having a problem keeping up with your program, **let your provider know**. Together, you can set goals that are reasonable.



7. Think positively. You can do this! The worst thing you can do is deny there is a problem. There is so much you can do to prevent problems.

8. Do not worry about what people will think. This is your chance to teach them that diabetes can be controlled.

**Having diabetes isn't the end of the world.
It's up to you to take charge.
You can make a difference.**



Go to your Goal Tracker and look at your Goals. Did you set goals you can meet? If you do not feel you can meet your goals change them! You want to be successful.

Coping with Denial, Anger and Depression

You have probably heard that Diabetes care is up to you. That is easier said than done.

Staying motivated 24 hours a day, seven days a week is hard.

The more you stick to your plan of care, the healthier and more energetic you will feel.

Sometimes you lose your drive. Your emotions may be getting in the way of following your diabetes plan. What do you do to get back on track? Learn to spot these feelings and what to do when they occur.

Three common culprits are denial, depression and anger.



Denial



Have you said, "Not me, there must be some mistake".

Denial is a normal reaction when you find out you have diabetes or any chronic illness.

The problem comes when you keep on denying that you have diabetes. Continued denial keeps you from learning to take control of your diabetes and keep yourself healthy.

Why denial?

Sometimes denial can serve a purpose. It is a way of coping with bad news. It can keep you from getting overwhelmed and depressed. It lets you accept bad news a little at a time, when you are ready.



- ✚ Denial can happen years after you are diagnosed with diabetes.
- ✚ Denial is serious because it prevents you from taking care of your diabetes.
- ✚ It keeps you from the fact that diabetes is a life long, chronic illness and if left untreated can lead to serious problems.
- ✚ Denial can also let your support group (family and friends) pretend that diabetes is not that serious.



Sometimes the comments your provider makes, "your blood sugar is good" or "you have a mild case of diabetes" may add to your denial. What you may hear is my diabetes is not serious.

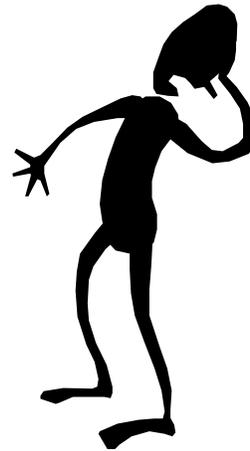
If you hear yourself saying or thinking the following you are *denying* or avoiding some part of your diabetes care.



- ✚ One bite won't hurt
- ✚ I'll go to the provider later, I feel OK now
- ✚ I don't have time to test my blood sugar, eat what I should or exercise
- ✚ I don't have time to eat breakfast
- ✚ My diabetes is not serious because I only take pills

How can denial hurt your diabetes self-care?

✚ Not checking your blood glucose— it can be a bother to check your blood sugar regularly. You may think that you know what your blood sugar is without testing. But a glucometer is much better at measuring your blood sugar.



✚ Not following your diet —changing eating habits and food choices is very hard. Denial could be the problem if you think:

- It costs too much to buy the right foods.
- I can't ask my family to change what they eat. I don't want to eat alone or fix two meals.
- I can't buy healthy food at work.
- It's too hard to bring my lunch.



✚ Eating right may not be as hard as you think, talk with a diabetes educator or dietician.

✚ Not taking care of your feet—you know you should check your feet each day, it takes too much time, you forget or it is hard and you have trouble moving around.

✚ Washing and checking your feet for signs of problems every day is necessary to find problems before they become serious.

✚ Smoking and diabetes is a deadly mix. Smoking increases your risk of problems from diabetes. Comments such as "I only take a couple of puffs" or "If I quit I will gain weight" are denial.

Denial can creep up from time to time; when it does you can fight back.

What can you do about denial?

Identify what parts of your diabetes care you are avoiding.
What can you do to change?

Understand why each thing on your list is important.

- ✚ Accept that it will take time to reach your goals; you didn't learn these habits yesterday.



- ✚ Tell your friends and family how they can help.

- ✚ Ask them to



encourage you to stay on your



meal plan or exercise plan.

- ✚ Encourage them to join you in eating healthy and exercising.



Depression

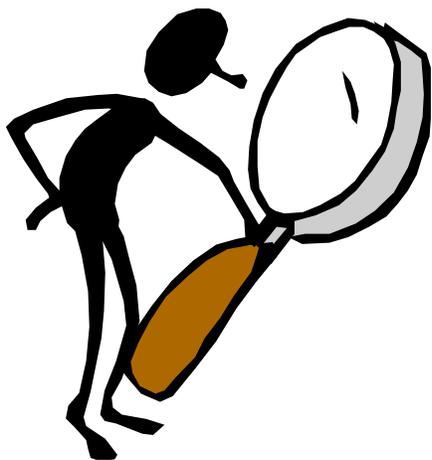
Everyone feels down once in a while, this is normal. If you feel sad, if life feels hopeless and these feelings last for more than two weeks you have a sign of serious depression.

People with diabetes are at greater risk for depression than people without diabetes. There are no easy answers as to why this is true.

Stress from the daily management of your diabetes can build up. You may feel alone or set apart from friends and family who do not have diabetes. You may feel like you are losing control.

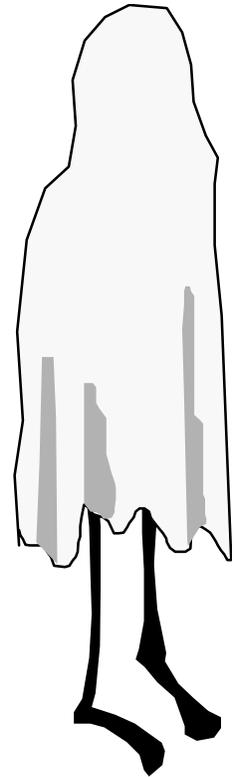
Depression can interfere with good diabetes care. If you are depressed chances are you will not have the energy to check your blood sugars, exercise and follow your meal plan. You may not feel like eating at all.

Step one: Spotting depression—if you have been feeling sad, blue, or down in the dumps, check for these symptoms.



- Change in appetite, you eat more or less resulting in quick weight gain or loss.

- Loss of pleasure, you no longer take interest in doing things you used to enjoy.
- Change in sleep patterns, you have trouble falling asleep, you wake up often during the night, or you want to sleep more often during the day. You wake up early and cannot go back to sleep.



- # Trouble concentrating, you cannot watch a TV program or read a book because thoughts and feelings get in the way.
- # Loss of energy, you feel tired all the time.
- # You feel nervous; you are anxious and cannot sit still.
- # Guilt, you feel like you "never do anything right".
- # Morning sadness, you feel worse in the morning than the rest of the day.
- # Suicidal thoughts, you feel like you want to die.



If you have three or more of these symptoms, or if you have just one or two but have been feeling bad for more than two weeks it is time to get help. If you think about suicide, talk to your provider or go to the emergency room immediately.

Getting help!

Do not keep these feelings to yourself!

Diabetes that is in poor control can make you feel depressed.

- # During the day high or low blood sugar can make you feel anxious.
- # Low blood sugar can cause hunger and eating too much.
- # High or low blood sugar at night can disturb your sleep.
- # High blood sugar may cause you to wake up at night to urinate and then you will feel tired during the day.

Talk with your provider there may be a physical reason for your symptoms. Physical causes of depression can include:

- ✚ Alcohol and drug abuse
- ✚ Thyroid problems
- ✚ Side effects from other medications

Do not stop taking your medications before talking with your provider.

Treatment for depression

1. Antidepressant medicine
2. Counseling or psychotherapy
3. Attend a support group

Anger

Anger can start at the diagnosis of diabetes with the question, "Why me?"

You may dwell on how unfair diabetes is. You may not want to treat it, you may not want to control it, and you hate diabetes.

One of the reasons that diabetes and anger go hand in hand is that you feel your life is threatened. Life with diabetes can seem full of dangers such as insulin reactions and complications. When you feel threatened anger often comes to your defense.



An example of how anger can affect your diabetes is:

Mary, a woman in her mid-fifties was diagnosed with diabetes six months ago. She was furious; she saw diabetes as not only a threat to her health but to her whole way of life. A very proud woman, active in community and social affairs she found it impossible to be open about her "weakness". She didn't want her friends to prepare special food for her. Denial fueled Mary's anger at diabetes.

Mary was stuck in an anger circle. She was angry at diabetes for changing her life. She refused to face her health care needs because she refused to change her life. Her diabetes went uncared for and her blood sugar levels stayed high. As the blood sugars levels went on uncontrolled she felt worse and her anger at diabetes grew.

You can learn to use your anger; you can put it to work for better diabetes care.

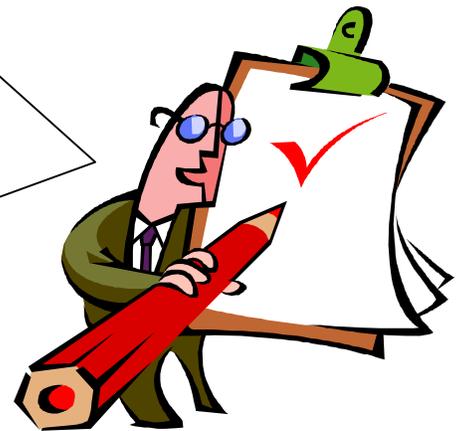
How do you change your anger circle?

Dr. Hendrie Weisinger in his Anger Work-Out Book suggests:

Figure out what is making you angry and how is it affecting your life?

Keep a diary of when you feel angry.
Each evening think back over the day.

- ✓ When were you angry?
- ✓ What time was it?
- ✓ Who were you angry with?
- ✓ What did you do about it?



After several weeks, you can go back and read over your notes. Do you see any patterns?



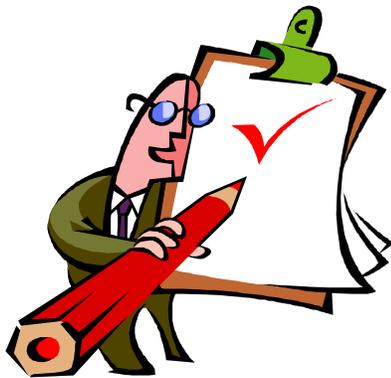
When Mary read over her diary she learned that social activities made her angry. She did not like talking about her diabetes in public. She felt angry if her friends asked her what she could eat or made a special food for her. She felt like her diabetes was the center of attention.

Change the thoughts, physical responses and actions that fuel your anger. Look for warning signs that your anger is building.



Do you feel tense?

Are you talking louder or faster?



When you feel anger taking over, calm yourself by:

- Talking slowly
- Slowing your breathing
- Getting a drink of water
- Sitting down
- Leaning back
- Quieting yourself

These steps do not mean you stop feeling angry, but you are taking charge of your anger.



Mary decided her anger was helping her avoid talking about her diabetes. She tried answering questions in a matter of fact way but this still made her furious.

Find ways to make your anger work for you. Your anger diary can help. How is your anger helping you cope with diabetes?

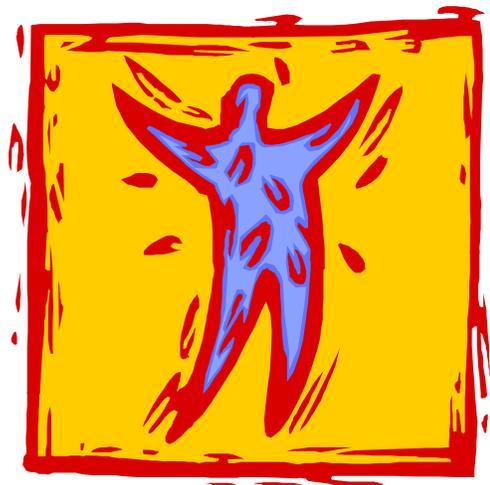


Mary's anger told her that she still hadn't accepted her diabetes. Going to diabetes classes and meeting other people with diabetes helped. She was able to enjoy her friends again and to tell them not to treat her special.

You may go on feeling angry. When you feel threatened, afraid, or frustrated, anger is a normal response. Anger may signal a need for you to take action.

The better you understand your anger, the better you will be able to use it for good self care.

Anger can be a force for action, change and growth.





Here are some ideas for your Action Plan. Pick things you are willing to try. Good luck and share with your educator and provider!

- WHAT you are going to do
- HOW MUCH you will do
- WHEN you will do it
- HOW OFTEN you will do it

Denial	I will (what example, eat breakfast) at (time example, 8 AM) (how often example, Monday, Wednesday and Friday) starting (when example, next week)
Depression	I will call (when) to make an appointment with my provider to talk about my depression.
Anger	When I start to feel (first signs of anger) I will (activity to decrease anger) for (how long), I will start on (day).
	I will keep an Anger diary for a week, each night I will look at my day and write down what made me angry.
	I will start on (day) After a week, I will look at the diary to see if there is a pattern.